

**MENTAL HEALTH – LIFEWORKS AND COMMUNITY PERSONALITY DISORDER
SERVICE – UPDATE.**

To: **HEALTH COMMITTEE**

Meeting Date: **11September2014**

From: **Neil Winstone, Associate Director, Cambridgeshire and
Peterborough NHS Foundation Trust (CPFT)**

Electoral division(s): **All**

Forward Plan ref: **Not applicable**

Purpose: **To update the Committee on progress with the proposals
for the provision of the Community Personality Disorder
Service, and the current position regarding the service.**

Recommendation: **The Committee consider the report**

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1. BACKGROUND

- 1.1 The aim of this report is to update the Committee on progress with the consultation about the Specialist Personality Disorder Service provided by Cambridgeshire and Peterborough NHS Foundation Trust (CPFT). The outcome of the consultation will not be known until the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) public Board meeting on the 30th September.
- 1.2 A meeting between the Health Committee working group and CPFT was held on the 1st July. The purpose of the meeting was to enable the working group to consider the proposals in more detail.
- 1.3 The consultation closed on 14th July 2014.
- 1.4 Since the consultation was launched, the situation has moved on considerably.
- 1.5 The sit-in at Tenison Road ended on Friday 4th July. This followed agreement being reached between CPFT and the service users. The agreement is in two parts. In summary these are;
 - a. Part one - provision of Lifeworks in Cambridge for a period of 5 years.
 - b. Part two - for service users, CPFT and others to develop a joint proposal for future funding to take to commissioners.
- 1.6 If part two is successful, then part one would no longer be required as it would be replaced by the agreed service model.
- 1.7 Despite the ending of the sit-in and the good stakeholder joint working taking place, it was important to conclude the consultation, so that the services provided by CPFT can be implemented, and so that any joint proposal can be considered taking feedback into account.

Consultation responses - Headlines

- 1.8 In total 58 responses to the consultation was received. Of these, 25 were submitted online via the survey monkey, 9 were emailed to the project mailbox and 24 arrived by post.
- 1.9 There was a mixture of individual and group responses.
- 1.10 Overall, the majority of the respondents were from Cambridge City or South Cambridgeshire. This is unsurprising as the current service is focused in Cambridge, although efforts were made to disseminate information about the consultation in all parts of the county.

Table 1: Number and proportion of respondents from Cambridgeshire & Peterborough LA districts

Cambridge City	South Cambs	East Cambs	Huntingdonshire	Fenland	Peterborough	Other
48%	30%	4%	8%	2%	6%	2%

- 1.11 Roughly half (53%) of the respondents were service users, carers or members of the public, and just under a third (29%) were NHS professionals.

Table 2: Summary of responses

To what extent do you think the proposals help to achieve the following aims?

	Negative impact	Neither positive nor negative	Positive impact
To use resources as efficiently as possible	45%	23%	32%
To meet the needs of patients across the whole area served by the Trust in an equitable way	32%	23%	45%
To provide services which are recognised as effective (i.e. there is evidence to prove that they are effective)	40%	27%	33%
To maximise the number of people who can be seen by the service	29%	19%	52%
To provide a service that supports recovery (see glossary at the end for what we mean by recovery)	39%	24%	37%

- 1.12 There were differences between the responses from service users/public and professionals, as the following examples show. Overall the professionals were much more likely to think the proposals would have a positive impact.

Table 3: Breakdown of responses between service users/public and professionals

To what extent do you think the proposals help to achieve the following aims?

	To use resources as efficiently as possible				
	Negative Impact	Neither	Positive impact	blank	Total
Health or Social Care Professional	10%	10%	80%	0%	100%
Organisation	0%	29%	29%	43%	100%
Public	63%	22%	11%	4%	100%
Grand Total	41%	20%	30%	9%	100%

	To meet the needs of patients across the whole area served by the Trust in an equitable way				
	Negative Impact	Neither	Positive Impact	blank	Total
Health or Social Care Professional	10%	0%	90%	0%	100%
Organisation	0%	29%	29%	43%	100%
Public	48%	19%	30%	4%	100%
Grand Total	32%	16%	43%	9%	100%

- 1.13 There were differing views and perceptions about the use of resources and equity of access, with the view in Cambridge broadly of a loss of resource, whereas elsewhere in the county the view was that the proposals were an improvement on current provision.
- 1.14 As mentioned, a project group has been formed to take forward the joint proposal. This has met on a number of occasions including a wider stakeholder event held on the 8th August. The membership includes service user and carer representatives, CPFT, MIND, HealthWatch, and the CPFT Recovery College. The aim is to conclude this work in the autumn with a proposal to go to commissioners for funding.

Main feedback themes

- 1.15 To enhance the transparency of the consultation process, a meeting was held on 31st July involving council members from Cambridgeshire and Peterborough, representatives of HealthWatch and the CCG to review all written submissions to the consultation, so that once the consultation response document is published by CPFT, there can be confidence that it fairly reflects the feedback provided.
- 1.16 The main themes of the feedback to the consultation are;
- a. Need for lifelong support and stability. Concern about post-discharge support, access to crisis support and the role of GP's and other organisations.
 - b. Need for social support interventions and opportunities to socialise
 - c. Greater equity welcomed but is the offer sufficient to meet needs?
 - d. Service users need to be treated as individuals. Offer seems rigid and too medical-driven
 - e. Consultation unsatisfactory and information not clear.
 - f. Service user participation in service design.
 - g. Review and evaluation of new pathway
 - h. Concerns about the funding for mental health services, and the view that funding in mental health may create savings in the wider health economy.

2. MAIN ISSUES

- 2.1 A final decision on the outcome of the consultation will be made at the CCG Board meeting on the 30th September 2014. CPFT will also publish the full response to the consultation summarising the responses from the consultation process and suggestions for the way forward.

3. SIGNIFICANT IMPLICATIONS

3.1 Resource Implications

Depending on the outcome of the consultation, and any forthcoming joint proposal, additional resources will be needed.

3.2 Statutory, Risk and Legal Implications

None.

3.3 Equality and Diversity Implications

The Equality Impact analysis has identified that overall there is an improvement in access geographically and in terms of consistency in the type of evidence-based interventions to be provided. There is no adverse impact on any protected group.

3.4 Engagement and Consultation Implications

The development of the terms of reference for the consultation have involved the CCG, OSC working group, HealthWatch CPFT and service users

3.5 Localism and Local Member Involvement Implications

None

3.6 Public Health Implications

The proposals will have an impact on current and future users of the Personality Disorder Service.

Source Documents	Location
<ul style="list-style-type: none">• Consultation Paper: Personality Disorder Community Service/Complex Cases Service, including Lifeworks	http://www.cpft.nhs.uk/Downloads/DVD-Documents/Publications/PD%20pathway%20consultation%20paper%202014%2006%2002%20final2.pdf
<ul style="list-style-type: none">• NICE guidance - borderline personality disorder CG 78• NICE guidance – antisocial personality disorder CG 77	http://www.nice.org.uk/CG78 . http://www.nice.org.uk/guidance/CG77