

To: SOCIAL WORK COMMITTEE		Subject: REVIEW OF THE GOVERNANCE AND ACCOUNTABILITY OF THE STATE HOSPITAL'S BOARD FOR SCOTLAND – CONSULTATION PAPER (THE RIGHT PLACE THE RIGHT TIME)
From: DIRECTOR OF SOCIAL WORK		
Date: 24 OCTOBER 2002	Ref: JD/RM/NMcD	

1. PURPOSE OF REPORT / INTRODUCTION

1.1 This report seeks homologation of a response to the Scottish Executive, following consultation in relation to issues around preferred options regarding the affairs of the State Hospital Board for Scotland and related matters regarding forensic mental health issues in Scotland.

2. BACKGROUND

- 2.1. The Council and its health partners were asked for views, by the Executive regarding “The Right Place the Right Time” and a response was submitted on 6 September, by the Director of Social Work , on behalf of the Council and NHS Lanarkshire.
- 2.2. At a local Lanarkshire level, work is also already underway by Council staff, NHS Lanarkshire and other partners, in developing a strategy for services for mentally disordered offenders in Lanarkshire and this will be completed by the end of this year.
- 2.3 A copy of the “Right Place the Right Time” consultation paper and the joint response is available in the members library.

3. RESPONSE TO CONSULTATION PAPER

- 3.1 The “Right Place the Right Time” was produced as a result of work carried out by a group of senior health and social work officers from various parts of Scotland who commenced their deliberations in the autumn of 2001. This group identified a number of key tasks to be performed at national level to facilitate the implementation of the National Policy for Mentally Disordered Offenders and these fall under broad headings:-
- 3.2 The response was in line with the two sections as laid out in the Executive’s document. The first session related to some technical issues discussed below at 3.3 and the remainder of the summary of the response is included at 3.4.

3.3 Summary of the joint response made to the Executive

The details of this Section relates to Planning and needs assessment and were:-

- **Development** – partners would welcome support in ensuring alignment of the principals of the care programme approach framework.
- **Information** via a comprehensive database of patients in the forensic system and the criminal justice systems would be very useful.
- **Research** – information being fed to the planning system would be welcomed expansion in professional training opportunities would be a positive development.
- **Education and Training** should be closely allied to the research developments
- **Clinical Governance** - Managed Clinical Networks which define high, medium and low secure care requirements likely to return to the community would be very positive and influence “the patients journey”.

- 3.4 The second section covered other areas such as resolving difficulties concerning individual patients, funding (2 options or models set out regarding resource allocation and national and regional services), health planning and performance appraisal, involvement of stakeholders and managing the state hospital and wider forensic agenda.

Planning and needs assessment, these issues are summarised as - Lanarkshire has already established a mentally disordered offenders steering group with multi agency representation and this is actively developing a strategy due to be published by the end of the year.

Stand Alone v's Service Provider - with regard to some of the options which were put forward for comments, it was felt reasonable to assume that there are risks in proposing a body which stands alone and is separate from the day to day realities for service provision.

Stakeholder Involvement should go beyond Health's responsibility as noted and should recognise the role of local authorities and other partners.

Arbitration to resolve blocks in co-operation between agencies and directing agencies to recognise their responsibilities was felt to require legitimate power, if changes were to be made, rather than operating as only another bureaucratic layer.

Funding Arrangements, the partners preferred option was to provide this through NHS Board sharing arrangements, as current systems would support this approach.

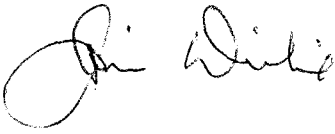
Conclusion - the recommended response supported an integrated forensic service involving the state hospital so that adults would appropriately receive the follow through which would be required to reduce readmission or prevent delayed discharge. This would hopefully standardise practice across Scotland and improve the equality of service provision.

4 RESOURCE IMPLICATIONS

- 4.1 At this time there are no immediate resource implications for North Lanarkshire Council with regard to this response.
- 4.2 As noted above, a Mentally Disordered Offenders Steering Group involving all the partners in Lanarkshire is currently developing a strategy and upon completion this will be reported to Committee.

5 RECOMMENDATIONS

5.1 Committee is asked to homologate the partners response to the consultation document.



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13 September 2002

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