

Position Paper for the Children and Adults, Public Health and Voluntary Sector Policy and Scrutiny Committee

This position paper provides an update on the following:

- 1) a summary of the position a year ago
- 2) the current thinking and position and
- 3) the proposed direction of travel

CNWL Response

- 1) Our vision for future mental health services aligns with the Independent Review of the Mental Health Act 1983 by Professor Sir Simon Wesley which recommends four key principles of increased choice and autonomy, using the least restrictive option, ensuring patients are supported to get better and treating people as individuals. We need to anticipate these changes which will likely be voted in to law within the next year. Wesley's report echoed previous models like the Trieste model in Italy which emphasises the importance of treating mental health needs in a community setting and social inclusion. Our own evidence and feedback from service users and carers has taught us that people using services value accessible, non-stigmatising services in the community. Our key priority of reducing health inequalities will be supported by the forthcoming Mental Health Bill to promote modern, contemporary, respectful care which is provided in a community setting and not hospital-based.

CNWL is committed to engaging and consulting with residents, key stakeholders and partners so they can contribute to shaping the future of mental health services in Westminster. We want to make sure people experiencing mental health problems are able to have care which is integrated with community services, and includes those people important to someone, in a way that focuses on someone's strengths.

About 2% of local residents who use Mental Health Care need an inpatient service. Every inpatient bed is the same cost as caring for 44 people in the community. Our vision for the future is based on investing more on intervening earlier in the community with more preventative work. Our service users have told us they find inpatient care re-traumatising and we know that prolonged periods of inpatient care weaken people's links with their community, expose them to avoidable risks and lead to poor outcomes for people's housing, education and employment. In our Equalities, Diversity and Inclusion Review Black service users told us they were admitted to hospital and legally detained under the Mental Health Act when they would have preferred accessible, approachable, culturally appropriate services in the community. We are addressing these issues by providing a full spectrum of community services where people have alternatives to hospital admission in a community setting. When there is a need for a hospital bed we will make sure it is for as short a time as necessary and as close to the patient's community as possible.

- 2) The current status of the formal consultation on the Gordon Hospital wards is planned for launch in September 2023. This will provide time to engage on and

jointly develop the ongoing strategy around our mental health pathways to manage the mental health demand in Westminster. We intend to use this time to continue engagement with local communities and work alongside the Local Authority to contribute to the Mental Health strategy for Westminster and ensure our services meet the needs of local residents.

- 3) We are currently working in collaboration with the Performance Team at the ICS and with ICB colleagues to produce key metrics which evidence the direction of travel from treatment in acute inpatient beds to treatment in an enhanced community setting. The enhanced community offer includes a range of services providing intensive support to service users including a Crisis House offering 24-hour intensive support in the community, a Step-Down house which enables safe, timely discharge from hospital and enhanced Home Treatment providing face to face medical and nursing care up to twice a day in a service user's home.

We recognise that there is increasing demand in the system but our evidence from the last year tells us that creating alternative assessment and treatment spaces in the community produces better outcomes for service users compared to an increase in the number of acute inpatient beds.

- 4) We have already launched new initiatives including the 5 bedded Crisis House in Paddington and Step-Down Houses. We are planning to launch a number of new initiatives over the winter and these new services need time to embed and demonstrate effectiveness. We will use data and patient and partner feedback to help evaluate the effectiveness of the new services. Therefore, we plan to launch the formal consultation in September 2023 by which time we will be able to show whether the new developments have met their objectives. We have plans to meet Cllr Piddock and other Cabinet members to provide tours of the wards at the Gordon and new services in Westminster (the Crisis House, Enhanced Community services). This will provide an opportunity for Members to ask questions and hear first-hand about the recent and planned initiatives in Westminster.

Ann Sheridan
Managing Director, Jameson Division

Dr Gareth Jarvis
Medical Director, Jameson Division