

Summary Report:

Developing Health and Independence (DHI)

Thursday 13th March 2015 | 2:30pm – 3:30pm

The Beehive, Beehive Yard, Bath

Attendees:

- Mike MacCallam (B&NES Council and BaNES CCG)
- Sue Blackman (Programme Manager)
- Barry Grimes (BaNES CCG)

The meeting was attended by approx. 30 staff and service users of DHI with representatives from a wide range of DHI services including alcohol and substance misuse support, aftercare, counselling, complementary therapies, criminal justice services, resettlement, floating support services and supported housing

Introduction:

Mike MacCallam and Sue Blackman presented an overview of the purpose and principles of the **your care, your way** review. Mike explained the definition of community services and the phases and timing of the review. He also shared some of the themes that have emerged from previous engagement events including:

- The role of system navigators is key to delivery of seamless and integrated services
- There must be strong relationships between organisations and departments within organisations
- The role of voluntary and third sector providers is key
- The behavioural and cultural barriers around information sharing must be addressed
- Primary care is central to the role of community services and GP's recognise they have a key role as "caretaker" in a person's pathway of care

Mike explained that this is a key opportunity for commissioners, providers and our community to be innovative, be imaginative and be bold in helping to shape the outcomes of the review. We want to be proud of what we achieve as a result of the review.

Group Q&A Session

Q1: When will the implementation and delivery phase of the project take place?

As with all complex projects, the detailed timings and milestones for each phase will be determined by the previous phase. However, we have allowed approximately nine months for service implementation within the high level plan with an expectation that new services will be live from April 2017. The market testing strategy will be developed during the design phase (phase 2) and this will determine how the implementation may be approached i.e. phased vs simultaneous implementation.

Q2: From a provider perspective, we need time to prepare for a procurement exercise. When will a decision on procurement be made and will that decision be fully transparent?

The ***your care, your way*** review includes a “Commercial and Contracting” workstream that supports the development of the market testing strategy. Any decisions around this strategy will be shared with all providers as soon as possible and in a consistent manner. We are prepared to be challenged and we recognise the need for transparency around the decisions we take. The market testing strategy for community services is yet to be defined and will be dependent on the findings of engagement with stakeholders. This will be further developed during the summer of 2015

Q3: There are barriers that exclude people from accessing services and there are additional challenges for DHI users. Navigators need to be able to deal with this.

We want services to be as inclusive as possible and we recognise that services need to be tailored around an individual's unique needs. We must also ensure that the review allows for an environment where equal priority is given to mental and physical health.

Q4: What is the role of the voluntary sector within this review and how will small and medium sized organisations be part of the offer?

The role of the voluntary sector and SMEs is pivotal in community services and we will need to assess and understand the strengths and weaknesses that these organisations can bring. In order to do this, we are planning to hold a series of focus groups during the design phase of the review at which we expect voluntary sector delivery staff to be fully represented

along with other community service providers, primary care and service users. Full details of these workshops and how to get involved will be released over the coming weeks.

Q5: Do you see that drug, alcohol and substance misuse services are within the scope of the review?

We see these services as an essential part of the community model. However, the specific scope will be developed with our stakeholders during the next phase of the project.

Q6: Is the review broader than traditional health services?

Yes. The review spans the complete spectrum of health and social care and we are also considering how we interrelate with Council strategies on housing, education and transportation etc.

Feedback from Group Discussion

Sue introduced some of the drivers for change and talked about our desired outcomes and asked the groups to think in this context about:

- What works well?
- What are the barriers? How do we overcome them?
- What are the opportunities? How do we seize them?

What are the barriers? How do we overcome them?

- Our clients have complex needs and there is a perceived lack of support for our client cohort therefore integration with mental health services is vital.
- Getting people in for assessments can be really difficult for DHI users so there needs to be flexibility built into the care package that is tailored around the individual.
- The criteria for getting mental health support are often very restrictive when our clients need to access the right services at the time of need. Therefore the availability of accessible and flexible mental health services needs to be addressed.
- The availability of an identified crisis teams is key in order to provide timely support.
- Clients who are particularly vulnerable and with very complex needs require services to be more flexible. With existing services we often get told “there is no point”!

What are the opportunities? How do we seize them?

- DHI is great at getting people in the door and engaging them. Other services are more like gatekeepers.
- Parity of esteem between partners in the system is key to reduce hierarchies and build a sense of trust
- We need to forge more respect and trust between partners
- Having people with mental health qualifications embedded in the service would help
- We need a behavioural/cultural change across the system and we need transparency

Next Steps

Mike and Sue thanked everyone for their input and suggestions.

- Attendees took away booklets and leaflets to read and share.
- Further feedback is invited via the website <http://www.yourcareyourway.org>
- Individuals can also feedback by writing a letter, making a phone call or using Facebook and/or Twitter
- DHI offered to pursue further ideas via their service user forum and pass on any feedback to **your care, your way**. The **your care, your way** team are happy to support these events if required.

Information will follow in the coming weeks regarding the planned focus groups and we will contact all stakeholders involved in our engagement directly once dates and agendas have been confirmed. It is expected these workshops with commence in May 2015.