

AGENDA ITEM

REPORT TO HEALTH AND WELLBEING BOARD

28 MARCH 2018

REPORT OF THE INTEGRATED MENTAL HEALTH STRATEGY GROUP

Integrated Mental Health Implementation Plan - Update

SUMMARY

This report is to provide the Health and Wellbeing Board with an update on the development of the Integrated Mental Health Implementation Plan to date. Appended to this cover paper is a copy of the draft plan, which considers the previously agreed mental health priorities, developed to improve mental health and wellbeing of residents across the lifecourse.

RECOMMENDATIONS

1. The Board are asked to consider and approve the draft action plan for implementation in 2018/19
2. The Board are asked to provide leadership and support to ensure its effective delivery.
3. The Board are also asked to support the action in relation to the application for a Time to Change Hub in the Borough.

BACKGROUND

4. Following agreement and approval from the Health and Wellbeing Board, the Integrated Mental Health Steering group has now been established. The group was developed to supersede the mental health task and finish group and take forward the findings derived from the adults and children's mental health needs assessments. The following conclusions were drawn from the Mental Health Task and Finish Group (MHTFG):
 - a. A system-wide approach to addressing the priorities, not limited to service delivery, is required to improve mental health and emotional wellbeing in Stockton-on-Tees.
 - b. There is significant crossover between children's and adult's services, which plays a pivotal role in improving and protecting mental health.
 - c. The MHTFG has determined that in order to achieve an all age-integrated approach, which is system-wide, would require significant strategic support, influence and oversight in order to ensure its effective implementation
5. It was agreed that the Integrated Mental Health Steering Group would take a life course approach and consider both adults and children's. Within the Children's needs assessment it was evident that capacity to parent, and family settings had a huge bearing on a child's behaviour and emotional wellbeing. Within the adult's needs assessment it was notable that the cumulative impact of problems stemming from childhood continued into adulthood. This highlights the cyclical, intergenerational impact of mental health problems and the associated risk factors and demonstrates a need for an integrated approach to mental health and emotional wellbeing.
6. Throughout the development of the mental health work, it has been widely acknowledged that there are a range of existing work streams, strategic links and priorities across the voluntary sector, local authority and CCG that support the priorities and themes that form the basis of the integrated mental health action plan. It was therefore determined that the draft plan would acknowledge this work to avoid duplication and the steering group would ensure the appropriate

links were being made. Providing the Health and Wellbeing Board with an overview of the mental health agenda across the Borough.

DETAIL

7. The draft action plan can be found in appendix 1. The timescales for this plan are for one year 2018/19. The priority for this plan is to establish ways of working and develop new approaches, which can subsequently be built on year-on-year.
8. Part A of the plan outlines the actions to be delivered in year 1; the steering group will work with partners to ensure the actions are implemented locally. Part B of the plan considers existing plans and links and aims to provide the Board with an overview of progress.
9. The Board are asked to agree the plan and provide the necessary leadership to ensure effective implementation. The Board are also asked to support the action in relation to anti-stigma, specifically the application for a Time to Change Hub for the Borough.

FINANCIAL IMPLICATIONS

10. There are no direct financial implications of this update for the council. However, the on-going development of an integrated mental health plan may influence subsequent commissioning decisions involving local services and potential interventions.

LEGAL IMPLICATIONS

11. There are no specific legal implications of this update.

RISK ASSESSMENT

12. Recommendations and commissioning decisions that arose out of the establishment of an integrated mental health implementation plan will incorporate risk assessment as part of the development.

COUNCIL PLAN IMPLICATIONS

13. Implementation of the work will have a positive impact on both the Sustainable Community Strategy and Joint Health and Wellbeing Strategy themes in influencing the mental health and wellbeing of both children and adults.

CONSULTATION

14. Consultation with partners will be undertaken as part of the implementation of the integrated mental health action plan.

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Integrated Strategic Mental Health Action Plan 2018-19 (DRAFT)

Priority	What we will do	How we will do it	Who will lead	Performance Target	Progress - (DATE)
1. Promote mental health and wellbeing across the life course for the whole population, supporting mental healthy communities and places, to prevent ill health by addressing the wider determinants of health	Provide support for the family setting, parenting and care-giver relationships	Consider opportunities to promote positive approaches to parenting through communities and children's settings	Public Health/Children's Services	Report describing feasibility and approach presented to steering group – January 2019	
	Promote the Five Ways to Wellbeing in communities and settings	Ensure the Five Ways to wellbeing is consistently promoted through the VCS and Better Health at Work Award	Catalyst/ Better Health at Work Steering Group	Report on progress to be presented to the steering group September 2018 and February 2019	
		Promote volunteering as a way to support the wellbeing of others as well as volunteers	Catalyst	Update on approach to be presented to steering group June 2018	
2. Take a targeted approach for groups at risk of poor mental health and wellbeing, including those during the transition period, older people and new mums. To improve early	Ensure an integrated approach to physical health and mental health	Building on the approach undertaken by TEVV to address smoking cessation, Explore an approach to smoking cessation for those with mental health needs in wider settings. e.g. VCSE organisations, IAPT services	CCG/Public Health/Catalyst	Report outlining approach for implementation to be presented to steering group August 2018	

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Priority	What we will do	How we will do it	Who will lead	Performance Target	Progress - (DATE)
identification, access and intervention to prevent the progression of poor mental health	Develop an approach to address social isolation amongst vulnerable groups including older people, new mums and those with existing mental health problems	Ensure effective routes of referral into the Navigator Project to provide appropriate support to those who are affected by social isolation	SNP Commissioned Service/ Public Health	Update on SNP review including plans to demonstrate effective pathways within SNP model to be provided to steering group	
	Ensure effective support for key transition points: <ul style="list-style-type: none"> • Becoming a parent • Retirement • Social Care 	Ensure that the Public Health Resource Library has appropriate information and guidance in Health Visitor packs in relation to the transition to parenthood	Public Health	Packs to be updated with relevant information by July 2018	
		Engage with local employers to ensure there are effective policies for managed retirements	Better Health at Work Award Lead (Env. Health)	100% of businesses have received information in relation to supported retirement 25% business have a demonstrable policy for managed retirement	
		Consider opportunities to support mental health and wellbeing through adult early help in social care	Early Help Steering Group	Update on the early health approach for adult social care and a brief outline of opportunities to promote wellbeing	

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<p>3. Support those with mental health problems, promote recovery and wellbeing including their physical health. To prevent recurrence or reduce risk of recurrence for those with established conditions, ensuring the right care at the right place at the right time.</p>	<p>Reduce stigma and discrimination</p>	<p>Continue to build on existing Public Health work to develop a Time to Change Hub</p> <p>Linked to and supporting the Time to Change hub consider the feasibility of a joint communication plan across CCG, LA, VCSE to promote wellbeing and reduce stigma</p>	<p>Public Health/ M&S Mind</p> <p>CCG/ Catalyst/ LA Communications (Temp Sub group)</p>	<p>Application to Time to Change supported by Health and Wellbeing Board</p> <p>Time-limited mental health comms group established</p> <p>A shared comms plan agreed by partners shared with steering group July 2018</p>	
	<p>Support the Tees Suicide Prevention Task Force</p>	<p>Ensure actions within the plan are being delivered and embedded locally</p>	<p>Suicide Prevention Lead and Mental Health Steering Group</p>	<p>Review of gaps to local implementation presented to steering group</p> <p>Progress report on local implementation presented to steering group Sept 2018</p>	
	<p>Establish ways of working with housing to provide secure and stable homes</p>	<p>Explore the feasibility of housing teams and housing providers being offered training and information related to Mental Health</p>	<p>Housing</p>	<p>Housing training plan to be established by June 2018</p>	
<p>Values and Principles</p>					

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Priority	What we will do	How we will do it	Who will lead	Performance Target	Progress - (DATE)
Accountability	Engage and utilise the role of the elected member champion for mental health	<p>Deliver mental health training to elected members</p> <p>Ensure the local elected member for mental health is linked into the centre for mental health as a mental health champion</p>		<p>1 elected member training session delivered by December 2018</p> <p>Elected member champion role established</p>	
Quality Improvement	Ensure the voice of those with lived experience is embedded within service development and commissioning	Develop an effective mechanism for co-production as part of commissioning	CCG/ Public Health		
Education/ Capacity Building	Take a 'Whole System' approach to improving the mental health literacy of the Public and Voluntary Sector	Develop an approach to Make Every Contact Count which includes wellbeing and resilience and the five Ways to wellbeing	Public Health	<p>A report on a model for MECC to be shared with steering group by January 2019</p> <p>Implementation plan developed by March 2019</p>	
		Develop low level training to increase awareness of mental wellbeing targeted at the voluntary sector	Catalyst/Public Health	<p>Training Session Developed June 2018</p> <p>2 Training sessions delivered between September 2018- Feb 2019</p>	

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Priority	What we will do	How we will do it	Who will lead	Performance Target	Progress - (DATE)
				Feedback report on initial training presented to steering group March 2019	
		Increase participant uptake into the Mental Health Training Hub	Public Health	10% increase in participants attending mental health training hub from Stockton-on-Tees	
Clear Pathways	Ensure effective approaches and pathways for those who are affected by co-existing mental health and substance misuse problems	<p>Monitor the effectiveness of the new approach to multi-agency working and dual diagnosis</p> <p>CCG to ensure providers consider engaging with CGL within the new IAPT model to support low level mental health problems and substance misuse problems</p>	CGL/TEWV	<p>CGL/TEWV report on attendance at TEWV discharge meetings and attendance of joint case meetings Sept 2018 and Feb 2019</p> <p>CCG to provide steering group with an update on IAPT model and potential links to substance misuse services Sept 2018 and March 2019</p>	
	Ensure effective approaches and pathways for those affected by parental mental health	Ensure there are robust links with the new 0-5 service and the development of the new IAPT model and other relevant mental health and emotional wellbeing resources	CCG/Public Health	Report to steering group on approach to be shared by January 19	

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Priority	What we will do	How we will do it	Who will lead	Performance Target	Progress - (DATE)
Multi-Agency Working	Continue to engage with wider partners to support the delivery and implementation of the Integrated Action Plan	<p>Host an annual event to promote the work of the steering group and its partners to ensure wider engagement in the plans future development</p> <p>Catalyst to provide updates to the voluntary sector with updates and opportunities to engage with the mental health agenda through communication</p>	<p>Steering group</p> <p>Catalyst</p>	<p>1 partnership event to launch the updated plan and encourage sign up to priorities</p> <p>Report on partners signed up to support or develop actions which address the priorities Dec 2018 – Update on progress of partners Feb 2019</p> <p>Catalyst to provide update on engagement with the sector in relation to mental health October 2018</p>	

Strategic Link	Actions	Lead	Priority Link	Brief update (DATE)
Future in Mind	<p>Development of the primary school pilot to increase capacity to support mental wellbeing in schools</p> <p>Development of a primary school questionnaire to measure emotional wellbeing</p>	Education/FIM	<p>1 & 2</p> <p>2</p> <p>2</p>	

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	Follow up emotional wellbeing questionnaire for secondary Schools			
Education	Transition from primary to secondary school initiative	Education	2	
CCG Mental Health Plan	Link with 18-64 and primary care to develop the offer/pathway for people with SMI and LTC to ensure that annual healthchecks are being carried out and reasonable adjustments is being applied	CCG	2 & 3	National target 50% uptake
	Evaluate and develop an action plan with primary care workstream to implement the findings from the MUPS pilot within primary care.	CCG	2	Contained within ongoing IAPT service review
	Support the regional procurement of a conveyance service for people in MH Crisis	CCG/CCC	3	Ongoing with CCC partners. Procurement planning for 2018 implementation.
	Link with primary care to review current commissioned screening and physical health intervention pathways for patients with a severe mental illness with a view to improving pathways where required. Review recommendations and act upon relevant outcomes	CCG	1	
	Review the adults Autism service provided by commissioned provider to better understand the current waiting list pressures and make improvements to pathways based on learning – including undertaking of analysis of current	CCG	1	

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	wait times and implementing plans to address long waits			
	Continue to support the work to develop the ACP/ICP	CCG/LA/TEWV	1	Ongoing. Phase 1 in train for Learning Disabilities only. Phase 2 for Mental Health to be considered in 2018-19 financial year.
	Carry out a review of the recovery college and determine on-going investment and/or any changes to delivery	CCG	3	
	Review the investment into suicide audits and determine the impact and if any changes need to be made in the way this resource is being utilised.	CCG/Suicide Prevention Task Force	2	
CGL/TEWV Approach to Dual Diagnosis	Multi-agency meetings with TEWV and CGL staff to support clients with substance misuse and mental health problems	CGL/TEWV	2 & 3	
Suicide Prevention Task Force	Bereavement Service for those affected by suicide and bereavement	Public Health	2	
	Developing sensitive approaches to reporting in the media		3	
	Mental Health Training Hub – to train frontline workforces		1 & 2	
Prevention Concordat	Engage with the role out of the new prevention concordat to ensure local participation	Public Health	1 & 2	
Crisis Concordat	Engage and ensure local participation in the crisis concordat partnership meeting	CCG/Public Health	3	