

Campaigners demand full delivery of mental health sche

Measuring Change

Belfast Mental Health Rights Group Indicators and Benchmarks

atives bereaved through suicide share their
periences of coping with little statutory support

or someone
a major part of
to answer in
r the reciprocal
feelings assoc-
ed. A big theme
service was the
re of health
with North and
st, in dealing
of suicide pre-
as identifying
sk and having
rems and
ce on an all-
gns families

the equality agenda and all-Ireland approach that were supposed to be part of the Good Friday Agreement. Where was the equity and co-operation in health there?

Everyone on the delegation had stories to tell and proposals to make, all of which were strongly put across and received by the MEIPs and NGOs present.

The pain and feelings of frustration coming from the families and community groups are something that

them an awareness of the needs of people at risk of suicide. I have no doubt we have not heard the last of the families as a campaigning group.

It is also timely and appropriate to praise what is widely considered to be one of the best intervention programmes on suicide prevention in the northwest — Foyle Search and Rescue. The group's 40 volunteer workers can be called out any time, day or night, on the River Foyle. All the volunteers are fully trained in life-saving



Teenage suicide in north Belfast is 'at crisis point'

By Rory McElhinney

REPORT FROM BELFAST AND LONDON

A WAVE OF teenage suicides in north Belfast is at a crisis point, according to a report by a Belfast-based mental health charity.

Philippa McQuinn, who is the charity's director, said that the number of teenagers who have taken their own lives in the area has risen sharply in recent years.



December 2010 - December 2011

Table of Contents

The Work of the Belfast Mental Health Rights Group	3
Indicators – What are they?.....	5
Indicator 1	
Number of people visiting A&E who were satisfied with the level of information they received about the care pathway	7
Indicator 2	
Number of people visiting A&E who reported having to wait longer than four hours before being assessed by a doctor.....	9
Indicator 3	
Number of people visiting A&E who received a written appointment on discharge	11
Indicator 4	
Participation	
a) Percentage of respondents who feel involved in decision making in mental health services	
b) Participation of the Belfast Mental Health Rights Group in the Card Before You Leave	13
Indicator 5	
Level of transparency and accountability in mental health service information provision	17

The Work of Belfast Mental Health Rights Group (BMHRG)

The Belfast Mental Health Rights Group is a group of people who use mental health services as well as carers of those who use these services. Drawn from all over Belfast, they share concerns about the rights of patients and carers who use mental health services.

Since 2006 they have been working to make small but important changes in local mental health services. The group uses international human rights standards on mental health to gather evidence, monitor government's activity, and campaign to improve local mental health services.

In January 2010, the Minister for Health, Michael McGimpsey launched the Card Before You Leave Appointment system in all A&E departments in Northern Ireland- a scheme the group had campaigned for. The Minister explained that scheme as follows:-

“‘Card Before You Leave’ allows all those presenting in an emergency environment, or those being discharged from an acute setting_ to receive an appointment card for assessment and also to receive details of services available in their area.”¹

One of the group's aim is to ensure that the scheme is rolled out as the Minister promised so that it is capable of helping as many people in distress as possible.

¹ Letter from Minister McGimpsey to the Committee for Health Social Services and Public Safety dated 13th November 2009.

Through their work on the Card Before You Leave, the group have identified other issues related to the discharge procedure and follow up appointments for those in mental health crisis. These issues form the basis of the group's new indicators which will be monitored for progress between December 2010 – December 2011.

Indicators - What are they?

“The State Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.”

International Covenant on Economic, Social and Cultural Rights, Article 12

Government has a responsibility to respect, protect and fulfill the right to the highest attainable standard of health. They have committed themselves in international human rights law to take steps to continuously improve the right to health in our communities.

The Belfast Mental Health Rights Group want to make sure this obligation is being lived up to. To do this, they will need to know if things are getting better or worse.

Human Rights Indicators and Benchmarks are a way to measure change in mental health service provision in our community.

When the group came together, they identified a long list of issues which they felt were problems with mental health services for them and for others in their community. The list was then shortened to reflect specific issues which the group wanted to see change on and which were also reflected in international and national standards.

The issues were turned into INDICATORS - put simply this means that they are issues supported by human rights law

which are capable of being measured to show whether things are getting better or worse over time.

The group then carried out a survey of those with experience of mental health services within the last six months to set a baseline picture of the extent of the problem now.

The group then set BENCHMARKS – these are specific targets about what improvements should be made over the next year to ensure that government is meeting its international obligations. The group will monitor the situation over the next year to see if these benchmarks are being met.

Human rights standards state that affected groups must be able to meaningfully participate in the design, implementation and evaluation of government policy. The approach taken by the group means that people who use mental health services are able to set their own timetable for change on issues which affect their own community.

In this way, the Belfast Mental Health Rights Group are working to ensure the human right to health is made real where it is needed most.

Indicator 1

Number of people visiting A&E who were satisfied with the level of information they received about the care pathway

“Obligations to fulfill the right to health require the State to undertake actions that create, maintain and restore the health of the population. Such obligations include :... (iv) supporting people in making informed choices about their health”

CESCR General Comment 14, para. 37

Why is this issue important?

Being informed about what the next steps are when in A&E waiting for treatment, during your treatment and when being discharged are vital components of the ability to be actively involved in decisions made about our health.

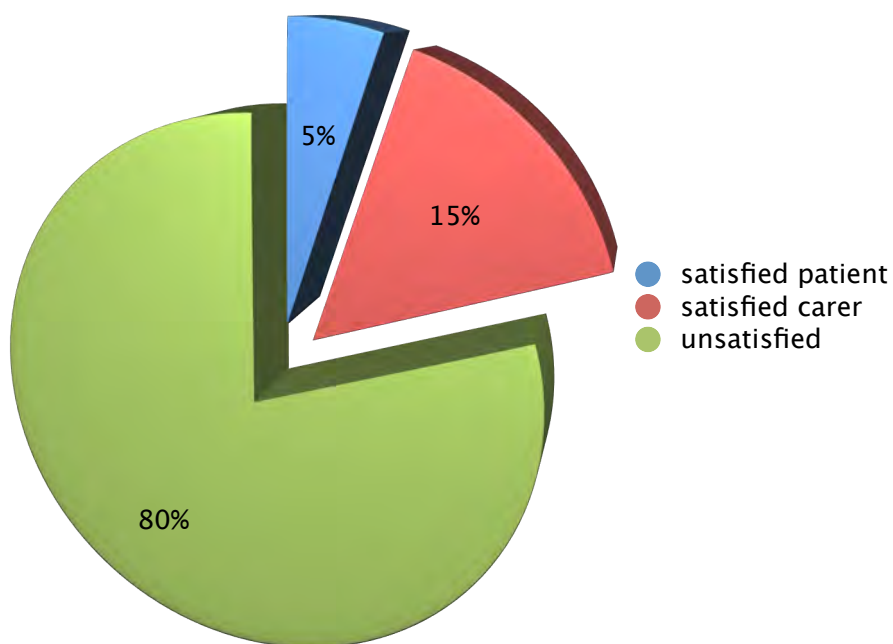
Often this is a distressing time in the life of the patient and their carer or family. Being informed means that you can ask the right questions and be assured that you are receiving all the help and support that you should be. The group's experience has often been that this information is either not given or not given in a useful format.

“There must be a partnership approach, where people with a mental health need or a learning disability are not passive recipients of services but active participants, along with their family and carers”

Bamford Action Plan 2009-2011 p31

Baseline and Benchmarks

Our survey (October 2010) said:



Baseline- our survey results show that overall, only 20% of patients and carers were satisfied about the level of information they received about the care pathway during their most recent visit to A&E.

The group have set benchmarks (specific targets for change) to make sure that they can track if things are getting better or not over the next year. The benchmarks are as follows:

In 6 months time	50% of people should be satisfied
In 12 months time	85% of people should be satisfied

Indicator 2

Number of people visiting A&E who reported having to wait longer than 4 hours before being assessed by a doctor

“The right to health is an inclusive right extending not only to timely and appropriate health care but also...”

CESCR General Comment 14, para. 11

Why is this issue important?

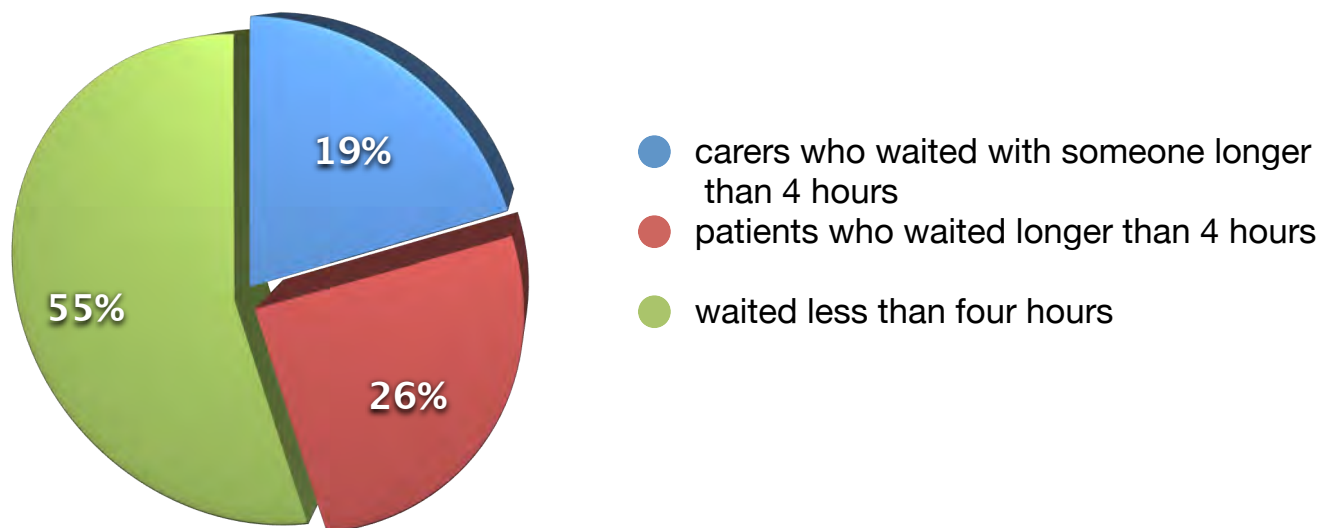
Statistics released by the Department of Health show that the majority of people waiting for treatment in A&E across Northern Ireland are seen and discharged within four hours. The group are conscious of an increasing number of stories within their own communities of people who have had to wait for much longer than this to be treated, or worse, that people in distress are unable to wait for substantial periods of time and end up leaving without being treated.

“From April 2010, HSC Board and Trust should ensure 95% of patients attending any A&E Department are either treated and discharged home, or admitted within four hours of their arrival in the department”

Priority for Action target for NI 2010/11

Baseline and Benchmarks

Our survey (October 2010) said:



Baseline- our survey results show that overall, over 45% of people who answered our survey had to wait longer than four hours to be treated by a doctor or for the person they care for to be treated by a doctor, the last time they were in A&E.

The group feel that this is completely unsatisfactory and want to see real progress on this issue. They have set benchmarks (specific targets for change) to make sure that they can track if things are getting better or not over the next year. The benchmarks are as follows:

In 6 months time	Only 25% of people will have to wait for longer than 4 hours
In 12 months time	0% of people will have to wait longer than 4 hours

Indicator 3

Number of people visiting A&E who received a written appointment on discharge

“...health facilities, goods and services must also be scientifically and medically appropriate and of good quality.”

General Comment 14 Para 12 (d)

Why is this issue important?

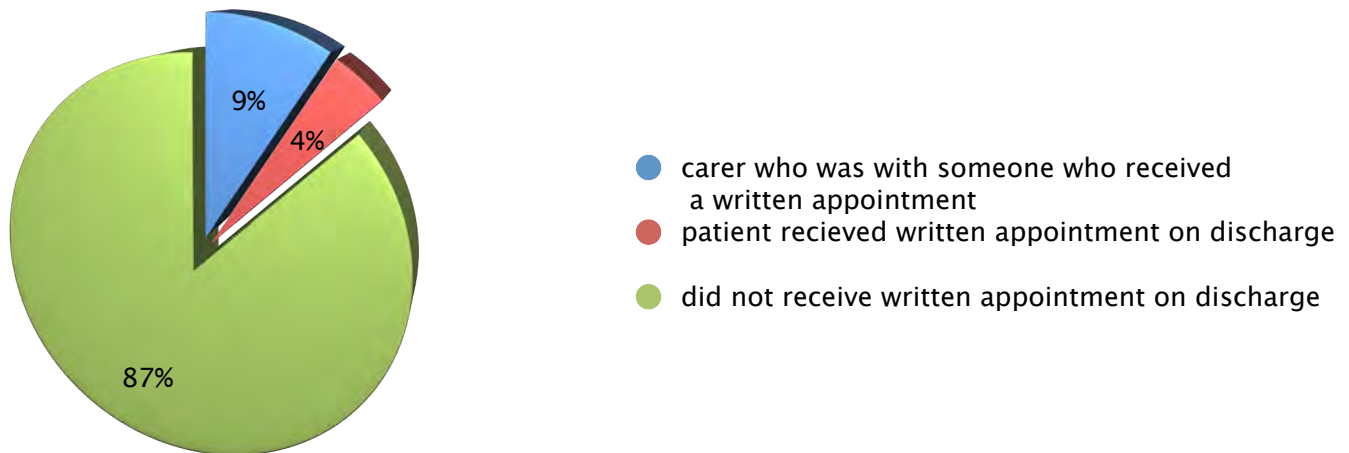
The group's experience and work thus far has shown that a policy is only as good as it is implemented. This knowledge combined with their concerns about the manner in which the new Card Before You Leave appointment system is being rolled out mean that it is as important as ever to seek information from those using A&E services about what happens when they are discharged. What support did they have? Were they offered an appointment for follow up care when they left the hospital? What could have made the process better? These are the issues the group wants to look at.

“From April 2009, all mental health patients seen at A&E departments and assessed as requiring further mental health care should have an appointment made with mental health services before they leave the A&E department”

Bamford Action Plan 2009-2011 page 82

Baseline and Benchmarks

Our survey (October 2010) said:



Baseline- our survey results show that overall, only 13% of people who answered our survey received a written appointment when they were discharged from A&E. Since the people who completed the survey are mostly from the Belfast area, and the Belfast Trust has now agreed to implement Card Before You Leave fully, the group hope this will change. However the group intend to monitor the issue closely to make sure vulnerable people get the help they need.

They have set benchmarks (specific targets for change) to make sure that they can track if things are getting better or not over the next year. The benchmarks are as follows:

In 6 months time	85% of people should receive written appointments on discharge
In 12 months time	100% of people should receive written appointments on discharge

Indicator 4

Participation

“Under international human rights law, the right of individuals and groups to participate in decision-making should be an integral part of all the policies, programmes and strategies intended to implement the obligation of States parties.”

UN CESCR, General Comment No.14, para 54

Why is this issue important?

Michael McGimpsey, the Minister for Health has said repeatedly that at this time of change for the health service, and especially with the new focus on mental health evidenced by the Bamford Review and the Suicide Strategy, it is vital to ensure that patients and their needs are at the heart of all the changes. Therefore the group wants to measure whether patients and their carers feel involved in decisions that are made about mental health services.

“In planning at a population level, the Health and Social Care Board and its Local Commissioning Groups should ensure that service users and their families and carers are involved in a meaningful way in decisions about the mental health”

Bamford Action Plan 2009-2011 p31

International Human rights law states that for participation to be compliant with international standards, it must be active, meaningful and informed.²

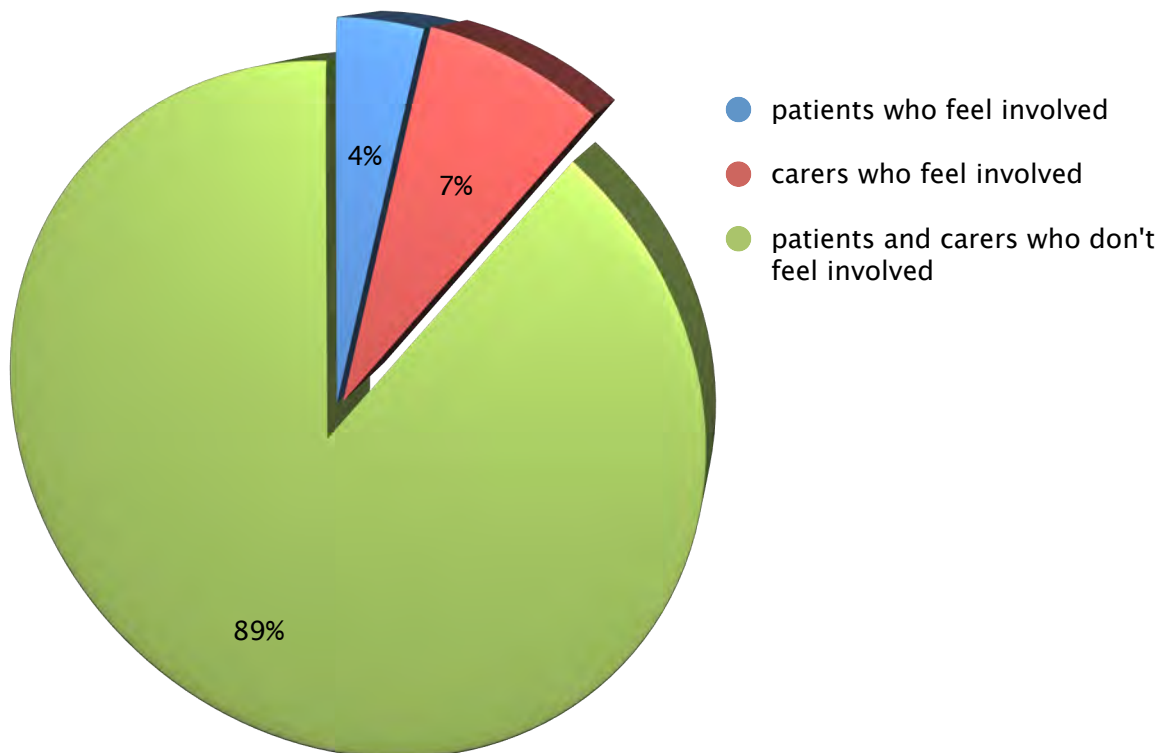
The group have asked in their survey how involved service users feel in decisions made about mental health in Northern Ireland on a scale of 1-10, and identified those who do feel involved as those who have answered 7 or more out of 10. Their work is based on Arnstein's Ladder of Participation (1969).



² Substantive issues arising in the implementation of the ICESCR: Poverty and the ICESCR, Statement adopted by the UN Committee on Economic, Social and Cultural Rights on 4 May 2001, E/C.12/2001/10, para 12

Baseline and Benchmarks

Our survey (October 2010) said:



Baseline- our survey results show that overall, only 11% of people who answered our survey rated how involved they feel in decisions made about mental health in Northern Ireland as 7 or above (the standard the group has set for the stage, according to Arnstein's ladder of participation, at which participation starts to become meaningful).

They have set benchmarks (specific targets for change) to make sure that they can track if things are getting better or not over the next year.

The benchmarks are as follows:

In 6 months time	20% of people should feel meaningfully involved
In 12 months time	40% of people should feel meaningfully involved

As part of the group's work on campaigning for more meaningful involvement of those who use services in the decisions made about mental health in Northern Ireland, the group will develop benchmarks on the participation indicators they have set relating to their participation on the Card Before You Leave Implementation Board.

Indicator 5

Level of transparency and accountability in mental health service provision

“In the context of a health system, there must be accessible, transparent and effective mechanisms of accountability to understand how those with responsibilities towards the health system have discharged their duties”

Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Paul Hunt, A/HRC/7/11, 31 January 2008 p17

The group’s work on participation has identified that the ability to participate is weakened when access to information is denied. The group plan to monitor how transparent and accountable decision making in mental health service provision is in Northern Ireland over the next year by assessing the information they receive from government in relation to human rights obligations. The group will release further details of this indicator once a baseline reading has been taken and benchmarks for change have been set.