

Service	Support Delivery of Mental Health Treatment Requirement	Version	P3.0
Document	Service Specification	Sign-off Complete	MCB OCT



Service Specification for

Support Delivery of Mental Health Treatment Requirement

Service Specification Document

This document defines the service, including the required outcome(s) and outputs. As part of an SLA or Contract, the national minimum outputs in this document are mandatory for all providers. The document can also contain optional outputs that are available for Commissioners to commission.

1. Service Specification Document

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Version Control Table		
Version No.	Reason for Issue / Changes	Date Issued
P1.0	Preview Publication	12-08-2011
P2.0	Go live publication: minor editorial amendments made. References unchanged as this specification is not accompanied by a supporting instruction.	09-01-2012
P2.1	Supporting documents: reference to operating model, cost spreadsheet and direct service costs and assumptions removed, as these are now outdated.	20-01-2014
P3.0	Reviewed as part of general updating, no changes were currently required	16/6/2107

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Introduction to Support Delivery of Mental Health Treatment Requirement specification

1.	Service Name	Support Delivery of Mental Health Treatment Requirement
2.	Key Outcome(s) for Service	<ul style="list-style-type: none"> • Successful completion of treatment • Improvement in mental health • Reduction in offending by those under the Mental Health Treatment Requirement
3.	Definition of Service	<p>Under section 207 of the Criminal Justice Act 2003, a Mental Health Treatment Requirement (MHTR) is available to the courts as a sentencing option for offences committed on or after 4 April 2005. The requirement directs an offender to undergo mental health treatment as part of a community sentence or suspended sentence order.</p> <p>Treatment may be provided in an independent hospital or care home (within the meaning of the Care Standards Act 2000), a hospital (within the meaning of the Mental Health Act 1983), as a non-resident patient at a place specified in the order, or as treatment under the direction of a registered medical practitioner or chartered psychologist.</p> <p>Before making the order, the court must be satisfied that:</p> <ul style="list-style-type: none"> • The mental condition of the offender requires treatment and may be helped by treatment, but does not warrant making a hospital or guardianship order (within the meaning of the Mental Health Act 1983) • Arrangements can be made for the offender to receive treatment as specified in the order • The offender agrees to undergo treatment for their mental health condition <p>The MHTR can be used in relation to any mental health issue including personality disorders. The type of treatment is not defined and can cover a wide range of interventions.</p>
4.	Service Elements In Scope	<ul style="list-style-type: none"> • Offenders access and attend treatment which meets their needs • Information is shared

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		<ul style="list-style-type: none"> • Offenders are supported through treatment
5.	<i>Out of Scope Service Elements</i>	<ul style="list-style-type: none"> • The delivery of the treatment by Mental Health Trusts • The management of the requirement, including sentence planning and enforcement which are included in the Manage the Sentence for a Community Order / Suspended Sentence Order specification • Arranging appointments in line with National Standards which is included in the Supervision Requirement where one is in place
6.	<i>Dependent Service Elements</i>	None.
7.	<i>Strategic Context</i>	<p>The strategic context was framed by the Bradley Report (2009) which addressed the experiences of those with mental health problems or learning disabilities within the Criminal Justice System. Many of the 82 recommendations related to the need for effective liaison between professionals to support early diversion from the CJS where appropriate. A national delivery plan (Improving Health, Supporting Justice) was published in November 2009, and the cross-government 2010 drug strategy featured a commitment to rolling out liaison and diversion schemes across England and Wales by 2014.</p> <p>Current strategic issues are:</p> <ul style="list-style-type: none"> • Low usage of the MHTR. The number of MHTR commencements increased from 961 in 2008 to 1,090 in 2009 (a 13 per cent rise). However, it still constitutes a very low volume requirement. A number of barriers to its use have been identified.¹ • The Green Paper, Breaking the Cycle: Effective Punishment, Rehabilitation and Sentencing of Offenders. This recommends a more flexible approach to the construction of MHTRs. • National policy. It is widely recognised there is a lack of national guidance both to the Probation Service and other agencies on the use of the MHTR. This appears to have the effect of

¹ 'A Missed Opportunity: Community Sentences and the Mental Health Treatment Requirement'. Khamon, Samele and Rutherford. Sainsbury Centre for Mental Health 2009.

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		discouraging its use and also leading to geographical inconsistency. <ul style="list-style-type: none"> • Mental Health Trusts. Involvement of mental health trusts in MHTRs is variable. It is important there are clear formal agreements between Probation Trusts and Mental Health Trusts on what information will be exchanged and how this will happen.
8.	Flexibility	All the outputs in this specification are mandatory – referred to as the National Minimum .
9.	Reference to Supporting Documents	None.
10.	Example Measurement/ Assurance Method for Commissioners	The specification identifies examples of methods for Commissioners to measure / obtain assurance on the delivery of the outputs/output features. Where an output or output feature does not have Performance Indicator(s) or Management Information associated with it, then it is proposed that it should be covered by Contract/SLA Management and/or more specific audits of the service. Assurance Statements will be one of the means by which Commissioners can get assurance that providers are delivering outcomes and outputs of the Service Specification. Contract/SLA Management refers to the Commissioner, under the terms of the Contract/SLA, exercising appropriate oversight and monitoring of Contract/SLA compliance against the service as a whole. 'Audit' may refer to individual reviews of compliance commissioned by Commissioners or to service wide reviews, by MOJ Internal Audit and Assurance, of a key process contributing to the delivery of an outcome in a Service Specification.
11.	References for Detailed Mandatory Instructions	Criminal Justice Act 2003, Section 207
12.	References for Non-Mandatory Guidance	NOMS Risk of Serious Harm Guidance (June 2009) Compliance Best Practice Guide: Performance Improvement Unit (2008)
13.	Review Cycle	Review cycle to be determined.

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Specification

National Minimum

<i>Row No.</i>	<i>Service Element</i>	<i>Outputs/Output Features</i>	<i>Applicable Offender Types</i>	<i>Policy Theme</i>	<i>Example Measurement / Assurance Method for Commissioners</i>	<i>References for Detailed Mandatory Instructions</i>	<i>References for Non-Mandatory Guidance</i>
1.	Offenders access and attend treatment which meets their needs	The offender commences further in depth assessment to inform the development of a Treatment Plan within the timescales indicated to the court at the time of sentence.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit	Criminal Justice Act 2003, Section 207	
2.	Offenders access and attend treatment which meets their needs	The offender is instructed to attend for treatment in accordance with the treatment schedule.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit	Criminal Justice Act 2003, Section 207	
3.	Offenders access and attend treatment which meets their needs	A Sentence Plan is developed which is congruent with the Treatment Plan.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit		
4.	Offenders access and attend treatment which meets their needs	The offender manager contributes to continuous assessment and care planning to ensure that the offender accesses treatment in line with the agreed Treatment Plan.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit		

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Row No.	Service Element	Outputs/Output Features	Applicable Offender Types	Policy Theme	Example Measurement / Assurance Method for Commissioners	References for Detailed Mandatory Instructions	References for Non-Mandatory Guidance
5.	Information is shared	Attendance and engagement at treatment sessions are monitored in accordance with a consistent framework agreed between the offender manager and the treatment provider.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit		
6.	Information is shared	The offender manager's assessment of compliance is informed by the treatment worker's view of the significance of a failure to attend or engage in the light of the offender's medical condition and treatment regime. ²					

² This refers to discussions on whether an offender's failure to attend or engage should lead to enforcement proceedings. Taking the decision to enforce and instigating proceedings lies within the scope of the specification 'Manage the Sentence for a Community Order or Suspended Sentence Order'.

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Row No.	Service Element	Outputs/Output Features	Applicable Offender Types	Policy Theme	Example Measurement / Assurance Method for Commissioners	References for Detailed Mandatory Instructions	References for Non-Mandatory Guidance
7.	Information is shared	There is prompt liaison between the offender manager who holds the Community Order and the treatment worker who is responsible for the care plan on risks presented by the offender and any changes to these.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit		NOMS Risk of Serious Harm Guidance (June 2009)
8.	Offenders are supported through treatment	Offenders are given comprehensive information about arrangements for treatment.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit		Compliance Best Practice Guide: Performance Improvement Unit (2008)
9.	Offenders are supported through treatment	Offenders are provided with feedback on their progress and assisted in planning for appropriate treatment to continue after the end of the requirement.	Offenders subject to MHTR	Mental Health	Contract Management and/or Audit		