

**HEALTH AND ADULT SOCIAL CARE SELECT (OVERVIEW AND SCRUTINY)
COMMITTEE**

TASK AND FINISH WORKING GROUP ON MENTAL HEALTH

TERMS OF REFERENCE

1. Role and Purpose of the Task and Finish Working Group

The Task and Finish Working Group is a working group of the Health and Adult Social Care Select (Overview and Scrutiny) Committee (HASC), with representation invited from the Health and Wellbeing Board (HWB), and is appointed in accordance with the Constitution of Hampshire County Council.

The Task and Finish Group's purpose is to review mental health services in Hampshire.

2. Scope of the Task and Finish Group

Objectives:

1. To provide assurance to the HASC regarding the quality of current acute adult mental health provision. This will include consideration of:
 - the acute care pathway, including the community acute mental health teams.
 - the use of beds, including out of area beds.
 - evidence of quality of services, including reduction in restrictive practice, patient experience, and CQC reports.
 - comparisons with best practice and national guidance.
2. To consider the role of key stakeholders in the acute mental health and social care system, including rehabilitation pathways, housing, and multiagency crisis care provision.
3. To consider future commissioning intentions and levels of funding.

In considering these issues, the Working Group will take account of how the findings of the HWB seminar can inform future developments, and how these work streams fit alongside work being led by NHS England to promote parity of esteem.

Purpose:

The purpose of the Working Group is to consider whether there are opportunities to improve the provision of mental health services in Hampshire, and to make recommendations as appropriate.

Exclusions:

The working group will not revisit service changes already undertaken, as the objective is to move forwards from the current position.

Outcomes:

The working group will provide a report, with any recommendations, to the Health and Adult Social Care Select Committee.

3. Method

The working group will meet with representatives of the two providers of mental health services in Hampshire, and representatives of commissioners of mental health services. If helpful, the working group may call on representatives of the groups overseeing related work streams such as the concordat steering group and parity of esteem group.

Where the working group requires further information in order to pursue the concerns outlined in the scope, such information will be requested.

4. Membership

The working group shall be a cross party group made up of six members, including representation from the HWB. The working group will co-opt any non-voting individuals they may find advantageous in the course of their considerations. The working group will invite a panel of expert advisers to attend their meetings to provide advice.

5. Meetings

The working group will hold an initial meeting to understand the various ongoing work streams in Hampshire relating to mental health services, and finalise the scope of their work. After this meeting, it shall meet as often as required to satisfactorily explore this topic.

It is anticipated the work of the group will conclude in time for recommendations to influence preparations for the 2016/17 commissioning/budget cycle.

6. Code of Conduct

Elected Members of the working group shall comply with the Hampshire County Council Code of Conduct applicable to Members.

7. Reporting

The working group will make regular updates to the HASC on the progress of considerations. It will make any recommendations for endorsement by the HASC, for forwarding to the NHS and partner organisations. Once endorsed by the HASC the report may be forwarded to the HWB should any recommendations relate to their remit.

The working group will cease to exist once its purpose has been fulfilled.

Annexe

Background

The HASC has continued over the past year to monitor the model of care for adult mental health services in Hampshire, following the substantial change of service undertaken in 2012 by the provider Southern Health NHS Foundation Trust (SHFT). The HASC noted in April 2014 that the Trust was continuing to experience difficulties in timely discharge of acute adult mental health patients, and subsequently wrote to the HWB to highlight this issue. The HASC also recently concluded a task and finish group on the use of section 136 of the Mental Health Act making a number of recommendations aimed at improving practice to a wide range of partners, including the HWB. Additionally, the HASC has initiated the monitoring of actions being taken by SHFT following the Care Quality Commission's inspection of services, which saw some areas of mental health rated as 'requires improvement'.

The HWB has maintained an overview of mental health issues over the past year, including considering 'Closing The Gap: Priorities For Essential Change In Mental Health' by the Department of Health, the national initiative the 'Mental Health Crisis Concordat', and in October 2014 held a seminar on 'mental health matters', with attendance and submissions from a range of partner agencies and related stakeholders.

In early 2015, both the HASC and HWB reflected on progress locally on the issues they have been monitoring. The Board was mindful not to duplicate the work being undertaken by the scrutiny committee regarding service changes, and the HASC was mindful that some aspects come within the remit of the HWB due to its strategic oversight and involvement in the Board by commissioners of health services.

In order to progress monitoring of this priority issue effectively, it is therefore proposed to form a working group of the HASC including representation from the HWB.

HASC remit:

5.4.1 To review and scrutinise any matter relating to the planning, provision and operation of the health service in Hampshire.

5.4.2 To make reports and recommendations to relevant NHS bodies and to relevant health service providers (as defined in the Local Authority (Public Health, Health and Wellbeing Board and Health Scrutiny) Regulations 2013) on any matter that it has reviewed or scrutinised.

5.4.3 To act as consultee to relevant NHS bodies or relevant health service providers on issues of:

a) Substantial developments of the health service in Hampshire;
and

b) Any proposals to make any substantial variation to the provision of such services.

5.4.4 Subject to the approval of the County Council to report contested proposals for major health service changes to the Secretary of State;

5.4.5 To scrutinise the social care services provided or commissioned

by relevant NHS bodies or relevant health service providers exercising local authority functions under Section 31 of the Health Act 1999;

5.4.6 To review or scrutinise health services commissioned or delivered in Hampshire within the framework set out below:

- a) Arrangements made by relevant NHS bodies or relevant health service providers to secure hospital and community health services to the inhabitants of Hampshire;
- b) The provision of such services to those inhabitants;
- c) The provision of family health services, personal medical services, personal dental services, pharmacy and NHS ophthalmic services;
- d) The public health arrangements in Hampshire; e.g. arrangements by the County Council for public health promotion and health improvement (including addressing health inequalities) in Hampshire.
- e) The planning of health services in Hampshire, including plans setting out a strategy for improving both the health of the local population and the provision of health care to that population; and
- f) The arrangements made by relevant NHS bodies and relevant health service providers for consulting and involving patients and the public.

HWB remit:

9.9.1 For the purpose of advancing the health and wellbeing of the people of Hampshire, to encourage persons who arrange for the provision of any health or social care services in Hampshire to work in an integrated manner.

9.9.2 To provide such advice, assistance or other support as it thinks appropriate for the purpose of encouraging the making of arrangements under Section 75 of the National Health Service Act 2006 in connection with the provision of such services.

9.9.3 To encourage persons who arrange for the provision of any health or social care services in its area to work with the Health and Wellbeing Board.

9.9.4 To encourage persons who arrange for the provision of any health or social care services and persons who arrange for the provision of any health-related services in Hampshire to work closely together.

9.9.5 To undertake a Joint Strategic Needs Assessment ('JSNA') for Hampshire having regard to any guidance issued by the Secretary of State and ensuring the involvement of the Local Healthwatch organisation, the people who live and work in Hampshire and each relevant District, Borough or City Council.

9.9.6 To oversee and assure the translation of that JSNA into a Joint Health and Wellbeing Strategy ('JHWS') to address the identified health and social care needs, having regard to the extent to which the needs could be met more effectively by the making of arrangements under Section 75 of the National Health Service Act 2006 and to guidance issued by the Secretary of State and ensuring the involvement of the Local Healthwatch Organisation

and the people who live and work in Hampshire.

9.9.7 To give the County Council its opinion on whether the County Council, in the exercise of its functions, is giving due regard to the JSNA and the JHWS.

9.9.8 To join up commissioning through a robust knowledge of need by ensuring the delivery of a comprehensive JHWS by the County Council, Clinical Commissioning Groups ('CCG's') and other partners.

9.9.9 To provide an opinion to CCG's and the County Council on whether commissioning plans have taken proper account of the JHWS and to give NHS England its opinion on the matter where appropriate.

9.9.10 To consider the exercise or proposed exercise of the commissioning functions of NHS England in relation to Hampshire.

9.9.11 To engage with the NHS on major service changes and reconfigurations ensuring that proposals are developed collaboratively and that they take advantage of opportunities for greater integration of services.