

People Select Committee

A meeting of People Select Committee was held on Monday, 23rd April, 2018.

Present: Cllr Mrs Jean O'Donnell (Chair), Cllr Sonia Bailey, Cllr Louise Baldock, Cllr Barbara Inman, Cllr Eileen Johnson,

Officers: Sarah Bowman-Abouna, Jane Smith (A&H); Gary Woods, Annette Sotheby (DCE)

Also in attendance: Cllr Jim Beall, Cllr Ann McCoy, Jo Heaney (HaST CCG), Nicola Childs (HaST CCG)

Apologies: Cllr Gillian Corr, Cllr Elsi Hampton, Cllr Stefan Houghton, Cllr Mick Moore

**PEO
6/18** **Evacuation Procedure**

The evacuation procedure was noted.

**PEO
7/18** **Declarations of Interest**

Councillor Baldock declared a personal, non-prejudicial interest in respect of the item entitled 'Scrutiny Review of Mental Health & Wellbeing' as she was a member of the foundation trust at North Tees.

Councillor Mrs McCoy declared a personal, non-prejudicial interest in respect of the same item as she was a Governor of TEWV Mental Health Foundation Trust.

AGREED that the Declarations of Interest be noted.

**PEO
8/18** **Scrutiny Review of Mental Health and Wellbeing including Suicide and Self-Harm**

Members received information from Hartlepool and Stockton-on-Tees Clinical Commissioning Group (HaST CCG) representatives who provided an overview of their role and responsibility in relation to mental health and wellbeing, and the key issues/challenges in commissioning services. Details included:

•HaST CCG has a statutory responsibility for children's mental health to provide 'Treatment Services' and ensure early diagnosis and treatment is available within appropriate timescales. It also has a statutory responsibility for the commissioning of adult mental health services, which is of relevance to this review as there is a requirement that young people (18yr) have an effectively managed transition into those services where there is a need for ongoing interventions. To this end, the CCG commission:

- TEWV to provide a community Child & Adolescent Mental Health Service (CAMHS) – this service is open access and can support children up to the age of 18.
- TEWV to provide an Eating Disorder Service, Crisis Service, Intensive Home Treatment Service, and Early Intervention into Psychosis Service.
- a specialist perinatal service, which although is not targeted at 14-25 year-olds, aims to improve attachment in those primary years – this acts as a preventative/protective factor for children and young people as they grow.

•In response to the Department of Health's Future in Mind strategy (2015), each locality had to collectively produce a Local Transformation Plan (to be refreshed annually). The focus in Stockton, to date, has been on upskilling schools to identify needs and support children rather than to refer everyone to TEWV. The role of schools is of paramount importance in the transformation of children's mental health services – as children and young people spend the majority of their time at school, they are best placed to identify needs and support early intervention and prevention.

•As part of the Future in Mind programme across Stockton and Hartlepool, HaST CCG commissioned peer researchers to consult with young people on emotional wellbeing and mental health and the use of digital technology. Recommendations from this consultation were that:

- Young people help design and promote mental health apps.
- Young people to develop news and blogs for mental health apps.
- Schools to offer more support and information on mental health issues
- Teachers and support staff to be given more training on how to notice the signs of mental health issues.
- Parents/carers offered more information and support on mental health issues.
- Make sure any mental health apps for young people are safe and secure.

Other highlighted work included:

•CCG are undertaking a review of the core CAMHS service to ensure it is meeting needs of young people.

•Local Authorities to review their mental health and wellbeing offer for children and young people under their universal and targeted services – this, together with core CAMHS review, would give a strategic picture as to the provision available and what the gaps are.

•Improving Access to Psychological Therapies (IAPT) aims to ensure that people (16+) get access to evidenced-based interventions at the earliest possible opportunity (no referral needed). IAPT for children and young people is about ensuring the workforce can provide these interventions; for adults, the CCG currently has contracts with five organisations to deliver interventions, though a procurement process will commence in May 2018 regarding the delivery of this service.

•All-age integrated mental health strategy developed, with a prevention, promotion and early intervention principle throughout, and key actions from Teeswide suicide prevention plan included. Action Plan to be implemented.

The main issues discussed were as follows:

•Coroner not stating 'suicide' as reason for death – does CCG have better insight from Coroner? No – professionals around the young person would have discussions/review/reflection (e.g. Tees Child Death Overview Panel (CDOP) and SLSCB Learning and Improving Practice Sub-Group (LIPSG) – discussions can take place well in advance of Coroner's inquiry).

•Are academy schools more or less likely to access services? Guidance for all schools regarding their responsibilities around mental health. Service they buy in depends on the money they have available.

•What about those individuals who are over 18, not at college, not in employment – how are they being supported, how are they finding out about

services?

- Transformation Plan states that a high proportion of Looked After Children (LAC) in England who have emotional and mental health problems (about 60%) experience poor health, educational and social outcomes after leaving care – would hope that LAC in Stockton do not experience this.

Members received the following information from representatives of the Health and Wellbeing Board (HWB) in relation to its role and details of the work of their Mental Health Task & Finish Group and subsequent Mental Health Steering Group:

- HWBs bring together Local Authorities and health and care system leaders to improve the health and wellbeing of their local populations. Boards are tasked with identifying key health needs in their area through a joint strategic needs assessment (JSNA), and with setting priorities for addressing these through a joint health and wellbeing strategy (JHWS).

- Committee were presented with a summary of recommendations from both the mental health needs assessments for children and young people and adults. These were central pillars in the significant amount of work undertaken in relation to mental health and wellbeing, and strengthened the need for increased strategic direction which the HWB is well placed to do. A common strategic approach, culminating in a 'Strategy on a page', was subsequently devised, which individual organisations' mental health and wellbeing plans should fall out of.

- Integrated Strategic Mental Health Action Plan 2018-2019, developed and recently agreed by the HWB, involves three priorities:

- 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.

- 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 identification, access and intervention to prevent the progression of poor mental health.

- 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.

The main issues discussed were as follows:

- Suicide needs to be strengthened in local strategies – message coming out of the Five Year Forward View for Mental Health (2016). Inconsistent messages regarding what services there are and how to access them.

- TEWV working hard to ensure sufficient and appropriate places for young people.

- Wider determinants – different areas not recognising mental health and wellbeing issues. Concern around the impact of the forthcoming changes to housing benefits – Universal Credit working group to be established to identify who may be most affected (those with mental health issues will be on the highest risk list).

- Holistic approach needed – drug / alcohol issues often related to mental health problems.

- GPs not receiving mental health information on patients.
- Engaging with young people after transition to ascertain any issues that may need addressing – transitional Social Workers employed in Stockton.
- Important to listen to the voice of ‘lived experience’.
- Looking at social isolation / loneliness.
- Tackling stigma still vital – need to highlight that people can still live an active, healthy life if they have a mental health issue.

Committee were scheduled to receive evidence from a GP perspective on mental health and wellbeing provision, including the work currently being undertaken within a Practice, and in partnership with the CCG. However, due to illness, the GP representative was unable to be in attendance. The Scrutiny Officer will request that the information that would have been presented at this meeting is forwarded for circulation to Committee Members.

AGREED that the information be noted.

**PEO
9/18** **Work Programme 2018-2019**

Consideration was given to the Committee’s Work Programme 2018-2019. The next meeting is on the 21st May 2018.

Due to Officer availability, it was agreed to move the Committee meeting in October 2018 from Monday 22nd to Thursday 25th (start time to remain at 1.30pm).

AGREED that the Work Programme be noted.

**PEO
10/18** **Chair's Update**

The Chair had nothing further to report.

Noted.