



Belfast City Council

Report to:	Strategic Policy & Resources Committee
Subject:	CONSULTATION – BELFAST HEALTH & SOCIAL CARE TRUST: EXCELLENCE & CHOICE (ADULT MENTAL HEALTH SERVICES)
Date:	Friday 20 th March 2009
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Relevant Background Information

Purpose

To bring to the attention of the Strategic Policy & Resources Committee details of a further round of consultation by the Belfast Health and Social Care Trust (the Trust) on its future service delivery, consisting of four "*Excellence and Choice*" consultations – three linked to adult mental health services and one in relation to services for older people. This report deals with the three mental health consultation documents.

Background

The Trust was formed in April 2007 from the merger of six former Trusts and since then has been working to build joined-up hospital and community services. It aims to provide "high quality care in a way that gives people choices and offers the right care in the right place" and which avoids unnecessary duplication of services. To achieve this it began the process of reviewing its strategic direction and examining how it will deliver services in the future. Towards the end of last year, it issued the consultation: "New Directions: A conversation on the future delivery of health and social care services in Belfast" which set out its strategic thinking regarding future service delivery. A report on this consultation was brought to SP&R Committee in October 2008 and a formal response was subsequently submitted to the Trust. These consultations now build on and develop the adult mental health proposals made in "New Directions". Members will also recall that William McKee, Chief Executive, Belfast Trust, recently addressed the Committee on 20th February 2009 to explore the Trust's proposed strategic direction.

Key Issues - Strategic Context

In developing its proposals, the Trust has taken into account the Programme for Government Priorities for Action 2008-11 and Health and Social Care targets; the Bamford Review; the EHSSB Strategy for Adult Mental Health Services (2004) which was independently quality assured in 2008, and the findings from an independent consultation exercise on the current three Belfast acute inpatient psychiatry units (May 2008). It was noted that the EHSSB had accepted the recommendations in the reviewed EHSSB Strategy for Adult Mental Health (which included a recommended reduction in adult acute admission beds and in-patient units) and is setting up a service development reference group to action this. The findings from the acute inpatient psychiatry unit consultation exercise indicated that:

- All participants indicated they would like to see 'a modern fit for purpose building(s)' with universal acceptance that the current buildings on all three sites were unfit for purpose;
- For many of the stakeholders the quality of the patient experience was much more important than location and structure of any future inpatient provision.
- There was no clear consensus in relation to the location of services as responses tended to be very dependent on where an individual worked or had received treatment.

Whilst information on mental illness in N Ireland is limited, the Bamford Review highlighted that:

- In 2001, 24% of women and 17% of men reported a mental health problem (NI Health and Social Well Being Survey). These rates were over 20% higher than those in England or Scotland
- In any one year, over 400,000 people in NI will experience distressing psychological symptoms; 300,000 people will consult a GP and 160,000 will develop a mental illness (Mental Health Action plan)

- In relation to Belfast, an estimated 18,000 – 20,000 referrals are made to mental health services per annum. The Trust's new single point of access for referrals (established in September 2008) is currently receiving up to 1600 referrals per month.
- A University of Ulster report published in 2000 found that there were much higher levels of mental health difficulties among patients of GPs in North and West Belfast than elsewhere in N.Ireland
- There has been a substantial increase in suicide over the past 20 years among younger people. It is now the number one cause of death among 18-24 year olds in Ireland.

The Trust states that it wants to better organise and deliver care and treatment so that services are easier to access, more flexible and are delivered by the right person in the right place. The aim is to provide the highest quality of care and treatment. However, this must be set within the context of resources. The Department of Health has recognised that additional resources are required for mental health to deliver the vision as set out in the Bamford Review and has secured an extra £44m over the next 3 years to begin the modernisation process; whilst the EHSSB is making available almost £5m of new investment over the next 3 years to enhance the range of community services available within Belfast which will support the delivery of the new mental health service model. Whilst the Trust currently has around £57.7m available annually from commissioners to support the delivery of mental health services, it must also achieve efficiency savings of 3% every year for three years. This equates to £4.3m efficiency savings for mental health services over the 3 year period. The Trust has therefore commenced a modernisation programme and an organisational reform programme (called MORE – Maximising Outcomes, Resources) to help meet these efficiency targets.

Summary of the Consultations

The consultation documents considered in this report are:

- Excellence and Choice - A consultation on the future delivery of Adult Mental Health Services
- Excellence & Choice - A consultation on the Re-Provision of Mental Health Services at Victoria Day Centre
- Excellence and Choice - A consultation on the Re-Provision of Acute Psychiatric Services Windsor House

The first consultation document sets out the guiding principles for the delivery of adult mental health services and the proposed new service model – i.e. the way the Trust would propose to deliver adult mental health services into the future. The remaining two consultations consider the re-provision of services, and specifically, the proposed closure of an existing day care centre (Victoria) and the proposed closure of an acute inpatient mental health unit at Windsor House. An equality impact assessment has been undertaken in relation to both proposals and forms part of the consultation process.

The Trust is proposing a new model of acute mental health service model which will be underpinned by a recovery ethos with users and carers being at the centre of planning, implementing and monitoring services. It proposes to provide modern mental health services characterised by:

- the further development and enhancement of home treatment services;
- a refocusing and revitalisation of existing community day treatment services;
- revitalised and more socially inclusive day support services;
- enhanced therapeutic input to inpatients; and
- a resultant reduced reliance on acute inpatient beds.

Consultation Questions:

1. Do you agree that the Trust mental health service model should be underpinned by a recovery ethos with users and carers being at the centre of planning, implementing and monitoring services?
2. Do you support the Trust service model of referrals being directed through a single point of referral?
3. Do you support the 4-tier model for addiction services?
4. Do you support the proposed model for day support services? Can we have your comments on the specific proposal to close Victoria Day Centre (more details available in separate document)?
5. Do you support the future community based model for recovery and rehabilitation services?
6. Do you agree with the proposed model of care for acute services? Can we have your views on the specific comments on the proposal to close Windsor Acute Psychiatry Unit (more details available in

separate document)?

7. Do you agree with the proposed outreach model for day treatment services?
8. Do you agree with the proposals for the future development of specialist services?
9. How should users and carers be involved in the planning, delivery and monitoring of adult mental health services in future in the Belfast Trust?

Respondents are asked to provide more details against each of these questions, and particularly, if they did not agree what they would propose instead.

Copies of each of the consultations and associated EQIAs will be made to the Party groups and are available at <http://www.belfasttrust.hscni.net/involving/Consultation.html> A summary of each of the consultations are also appended to this report.

The consultation closes on 26th March 2009. Following an analysis of the results, a report will be presented to the Trust Public Board meeting on 23 April 2008, which is open to the public.

Recommendations

It is recommended that the consultation documents be referred to the Party Groups on the Council for individual consideration and comment to enable Members to highlight local circumstances or issues, particularly from a local service user perspective, which should be taken into account by the Belfast Trust.

Key to Abbreviations

Belfast Health and Social Care Trust - the Trust

EHSSB – Eastern Health & Social Services Board

EQIA – Equality Impact Assessment

Documents Attached

Appendix 1 – Summary of the Belfast Trust 'Excellence & Choice' Adult Mental Health Consultations

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Summary of Consultations: Excellence and Choice – Adult Mental Health

Guiding Principles for delivery of Adult Mental Health services

Building on the guiding principles outlined in its New Directions document, the Trust has developed the following principles to guide the approach to modernising adult mental health services:

- Services will be person-centred
- Services will be delivered at the right time, in the right place, by the right person, for the right length of time based on assessed needs
- Everyone has a right to experience community living
- Everyone has the right to experience the same level of service, regardless of location
- Services will be planned, implemented and evaluated in partnership with users and carers
- All adult mental health services will be provided on a Belfast wide basis
- Service improvement and modernisation will be based on best practice
- Staff will be supported in their professional and personal development
- Services will be delivered in an efficient and effective manner within available resources
- Psychological therapies and treatments should be more available to those who need them

1. The new model for adult mental health services

The new mental health service model that the Trust proposes to develop will be underpinned by a recovery ethos with users and carers being at the centre of planning, implementing and monitoring services.

Current Provision	Proposed New Model
<p>A wide range of community and hospital based mental health services are provided organised under the following areas.</p> <ul style="list-style-type: none"> • Primary Mental Health Treatment services • Recovery Mental Health services • Specialist mental health services 	<p>Services will be managed under 3 main areas:</p> <ul style="list-style-type: none"> • Primary Mental Health Treatment • Recovery (including specialist services) • Acute Services
<h3>2. Primary Mental Health Treatment</h3>	
<p>This area includes local Primary Mental Health Care Treatment Teams, Psychological Therapies, Addiction Services and services for those affected by the Troubles.</p>	
Current Provision	Proposed New Model
<p>Primary Mental Health Treatment Teams - are most effective with mild to moderate mental health problems, e.g. depression, anxiety, post traumatic stress or phobias. The Trust operates 2 Teams covering:</p> <ol style="list-style-type: none"> a. North and West Belfast (based in Twin Spires, moving to Everton) b. South & East Belfast and Castlereagh (based over 4 sites Woodstock Resource Centre, Windsor House, Dunluce HC and Finaghy HC) 	<p>The Trust proposes that every referral to mental health services will be through the Single Point of Referral Triage Service to improve access and ensure clients are seen more quickly by the most appropriate service. Referrals can be made by GPS, individuals or carers/family. Services will be based on a stepped care model of treatment, short interventions with signposting to community and voluntary sector services and access to intensive treatment if appropriate.</p>
<p>Self Harm - there is an established Self-Harm Team at the Mater Hospital which provides support, treatment and signposting for people who present at A&E and have self-harmed.</p>	<p>The Trust proposes to invest additional resources to allow the Team to provide a service across Belfast.</p>
<p>Trauma Resource Centre - based at Everton Complex. Offers multi-disciplinary support for those suffering from the effects of the "Troubles"</p>	<p>Recurrent funding has now been identified to sustain the Trauma Resource Centre.</p>

Current Provision	Proposed New Model
<p>Addictions services: The Trust operates 2 Community Addictions Teams - one is located in Woodstock Lodge and covers South and East Belfast and Castlereagh; and another is based in Everton, which covers North and West Belfast.</p> <p>A Drug Outreach Team operates from Lower Crescent and staff within the team encourage drug users to consider treatment or harm reduction.</p> <p>A day treatment service is available at Shaftesbury Square Hospital.</p> <p>There is also a Drug Arrest Referral Scheme available in the two main custody suites in Belfast at Musgrave Street and North Queen Street PSNI Stations.</p>	<p>The Trust proposes to deliver Addiction Services under a 4 tier model as recommended by Bamford:</p> <ul style="list-style-type: none"> • Tier 1: support for self help (via Community Addictions Team) • Tier 2: Drug Outreach and Harm reduction services, advice and support • Tier 3: support to patients with addictions in hospital (via Community Addictions Team) • Tier 4: Day Hospital service/access to residential beds <p>Referrals to the Community Addictions service will be through the Single Point of Referral dually based in Woodstock Lodge (South & East Belfast, Castlereagh) and Everton (North & West Belfast)</p> <p>The accommodation in Shaftesbury Square Hospital has not been fit for purpose for a number of years. The Trust will therefore review future accommodation options for the re-location of these services.</p> <p>Subject to ongoing funding from the NIO, the Drug Arrest Referral Scheme will continue at Musgrave and North Queen St PSNI stations</p> <p>The EHSSB are currently undertaking a review of Addiction services within the Board's area. The Trust will take into account recommendations from the review when completed.</p>
<p>Psychological Therapies – more intensive psychological and psychotherapy and services</p>	<p>In future these will become more widely available, with improved response times. (Target - 13 week waiting time for access to services by March 2009)</p>

3. Recovery Mental Health Services

This area includes Community Mental Health Teams, Day Centres and hospital recovery services. Under the new adult mental health model, will specialist services also located within this area.

Current Provision	Proposed New Model
<p>Community Mental Health Recovery Teams - multi-disciplinary teams providing intensive support for more severe mental health problems. The Trust has 4 Teams covering South, East, North and West Belfast.</p>	<p>The Trust will provide training and skills to ensure that treatment planning focuses on recovery. Teams will take on an assertive outreach function (i.e. actively engaging with people who are not involved with mental health services and may require them) along with patient education.</p>
<p>Day Centres - social support and rehabilitation activities to support recovery.</p> <p>The Trust currently manages 4 day centres:</p> <ul style="list-style-type: none"> • Victoria (East) • Ravenhill (South) • Whiterock (West) • Everton (North) <p>The Trust also funds places in 4 voluntary sector day centres:</p> <ul style="list-style-type: none"> • Beacon House (East) • Aspen (South) • Club 37 (Central) • New Horizons (Duncrue) 	<p>The Trust believes that the current services provided through day care centres do not adequately promote a recovery ethos or social inclusion. It wants to re-model the service so that clients are supported in their recovery within their own communities through social inclusion, education, training and employment opportunities. This will be achieved by developing and implementing individual recovery plans thereby reducing the need to attend the Trust day centres in order to receive the support they require.</p> <p>The Trust is proposing to:</p> <ul style="list-style-type: none"> • Reduce the number of Trust day centres from 4 to 3 with a proposed closure of Victoria. (see linked consultation) • Refocus the remaining Trust Day Centres to support education, training, employment and inclusive leisure activities through stronger links to other agencies and providing enhanced outreach services, within clients own communities. • Work in partnership with the voluntary sector to enhance services delivered at the voluntary centres.

Current Provision	Proposed New Model
<p>Hospital Recovery Services - a period of rehabilitation in hospital.</p> <p>At present patients in Belfast access beds in 5 wards on the Knockbracken Healthcare Park site 129 beds in total.</p>	<p>Hospital Recovery Services</p> <p>The Trust believes that these services have not been as recovery focused as required and that in the longer term, rehabilitation and recovery is best managed in a community setting. It states that in the future, fewer people will be admitted to hospital and will spend a shorter time there, given the level of treatment and support that will be available in the community. The Trust has already begun to reduce admissions and with further investment in community services expects to see admissions reduce further. It intends to develop community rehabilitation facilities as a replacement for current hospital provision; but as an interim measure, will continue to offer a hospital recovery service at Knockbracken i.e 3 specialist units providing a time limited treatment programme developed around each patient's needs so that the hospital is not viewed as a permanent residence. However, the current beds in Knockbracken will be reduced over time.</p> <p>To support the delivery of a community based model, modern high quality accommodation is required. On completion of this consultation, the Trust is proposing to prepare a business case to support the development of new community accommodation for rehabilitation services. This will include 2 Trust Community Rehabilitation Units (Ormeau Road and a new development to replace Old See House, North Belfast).</p>
<p>4. Acute Mental Health Care Services</p> <p>The new mental health service model that the Trust proposes to develop will be underpinned by a recovery ethos with users and carers being at the centre of planning, implementing and monitoring services.</p>	
Current Provision	Proposed New Model
<p>Home Treatment Services - a relatively new service that enables patients to receive community based access to intensive care and treatment without admission to hospital. Treatment can be provided in a person's own home, or for a short-term basis, in community treatment beds.</p>	<p>The development of the Home Treatment Service and community treatment beds will continue. This will mean fewer people being admitted to hospital for acute treatment as more people receive the help they need either at home or through day treatment services. The Trust will be expanding the number of places on the Home Treatment service. The 6 Community treatment beds will be re-located from their current location on the Antrim Road to the new Mental Health Treatment and Resource Centre on the site of Old See House, which will be completed over the next 2-3 years.</p>
<p>Acute Hospital Mental Health Hospital Services - psychiatric inpatient units. The Trust currently has 3 acute mental health units:</p> <ul style="list-style-type: none"> • Windsor House (35 beds) at the Belfast City Hospital; • the Mater (55 beds); and, • Knockbracken (48 beds plus a 16 bed Psychiatric Intensive Care Unit). 	<p>The development of the Home Treatment Service will reduce the need for acute hospital beds. Therefore the Trust believes that in the future, the most effective way of providing the acute psychiatric service is on a single site. The Trust is proposing that the current 3 units are initially reduced to 2 during 2009/10 and for the 2 remaining units to close when a new purpose built unit is available. The Trust will prepare a business case for a new purpose built acute psychiatry unit. Options for the location of this new unit will be considered as part of this process. Because of the current poor condition of Windsor House and number of beds, the Trust proposes that it is the most appropriate unit to close. (linked consultation)</p> <p>In line with best practice, the Trust is proposing that the psychiatric intensive care unit will be co-located with the new single acute psychiatric unit (when available).</p>

Current Provision	Proposed New Model
<p>Day Treatment Hospitals – the Trust currently provides 3 day hospitals :</p> <ul style="list-style-type: none"> • Windsor • Woodstock • Old Sea House 	<p>The Trust believes the current model of day treatment, where patients travel to a day hospital facility is outdated and not recovery focused. Services need to move away from a solely facility based approach to delivering treatment and support to clients nearer to their own communities. The Trust is therefore proposing that the current day hospital services are re-provided on an outreach basis (i.e. using Trust Wellbeing & Treatment Centres, day centres, community resource centres etc).</p> <p>The planned new Mental Health Treatment & Resource Centre on the site of Old See House will provide a future central operational base for staff as well as day treatment facilities. Woodstock Lodge will provide a temporary base for staff until the new Resource Centre is completed. The implementation of this new model will mean that the day hospital facility at Windsor House will close (see separate detailed consultation).</p>
<p>5. Specialist Services - The Trust provides a range of specialist adult mental health services, some of which are delivered for the EHSSB area or for the NI region as a whole:</p> <p>Eating Disorders Service – outpatient based service for over 18 year olds in the Eastern Board area based in Woodstock Mental Health Resource Centre. There will be a further development of Tier 3 services, which will allow day treatment to be provided for the first time in Northern Ireland (funding has been identified). The requirement for inpatient or refeeding beds will be considered when this service is established and the need can be assessed.</p> <p>Mental Health and Deafness Team – a specialist regional service for people with Hearing Difficulties and Mental Health problems, based at Woodstock Mental Health Resource Centre. The Trust will be exploring the accommodation requirements for this specialist service for the future.</p> <p>The Neurobehavioural Unit (Maine) – specialist inpatient unit for patients with mental illness associated with acquired brain injury and neurological problems. The Trust provides a regional service at Knockbracken Healthcare Park (15 beds) and a Day Support Unit for EHSSB patients. The Trust wishes to develop the unit as a NI centre of excellence. The current facility is not fit for purpose and a review of the accommodation required to support the service into the future will be undertaken. There is currently a regional review being undertaken in relation to brain injury which the Trust will also take into account.</p> <p>Community Forensic Team and Shannon Medium Secure Unit – service for people with mental health problems within the Eastern Board area who have been involved with the Criminal Justice System. Based at Knockbracken Healthcare Park recent investment has facilitated the expansion of services. This work will be taken forward in the context of a Departmental steering group for forensic services.</p>	
<p>6. User and Carer Involvement in the Planning and Delivery of services</p> <p>The Trust states that users and carers should be at the centre of planning, delivery and monitoring of the existing and proposed service models. But whilst the Trust currently has in place a range of user and carer advocacy services, more needs to be done. The Trusts wants to build on existing user and carer involvement and intends to enter into a dialogue with users and carers in relation to how this can be best achieved in the future. A user consultant is to be employed by the Trust. This new post, which will part of the senior management team will enhance the current advocacy arrangements and help in ensuring that the views of users and carers are at the centre of the planning and delivery of mental health services.</p>	

Summary – Linked Service Provision Consultations:

- (i) **The Re-Provision of Acute Psychiatric Services (Windsor House)**
- (ii) **The Re-Provision of Mental Health Services (Victoria Day Centre)**

These consultation documents explore in more detail the Trust’s proposals in relation to acute psychiatric services and day centre provisions, as outlined in the Excellence and Choice – Adult Mental Health summarised above. Both consultations result in the recommended re-provision and closure of an existing service; therefore the Trust has provided more detail on the proposals and the rationale for change. Each consultation is accompanied by an Equality Impact Assessment.

(i) **The Re-Provision of Acute Psychiatric Services (Windsor House)**

This consultation document details the strategic context and option appraisal for the reform and modernisation of the mental health acute psychiatric services. The Trust is proposing a new model of acute mental health services characterised by:

- further development and enhancement of home treatment services;
- a refocusing and revitalisation of existing community day treatment services; and,
- a resultant reduced reliance on acute inpatient beds.

The document sets out the options the Trust considered to meet the needs of this new service model.

Summary of options

- Option 1 - do nothing, resulting in no change;
- Option 2 – inpatient services at Knockbracken and the Mater and enhancement of community based services, resulting in the **closure of Windsor Acute Inpatient Unit** (and reduction of inpatient beds from 138 to 103);
- Option 3 - inpatient services at Windsor and the Mater and enhancement of community based services, resulting in the **closure of Knockbracken Acute Inpatient Unit** (and reduction of inpatient beds from 138 to 90); and
- Option 4 – inpatient services at Knockbracken and Windsor and enhancement of community based services, resulting in **the closure of Mater Acute Inpatient Unit** (and the reduction of inpatient beds from 138 to 83).

Option appraisal & Benefits Criteria

Each of the options was subject to a benefit appraisal against a number of agreed benefit criteria which were weighted as follows:

<i>Criterion</i>	<i>Weighting</i>
Improvement in quality & effectiveness of service	25
Compatibility with strategic direction	20
Quality/functionality of accommodation	18
Accessibility	18
Availability of complementary services	9
Minimise disruption	5
Ease of implementation	5
Total	100

Conclusion and Impact on Users

Based on the benefits analysis set out above, Option 2 (the closure of Windsor Hospital site) emerged as the preferred option with the highest weighted score, followed by Option 4, Option 3 and finally by

option 1. Option 1 scores poorly in comparison to the other options due to its failure to result in any improvement to current service delivery.

In terms of impact on users, the Trust is confident that it can manage the reduction to 103 beds by addressing delayed discharge and implementation of the new day treatment and community treatment bed model. It also states that Windsor House is in an extremely poor state of repair, which is currently causing significant issues in relation to the provision of services; whereas there is an excellent standard of accommodation at Knockbracken (recently refurbished) and a reasonable standard of accommodation at the Mater. Both Knockbracken and the Mater also provide better facilities for the delivery of therapeutic services and observation of patients.

Implications for the Workforce

Mental health services in general and in Belfast in particular have had significant recruitment difficulties, resulting in a number of vacant nursing positions which tended to be filled through the use of overtime and agency staff. The use of agency staff is often raised as a concern by service users and carers; therefore there is an expectation that the quality of the service will improve by having permanent staff in post. These proposals will provide an opportunity to redeploy staff to vacant posts throughout Belfast. This will substantially improve the skill mix in existing services and also result in a marked reduction in the requirement to use overtime and agency staff. The Trust's intention is to provide staff requiring redeployment with a number of options for their continuing employment.

(ii) The Re-Provision of Mental Health Services (Victoria Day Centre)

This consultation document details the strategic context and option appraisal for the reform and modernisation of the mental health **day support services**. The Trust is proposing a new model of mental health day support services that involves a move away from historic centre based activities to a service based on the development of personal development plans that develop life skills in a socially inclusive way. Based on the Bamford recommendations, the new proposed model of care is characterised by:

- Enhanced home treatment services;
- Revitalised and more socially inclusive day support services;
- Enhanced therapeutic input to inpatients; and,
- A reduced reliance on acute inpatient beds

The Trust believes that the current services provided through the Trust's day care centres do not adequately promote a recovery ethos. Instead, services need to move away from a solely centre based approach to delivering support to clients in their own communities, delivering activities which promote social inclusion and recovery in partnership with other agencies and organisations. The current voluntary sector day support services are more aligned with the recovery model and therefore the Trust proposes to work with the current 4 voluntary centres to develop this further.

Summary of Current Trust Day Service Provision

Ravenhill Day Centre – situated on the border of East and South Belfast, it is a large modern purpose built day centre with 50 mental health places and 65 attendees per day (half day sessions)

Victoria Day Centre – situated East Belfast, it has 75 places with approximately 30 people attending per day. It caters for mostly older clients and almost a third of attendees also attend the nearby Beacon Centre run by the NI Mental Health Association.

Whiterock Day Centre – situated in West Belfast, it is a 50-place day centre with approximately 30 attendances per day. The centre shares the same building as the medical centre, so has added value of easy access to GPs and is in close proximity to both the library and leisure centre.

Everton Day Centre - situated in North Belfast, it has 50 places with approximately 30 people attending per day. It is based in an old school and is in poor condition. The Trust is developing a business case for the re-provision of the Everton complex including the day centre.

The services provided by the Voluntary sector are as follows:

- Action Mental Health, New Horizons, Duncrue Street - 45 places
- NIAMH Aspen Beacon Centre, Finaghy Road South - 32 places
- NIAMH Bracken House Beacon Centre, Holywood Road - 40 place
- Rethink Club 37, Belfast City Centre - drop in service total of 200 contacts per week

Summary of options

The document sets out the options the Trust considered to meet the needs of this new service model.

- Option 1 - do nothing, resulting in no change;
- Option 2 – implementation of new model of day support and provision of day centres at Whiterock, Everton and Ravenhill, resulting in the **closure of Victoria Day Centre**;
- Option 3 - implementation of new model of day support and provision of day centres at Everton, Victoria and Ravenhill, resulting in the **closure of Whiterock Day Centre**;
- Option 4 – implementation of new model of day support and provision of day centres at Victoria, Whiterock and Ravenhill, resulting in the **closure of Everton Day Centre**;
- Option 5 – implementation of new model of day support and provision of day centres at Everton, Victoria and Whiterock, resulting in the **closure of Ravenhill Day Centre**

Option appraisal & Benefits Criteria

Each of the options was subject to a benefit appraisal against a number of agreed benefit criteria which were weighted as follows:

<i>Criterion</i>	<i>Weighting</i>
Improvement in quality & effectiveness of service	30
Compatibility with strategic direction	20
Quality/functionality of accommodation	20
Accessibility	20
Minimise disruption	5
Ease of implementation	5
Total	100

Conclusion and Impact on Users

Based on the benefits analysis set out above, Option 2, the closure of Victoria day centre, emerged as the preferred option with the highest weighted score, followed by Option 4, Option 3, Option 5 and finally by option 1. Option 1 scores poorly in comparison to the other options due to its failure to result in any improvement, reconfiguration or change in the current service delivery.

All of the 59 service users attending the Victoria Day Centre have had their needs individually reassessed in respect of the nature and frequency of their day support needs. Those who have been assessed as requiring attendance at a day centre will have their needs met through placement in Ravenhill or facilities provided through the voluntary sector. Those individuals whose assessed need is for placement in a centre more appropriate to their age requirements will be facilitated in elderly services. Those whose assessed need is to access more socially inclusive options will be facilitated to do so in line with the Recovery ethos.

Implications for the Workforce

The proposals will provide an opportunity to redeploy 11 staff to posts within current vacant posts throughout Belfast. The Trust's ability to put in place new services is often restricted by its inability to employ experienced staff. With the reduction of traditional day care places and the modernisation of day support services a number of experienced staff will be available to work within the new service developments. It is the Trust's intention to provide staff requiring redeployment with a number of options for their continuing employment. In addition Belfast Trust expects additional resources to be made available through the Health and Wellbeing Improvement Plan (HWIP) for the continuing modernisation of mental health services.

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