

# SCRUTINY REVIEW OF MENTAL HEALTH CARE IN THE COMMUNITY, CARE HOMES AND MENTAL HEALTH WARDS



## REPORT OF THE HEALTH AND SOCIAL CARE SCRUTINY PANEL

### Councillor membership –

2015/16	2016/17
Nawaz Ahmed	Marjorie Adams
Smith Benson	Wayne Blackburn
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## **What we wanted to do**

We wanted to gain a clear understanding of the mental health care provision currently available in East Lancashire.

## **How we did it**

We broke the review down into three elements, initially concentrating on the services available in the community, followed by care home and mental health ward facilities.

## **What we found out**

- Most of the mental health services commissioned by East Lancashire Clinical Commissioning Group (CCG) are accessed through primary care.
- A directory of services can be found on their Healthy Minds website.
- A first line treatment is the Improving Access to Psychological Therapies Programme for treating low level anxiety and depression that do not require hospitalisation.
- In 2015, the CCG commissioned the setting up of Assessment and Treatment Teams which provide a gateway into services.
- There is a separate service for Children and Adolescent Mental Health.
- Inpatient services for children and young people are based at Preston and Lancaster.
- Inpatient care for those aged between 18 and 65 is provided at Burnley and Blackburn.
- An Early Intervention in Psychosis service has been established to help people aged between 14 and 35 who are experiencing their first episode of psychosis.
- For older adults, a Rapid Intervention and Treatment Team provides intensive home/residential/nursing care treatment to prevent inappropriate admission to mental health inpatient beds.
- At times the demand for in-patient care has outstripped local bed capacity. As a result patients have been sent to out-of-area hospitals.
- Access Ability Community Interest Company provide valuable training in mental health first aid to teach people to spot the early signs of a mental health problem.
- The findings and recommendations of an independent mental health taskforce, commissioned by the NHS, means that an extra £1 billion is to be invested in mental health care by 2021.
- There are 19 homes in Pendle that provide care for patients with mental illness, 17 of which are privately owned.
- A programme is currently underway to change the way in which health and social care services are delivered.

## **Where we go from here**

- We will keep a watching brief on developments currently taking place, changing the way in which health and social care services are delivered.
- We will be kept informed of any significant changes relating to the delivery of mental health services
- We will ensure that this Council continues to be actively involved in the Local Authorities Mental Health Challenge and makes links with other Champions.

## HEALTH AND SOCIAL CARE SCRUTINY PANEL

### SCRUTINY REVIEW OF MENTAL HEALTH CARE IN THE COMMUNITY, CARE HOMES AND MENTAL HEALTH WARDS

#### 1. INTRODUCTION AND TERMS OF REFERENCE

- 1.1 The Health and Social Care Scrutiny Panel of 2015/16 began a review of mental health in the community, care homes and mental health wards.
- 1.2 The initial review suggestion referred specifically to care provision on mental health wards.
- 1.3 However, following initial consideration, the scope of the review was extended to also cover provision of mental health care in the community and care homes.
- 1.4 It was accepted that, due to its size, the review could not be completed within the 2015/16 municipal year and was therefore carried forward for further work by the 2016/17 Panel members.
- 1.5 The Terms of Reference for the review were as follows:
  1. To gain a clear understanding of the mental health care provision currently available in East Lancashire.
  2. To identify the services available and the methods in which we communicate and signpost for those needing mental health services in Pendle.
  3. To investigate the broader issues i.e. unemployment/drugs and alcohol/education and their effect on mental health.
- 1.6 We wanted to know if the mental health care provision in East Lancashire was

sufficient to give high quality care for patients in Pendle.

- 1.7 The review started in January, 2016.

#### 2. METHOD OF REVIEW

- 2.1 We broke the review down in to three elements, initially concentrating on the services available in the community, followed by care home and mental health ward facilities.
- 2.2 We considered briefing notes prepared by Committee Services and statistical information from Jobcentre Plus.
- 2.3 Representatives of East Lancashire Clinical Commissioning Group (CCG) attended our meetings to provide information and answer our questions.
- 2.4 We also received a presentation from Access Ability, a Community Interest Company that offers community learning opportunities.
- 2.5 In addition, we considered a summary of a report by an independent mental health taskforce who had been commissioned by the NHS to give a frank assessment of the state of current mental health care across the NHS.

#### 3. MENTAL HEALTH CARE IN THE COMMUNITY

##### OUR FINDINGS

- 3.1 16% of adults of working age have a mental illness, and nearly one third of people attending GP surgeries have

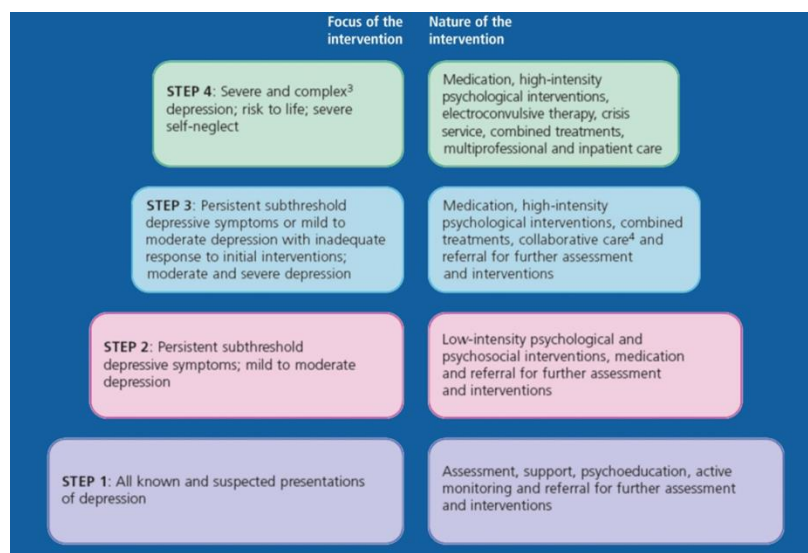
mental health problems.

- 3.2 As at August, 2015 there were 2,010 people in Pendle, over the age of 16, receiving employment and support allowance for reasons of mental health.
- 3.3 This figure rose slightly to 2,025 by November, 2015
- 3.4 In both cases, the number of claimants was at its highest in the wards of Bradley, Southfield and Waterside.

## NHS SERVICES

- 3.5 CCG funding into mental health services increased in 2016.
- 3.6 As a result of the findings and recommendations of the independent mental health taskforce it is hoped that this will continue in future years as the Government has announced that an extra £1 billion is to be invested in mental health care by 2021 and a million more people will get mental health support.
- 3.7 Most of the mental health services commissioned by the CCG are accessed through primary care, although some can be accessed through self-referral.
- 3.8 Certain services are hospital based, some are embedded in the community and others bridge the two.
- 3.9 A directory of services can be found on their Healthy Minds website via the following link -  
<http://www.eastlancshealthyminds.co.uk/>.
- 3.10 There are also services provided in the third sector which are partly/majority funded by charities.

- 3.11 Mental health problems can present in varying forms, from mild/moderate cases to those with severe conditions.
- 3.12 The following national model of stepped care is used to identify the appropriate treatment:



- 3.13 A first line treatment is the **Improving Access to Psychological Therapies (IAPT)** programme treating low level anxiety and depression that do not require hospitalisation.
- 3.14 Referrals into the IAPT service can be made by GPs/Health Professionals and by self-referral.
- 3.15 They can be accessed through Lancashire Care Foundation Trust's Mindsmatter service and via the Community Wellbeing Service Consortium consisting of the following voluntary organisations –
- Lancashire Women's Centre
  - Freeflow
  - Action for Children
  - Child Action North West
  - The Magdalene Project

- 3.16 The IAPT programme provides **Talking Therapies** which involves 4 to 6 sessions of 30 minutes duration, either face to face or by telephone.
- 3.17 This is appropriate for mild/moderate cases.
- 3.18 For moderate/severe cases high intensity therapy is often required.
- 3.19 From April to November 2015 there were 838 referrals to the Psychological Wellbeing Practitioner (PWP); 850 to the Cognitive Behaviour Therapist (CBT); and 569 to Counselling.
- 3.20 These figures are broken down further for November, with details of waiting times as follows –

	Weeks					Total
	0<4	4<7	7<11	11<17	17<26	
PWP	30	7	0	1		38
CBT	42	36	6			84
Counselling	20	15	6	2	1	44

- 3.21 In 2015 the CCG commissioned the setting up of **Assessment and Treatment Teams** which provide a gateway into services.
- 3.22 These services are led by Consultant Psychiatrists and are accessed by a referral hub (in Burnley) that accepts all referrals for the locality.
- 3.23 GPs can contact the Consultant Psychiatrist for support and advice.
- 3.24 The services are provided by Lancashire Care Foundation Trust (LCFT).
- 3.25 The teams include **Crisis Resolution and Home Treatment Teams** that provide urgent input for people who are acutely unwell and as an alternative to hospital admission.
- 3.26 This team operates 24 hours a day, 7 days a week.
- 3.27 There is also a **Mental Health Liaison Team** that is based at Royal Blackburn Hospital (RBH) and also provides 24 hour, 7 day week cover, to Urgent Care and the Acute Wards.
- 3.28 The locality has 4 **Community Mental Health Teams** (CMHT) which provide a service to people with severe and enduring mental health problems and issues that require more intensive input and support than IAPT.
- 3.29 This includes care, support and treatment for service users with dementia.
- 3.30 LCFT also has **speciality teams** in Personality Disorder, Bipolar, Psychosis, Trauma and Eating Disorders.
- 3.31 Their Adult Mental Health Services also include the following –
- A&E Mental Health Hospital Liaison Service
  - Complex Care and Treatment Teams
  - Inpatient Care Service
  - Restart Social Inclusion Service
  - Mindsmatter
  - Military Veterans
- 3.32 There is also a Lancashire wide **Clinical Treatment Team** for people taking certain types of medication.
- 3.33 They administer medication and ensure appropriate testing and monitoring is undertaken, including physical health care checks.

3.34 In addition, the team delivers Electro-Convulsive Therapy for both inpatients and outpatients at the RBH.

3.35 Other services that provide the necessary prevention include –

- Big White Wall – enter your postcode on [www.bigwhitewall.com](http://www.bigwhitewall.com) for access to services 24/7
- Healthy Minds Website
- Services Commissioned by Public Health
- CRUSE Bereavement
- Books on Prescription

### Perinatal Mental Health

3.36 Implementing the Five Year Forward View for Mental Health makes a pledge to support at least 30,000 additional women each year to access evidence based Specialist Mental Health Treatment. Treatment will be through **Specialist Inpatient Units** and through community based **Perinatal Mental Health Teams**.

3.37 A national procurement is underway to gain additional capacity for mother and baby specialist inpatient beds across the country. In Lancashire there are 8 additional beds that will be added. Capital funding will be made available as part of the procurement process for a build within Lancashire. This will be undertaken by NHS England Specialist Commissioning Team.

3.38 Funding for **Specialist Community Based Perinatal Mental Health Teams** will be released from NHS England in a phased approach with the expectations that Sustainability and Transformation Plan (STP) leads will bid for the funding. These Multi-Disciplinary Teams include support from Psychiatry, Psychology, nursery

nurses, social workers, managers and administrators. A bid for funding in 2016/17 has been unsuccessful and STP leads look forward to a further opportunity next financial year.

### Children and Adolescent Mental Health Service (CAMHS)

3.39 LCFT provide services for children and young persons as follows –

- Children's Psychological Services
- Children's Learning Disability Services
- Child and Adolescent Mental Health Tier 4 Services (Inpatient Services at Preston and Lancaster
- Outreach Services (including Eating Disorder Outreach)
- Lancashire Early Intervention Service (EIS)

3.40 The **Children's Psychological Service** offers individual, group and family focussed interventions and offers specialist consultation and support to the wider children's and young people's workforce i.e. schools, social care, GPs, Paediatricians.

3.41 The CAMHS Tier 4 Service includes an **Outreach Team** which provides gatekeeping assessments for all admissions to the inpatient services at Lancaster.

3.42 They also provide support, where possible, to the **Adult Mental Health Crisis Teams** with gatekeeping for acute/emergency admissions to Preston.

3.43 Both Lancaster and Preston provide inpatient, multidisciplinary assessment and treatment for young people with mental health difficulties.

3.44 The average length of stay is approximately 62 days.

- 3.45 Child and Adolescent Mental Health Services are provided by East Lancashire Hospitals Trust. This service supports young people experiencing severe, complex and persistent mental health problems/disorders. The service is clinically led by Psychiatrists but offers other therapy such as family therapy, Attention Deficit Hyperactivity Disorder (ADHD) specialist support, play therapy and more.
- 3.46 East Lancashire has just been accepted on the **Children and Young People (CYP) Access to Psychological Therapies Programme** which aims to improve existing services in the community through training of staff; improving access to services; improving user participation in treatment; using regular feedback from clients and outcome monitoring to guide therapy. In 2016/17 there are 11 staff across Pennine Lancashire who have been accepted on the training programme.
- 3.47 Following the publication of Future in Mind (DoH), a Pan-Lancashire Transformation Plan was assured by NHS England in December 2015. The Transformation Plan will contribute to the national targets;
- At least 70,000 additional CYP each year will receive evidence based treatment
  - Eating Disorder Services – 95% of patients to be seen within 4 weeks with 1 week target for urgent cases by 2020
  - Psychosis – 2 week target – 50% of referrals to begin treatment within 2 weeks
- 3.48 A CAMHS Transformation Board meets monthly as a workstream of the STP to deliver the systemic change. Delivery is through 5 key workstreams including;
- Accountability & Transparency
  - Access to services
  - Resilience
  - Crisis Care
  - Care of the Vulnerable
  - Training and Workforce
- 3.49 A local Pennine Lancashire group called Future in Mind has been established to deliver localised elements of the plan and to focus on partnership working to improve system flow and greater collaboration of services.
- 3.50 Additional local funding to support delivery of the Transformation Plan has seen;
- Primary Care Mental Health Workers
  - Out of hours CAMHS assessment when CYP present in crisis
  - Enhanced Eating Disorders pathways
  - Over 500 multi-agency staff attending self-harm training
  - ADHD and Autism support services for families
- ### Early Intervention
- 3.51 It is known that a better outcome is achieved if treatment is started at an early stage.
- 3.52 It is therefore expected that a patient with psychosis should be seen within 2 weeks (a national target set in April 2016). The ELCCG is meeting this target.
- 3.53 The **Early Intervention in Psychosis (EIP)** service is for such cases.
- 3.54 The EIP is for people aged between 14 and 35 who are experiencing their first episode of psychosis, or are showing signs or symptoms of developing an episode of psychosis.

- 3.55 The aim of the EIP teams is to promote recovery, prevent relapse and encourage, as well as facilitate, social inclusion.
- 3.56 It is recognised that psychosis can be brought about by substance misuse.
- 3.57 Consequently a lot of work is carried out with local substance misuse services and charities.

### **Older Adults**

- 3.58 In addition to the Community Mental Health Teams that provide high quality support for older people with complex mental health and social care needs, there is a **Rapid intervention and Treatment Team**.
- 3.59 The overall aim of this service is to provide a timely response to enable specialist short term assessment and support to older people diagnosed or presenting with complex needs.
- 3.60 However, this is a needs led service rather than an age led service and works with people based on the ability to provide the most appropriate response of needs, rather than on a person's age.
- 3.61 The Team provides intensive home treatment (including residential and nursing care) to prevent inappropriate admission to mental health inpatient beds.
- 3.62 They also facilitate timely discharge from hospital to the most appropriate setting and provide assessments which result in a structured individual care plan to maximise patients' independence.
- 3.63 In addition, work is carried out to engage with people where there may be identified risks.

### **Out of area treatments**

- 3.64 At times the demand for in-patient care has outstripped local bed capacity. As a result patients have been sent to out-of-area hospitals.
- 3.65 In December 2015 the significant pressure on in-patient beds resulted in over 70 out of area treatments.
- 3.66 By the time of our meeting in January, 2016, this had reduced to below 30.
- 3.67 We are told that this procedure is subject to daily scrutiny.
- 3.68 We acknowledge that there are times when sending people out of area can be appropriate i.e. if there is a need for a specialist service that is not available locally.
- 3.69 Out of county placements may also be closer geographically.

### **COMMUNITY INTEREST COMPANY**

- 3.70 Access Ability CIC is a registered community interest company that offers community learning opportunities to unemployed, disabled people living in deprived areas, volunteers and hard to reach individuals aged 19+.
- 3.71 East Lancashire Healthy Minds initially provided funding for delivery of the service in Burnley and Pendle.
- 3.72 Lancashire Adult Learning also provided funding for delivery to hard to reach communities.
- 3.73 The courses aim to enable participants to gain a wider understanding of some issues surrounding mental health and how and why positive and negative mental health affects business, young people and organisations.



- 3.74 Much of the training is based around prevention which is particularly important since the loss of the East Lancashire Health Improvement Service which carried out essential preventative work.
- 3.75 The funded awareness training that could be offered by Access Ability until July 2016 was as follows –
- Deaf Awareness and BSL Day
  - Mental Health First Aid (MHFA)
  - Youth Mental Health First Aid (YMHFA)
  - Practical Ideas for Happier Living
- 3.76 Last academic year the training reached 357 unique learners, the majority of which were from East Lancashire.
- 3.77 At the time of writing this report, a service level agreement with Lancashire Adult Learning was awaited to continue delivering courses for the academic year 2016/17.
- 3.78 Amongst other things, the MHFA courses teach people to spot the early signs of a mental health problem and to feel confident in helping. They learn how to provide help on a first aid basis and guide someone towards the right support.
- 3.79 The Practical Ideas for Happier Living course was a pilot scheme which offered a 2-session course to promote mental wellbeing in local communities.
- 3.80 The workshops with East Lancashire Mindsmatter /IAPT service showed an overall increase in wellbeing and reduction in anxiety and depression.
- 3.81 A further pilot being carried out was the training of teachers and pastoral staff within schools in first aid training and awareness.
- 3.82 This also included community courses for parents, local residents and governors.
- 3.83 Work has also taken place with Year 11 pupils around the time of their exams.
- 3.84 In addition, work is taking place with specialist schools to deliver an 'Intergenerational Dance Project' in the Burnley and Pendle area.
- 3.85 The project looks at increasing overall health and wellbeing benefits for deaf and disabled individuals and their families within the school environment and is proving successful with all who participate.
- 3.86 There are also plans to work with more schools in the area around Personal, Social and Health Education (PSHE) days and building resilience toolboxes for young people.
- 3.87 Work is currently ongoing with two schools in the East Lancashire area.
- 3.88 Gaps have been identified, particularly with encouraging the Black and Minority Ethnic (BME) community to attend the training.
- 3.89 There is also a gap with regard to young people moving from children's services to adult services.
- 3.90 However, it was thought that this would reduce as a result of the law change requiring all young people in England to continue in education or training until at least their 18<sup>th</sup> birthday.
- 3.91 Sadly, despite all this work, rates of suicide are still on the increase, particularly in the North West.

## **SIGNPOSTING**

- 3.92 The Council's Customer Service staff have made strong links with Lancashire Wellbeing Service.
- 3.93 Pendle's Lancashire Wellbeing Team consists of three wellbeing workers and helps people aged 18 years or over to deal with the underlying causes that affect their ability to manage their health and wellbeing.
- 3.94 In some cases this may be mild mental health problems.
- 3.95 They are based in Elliott House, Nelson and also have a part-time presence at Number One Market Street.
- 3.96 Customer Service staff have been issued with a comprehensive list of mental health support services to enable them to signpost/refer vulnerable customers accordingly.
- 3.97 An agreement has also been reached with 'Inspire', an integrated substance misuse service to have a drop in service twice a month at Number One Market Street.

## **THE NATIONAL PICTURE**

- 3.98 As part of its Five Year Forward View to build consensus on how to improve services for people of all ages, the NHS commissioned an independent Mental Health Taskforce to give a frank assessment of the state of current mental health care across the NHS and set out recommendations for improvement.
- 3.99 The final report was published in February of this year and can be accessed via the following link – [https://www.england.nhs.uk/wp-](https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf)

[content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf](https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf)

- 3.100 Our research also identified a large number of services/initiatives, many of which are national campaigns/organisations that are available to people of East Lancashire.
- 3.101 Details of these are provided as an appendix to this report.

## **4. CARE HOMES**

### **OUR FINDINGS**

- 4.1. There are currently 19 homes in Pendle that provide care for patients with mental illness.
- 4.2. Of these 19 homes, two are owned by LCC.
- 4.3. The other 17 homes are privately owned.
- 4.4. The care provided ranges from caring for people with learning disabilities to those detained under the mental health act.
- 4.5. Some of the homes specifically cater for those with a mental health condition, however many care for those with dementia alongside caring for people in old age.

4.6. This is broken down as follows –

Care Category	Number
Mental Health Condition	3
Learning Disability • Younger Adults	1
Learning Disability	1
Dementia • Old Age • Physical Disability • Sensory Impairment	1
Dementia • Old Age • Physical Disability	2
Dementia • Old Age	5
Dementia • Mental Health Condition • Old Age • Physical Disability	1
Dementia • Mental Health Condition • Old Age	1
Dementia • Learning Disability • Old Age • Physical Disability • Sensory Impairment	1
Dementia • Learning Disability • Mental Health Condition • Old Age • Physical Disability • Sensory Impairment • Younger Adults	2
Dementia • Detention Under Mental Health Act • Mental Health Condition • Old Age	1

4.7. All health and care services are required to register with the Care Quality Commission (CQC) whose role is to inspect and regulate services to ensure that they are safe, effective, caring, responsive to people's needs and well-led.

4.8. When we looked at the most recent CQC inspection we noted that 3 of the homes had been rated as 'Requires Improvement'. One of these was in Nelson, one in Colne and one in Barrowford.

4.9. Thirteen of the homes had a 'Good' rating and two met all the essential standards.

4.10. The remaining one was awaiting inspection following the registration of a new provider.

## 5. MENTAL HEALTH WARDS

### OUR FINDINGS

5.1. Local inpatient mental health care for patients between the ages of 18 and

65 years is provided in Burnley and Blackburn.

5.2. The mental health units sited at these locations provide 24 hour care.

5.3. The Burnley unit has three wards as follows –

- 21 bedded female ward
- 22 bedded male ward
- 6 bedded psychiatric intensive care ward for females

5.4. The inpatient facilities in Blackburn comprise of four wards as follows –

- 17 bedded male ward
- 20 bedded male ward
- 17 bedded female ward
- 6 bedded psychiatric intensive care ward

5.5. The wards are all single rooms.

5.6. Individualised recovery focussed treatment plans are provided by a team which works across all wards.

5.7. They also provide a wide range of opportunities to participate in occupational activity both in a group or 1:1 setting.

5.8. For some patients this is a brief stay for intensive treatment and support.

5.9. Others with severe and enduring mental illness may require more frequent admissions.

## 6. MENTAL HEALTH CHALLENGE

6.1. Local authorities have a key role in improving mental health in their communities.

6.2. To support and encourage local authorities to take a proactive approach, a **Local Authorities'**

**Mental Health Challenge** has been introduced.

- 6.3. The Challenge is run by Centre for Mental Health, Mental Health Foundation, Mental Health Providers Forum, Mind, Rethink Mental Illness, Royal College of Psychiatrists and Young Minds.
- 6.4. In December, 2015 Pendle Council signed up to the Challenge by appointing Councillor Wayne Blackburn as Member Champion for Mental Health.
- 6.5. We learnt that one aim is to see mental health education included in the national school curriculum.

## **7. CONCLUSIONS**

- 7.1. Our research clearly shows that there is a lot of support available in East Lancashire for people with mental health issues.
- 7.2. We recognise that the work is being carried out across the mental health spectrum by a number of organisations.
- 7.3. This begins with preventative work in the form of education sessions in local high schools and community courses promoting mental wellbeing.
- 7.4. It is clear that the opportunity to learn how to spot the early signs of a mental health problem and to feel confident in helping is vital, as is the need for early intervention.
- 7.5. We therefore praise the work being done by such services as Access Ability CIC; Lancashire Wellbeing Service; Early Intervention in psychosis Teams and other partners

in looking at substance misuse amongst other factors.

- 7.6. We also commend East Lancashire CCG on the many teams established to deal with the varying degrees of mental health conditions.
- 7.7. We are clear that continuation of this work is vital and in order to do this, long term mental health funding is needed.
- 7.8. Outside of this review, the Panel is aware of the Council's contribution to a Sustainability and Transformation Plan, requested by and submitted to government, to change the way in which health and social care services are delivered.
- 7.9. This Healthier Lancashire transformation programme is necessary due to budget cuts in the NHS and local council social care. We are therefore mindful that this may have an effect on long term mental health funding.
- 7.10. As a Panel, we do have concerns over out of area treatments, whilst acknowledging that work is taking place to address this.
- 7.11. We are also troubled by the 'Requires Improvement' CQC rating of three care homes in Pendle.
- 7.12. In light of this, we have asked Lancashire County Council's Health Scrutiny Committee, in consultation with the Cabinet Member for Health and Wellbeing to consider carrying out an inspection of care homes and nursing homes in Pendle and report their findings to a future meeting of our Panel.

- 7.13. We now feel that, as a panel of six members, we have taken this review as far as we can.
- 7.14. The scope of investigating the broader issues such as unemployment/drugs and alcohol/education and their effect on mental health as referred to in our terms of reference is deemed too large for a panel of this size and within the resources available.

## **8 RECOMMENDATIONS**

- 8.1. That the Care Quality Commission be asked to report back on action taken with regard to the three care homes rated as 'Requires Improvement'.
- 8.2. That the Health and Social Care Scrutiny Panel keeps a watching brief on the development of the Healthier Lancashire transformation programme and, if necessary looks at it again in the future.
- 8.3. That the Pennine Lancashire Health and Wellbeing Partnership be asked to keep the Panel informed of any significant changes relating to the delivery of mental health services.
- 8.4. That this Council continues to be actively involved in the Local Authorities Mental Health Challenge and makes links with other Champions.

**The Leader and Members of the 2016/17 Health and Social Care Scrutiny Panel  
(Councillors M. Adams, W. Blackburn, K. Hartley (Leader), N. McEvoy, K. Turner & S. Wicks)**

**December, 2016**