



<b>Meeting of East Renfrewshire Health and Social Care Partnership</b>	Integration Joint Board
<b>Held on</b>	15 August 2018
<b>Agenda Item</b>	9
<b>Title</b>	Action 15 of the Mental Health Strategy – Planning and Funding from 2018/19
<p><b>Summary</b></p> <p>As part of the Mental Health Strategy 2017-2027, Scottish Government Ministers made a commitment to provide funding to support the employment of 800 additional mental health workers to improve access in key settings such as Accident and Emergency departments, GP practices, police station custody suites and prisons. The detail is set out in Action 15 of the Mental Health Strategy. The funding will be available from this year (£12 million, of which £11 million is the subject of this letter) and will rise to £35 million in 2021-22.</p> <p>Integration Authorities have been asked to develop a plan by 31 July that sets out goals for improving capacity in the settings outlined in Action 15 of the Mental Health Strategy. The plan will set out how we will:</p> <ul style="list-style-type: none"> <li>• contribute to the broad principles set out under <i>Local Improvements</i></li> <li>• take account of the views of local justice and other health partners about what improvements should be introduced</li> <li>• fit with other local plans currently in development.</li> <li>• Initially scope potential staffing changes over the next four years as a result of this additional funding, towards the committed 800.</li> </ul> <p>The plan will help the Health &amp; Justice Collaboration IB shape discussions around future collaboration – including further consideration of national proposals.</p>	
<b>Presented by</b>	Julie Murray, Chief Officer
<p><b>Action Required</b></p> <p>The Integration Joint Board is asked to note and comment upon the plan.</p>	
<p><b>Implications checklist – check box if applicable and include detail in report</b></p> <p> <input type="checkbox"/> Financial      <input type="checkbox"/> Policy      <input type="checkbox"/> Legal      <input type="checkbox"/> Equalities  <input type="checkbox"/> Efficient Government      <input type="checkbox"/> Staffing      <input type="checkbox"/> Property/Capital      <input type="checkbox"/> IT </p>	

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## **EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTERSHIP ACTION 15 OF THE NATIONAL MENTAL HEALTH STRATEGY**

### **1. Context**

- 1.1 As a longstanding integrated partnership in East Renfrewshire, we are able to build on a strong foundation for health and social care. We have just produced our Strategic Plan for 2018-2021 and although much of our work from our previous strategic plan will continue into the next three years however we have identified two new priorities in relation to mental health and wellbeing. In addition, as a community planning partner, the Integration Joint Board is committed to a number of actions in existing plans for Improving Outcomes for Children and Young People, Community Justice and Alcohol and Drugs.
- 1.2 The following strategic priorities have been identified as the areas where we need to make significant change or investment during the course of our new plan.
- **Working together with children, young people and their families to improve mental wellbeing**
  - **Working together with our community planning partners on new community justice pathways that support people to stop offending and rebuild lives**
  - **Working together with our communities that experience shorter life expectancy and poorer health to improve their wellbeing**
  - **Working together with people to maintain their independence at home and in their local community**
  - **Working together with people who experience mental ill-health to support them on their journey to recovery**
  - **Working together with our colleagues in primary and acute care to care for people to reduce admissions to hospital**
  - **Working together with people who care for someone ensuring they are able to exercise choice and control in relation to their caring activities**
- 1.3 It is worth setting these the two new priorities that relate to mental health and wellbeing in more detail to provide some context to the proposals for implementing Action 15 of the national Mental Health Strategy.

## **Working together with children, young people and their families to improve mental wellbeing**

- 1.4 In East Renfrewshire together with our children's planning partners, we believe that where possible children and young people's needs should be met by universal service provision in partnership with families and carers. We understand that within the general children's population there is a significant and growing number of children and young people with additional needs who, due to the complexity of these needs, require to access specialist and intensive services. In addition there is a growing population of children who are described as vulnerable due to being looked after and in our care, or on the edges of care, who need targeted interventions to safeguard their wellbeing. Our actions to address these are set out in "Getting it right with you" East Renfrewshire's Children's Services Plan 2017-2020.
- 1.5 Our new strategic priority is improving mental wellbeing of children and young people. We have been aware for some time of the pressures on our Child and Adolescent Mental Health Services, our disproportionate use of mental health inpatient beds and the number of GP consultations for mental wellbeing. Local community consultation confirmed this as an area of concern for local residents.
- 1.6 From national research we know that most mental illness begins before adulthood: research suggests that half of Adult Mental Health problems have begun by the age of 15, and three-quarters by the age of 18. About 10% of children and young people experience Mental Health problems, and once acquired they tend to persist. Mental illness in children, young people and adults is strongly correlated with exposure to childhood adversity and trauma of various kinds. Adverse Childhood Experiences (ACEs) are an established indicator of exposure to such trauma. ACEs range from verbal, mental and physical abuse, to being exposed to alcoholism, drug use and domestic violence at home.
- 1.7 We need to ensure that we provide the appropriate and proportionate mental health responses for children and young people who are experiencing mental health problems. With a specialist third sector provider we are testing a trauma recovery programme in a locality with high demand for clinical mental health provision. We will work together with partnerships across Greater Glasgow and Clyde to review how well our Child and Adolescent Mental Health Team arrangements are working. In addition our Child and Adolescent Mental Health Service, YISS, Young Peoples' Team, and Education will work together to support young people to be more included in their community and schools when they exit the CAMHS.
- 1.8 We must also make sure that we prevent and intervene early to prevent the impact of Adverse Childhood Experiences. Working together with our partners we are strengthening local identification, assessment and support of children and young people at risk, including those affected by domestic violence. Our East Renfrewshire Corporate Parenting Plan is underpinned with a pledge to East Renfrewshire's care experienced children and young people that "we - their Corporate Parents - will work together to prioritise and address their needs and we will have high expectations of ourselves to deliver the improvements needed, to make the difference for them".

## **Working together with people who experience mental ill-health to support them on their journey to recovery**

- 1.9 One of the Fairer East Ren Outcomes is improving the mental health and wellbeing of residents. We will work together with community planning partners on activities that support mental health improvement such as access to green spaces and reducing social isolation. We are also committed to early intervention working together with Recovery Across Mental Health to provide link workers in local GP practices.
- 1.10 Health and Social Care Partnerships across Greater Glasgow and Clyde are committed to working together to develop a whole system five-year strategy for adult mental health. Implementing the strategy will involve a whole series of actions and service changes.
- 1.11 Our local services in partnership with third sector organisations like RAMH will move to recovery-oriented care supporting people with the tools to manage their own health. A recovery-based approach has the potential to improve quality of care, reduce admissions to hospital, shorten lengths of stay and improve quality of life. While service users will always have access to the clinical and therapeutic services they need, a recover approach will require services to embrace a new way of thinking about illness, and innovative ways of working. Those changes include,
- A change in the role of Mental Health professionals and professional expertise, moving from being 'on top' to being 'on tap': not defining problems and prescribing treatments, but rather making their expertise and understandings available to those who may find them useful.
  - A recognition of the equal importance of both 'professional expertise' and 'lived experience' and a breaking down of the barriers that divide 'them' from 'us'. This must be reflected in a different kind of workforce (one that includes peer workers), and different working practices founded on co-production and shared decision making at all levels.
- 1.12 We will work together across Greater Glasgow and Clyde to improve responses to crisis and distress, and unscheduled care. Integrating crisis, home treatment and OOH models so that they are provided consistently as a comprehensive Crisis Resolution and Home Treatment (CRHT) service, available for community care 8am to 11pm, 7 days a week.
- 1.13 This strategy signals a further shift in our balance of care moving away from hospital wards to community alternatives for people requiring longer term, 24/7 care, with mental health rehabilitation hospital beds working to a consistent, recovery-focussed model.

## 2. NHS Greater Glasgow and Clyde Mental Health Strategy

### Scope of the GG&C Strategy

2.1 The 5 year strategy was commissioned by the Chief Officers of the 6 Health and Social Care Partnerships (HSCPs) within Greater Glasgow and Clyde, and in partnership with NHS Greater Glasgow & Clyde (NHS GG&C), who are committed to the need to take a whole-system approach to the strategic planning of Adult Mental Health Services, particularly given the interdependence and connectivity across HSCPs in relation to Mental Health Inpatient services. The rationale for developing a 5 year strategy is to:

- Maintain the momentum of the service change and improvements arising from the Clinical Service Review (CSR) led by NHS GG&C.
- Take early advantage of the benefits of integrated Health and Social Care Services and systems following the formal establishments of HSCPs.
- Respond to the challenges of increasing service demand and constrained finances by identifying transformational change solutions that ensure services are sustainable and targeted appropriately to meet need.
- Contribute to delivering the aspirations set out within national strategies, including the Scottish Government's Mental Health Strategy 2017-27<sup>1</sup>.

2.2 The Strategy focuses on the following themes:

#### 2.3 Prevention, Early Intervention and Health Improvement

- Significantly up-scale Mental Health training and support for all staff in Partnerships and related services (including trauma informed, ACE-aware, one good adult, Mental Health first aid).
- Support community planning partners to develop and implement strategies to address child poverty within their area.
- Work with multiple partners to build awareness of practical steps to promoting mental wellbeing and challenging stigma and discrimination with a priority focus on groups with higher risk, marginalised groups and people with protected characteristics.

#### 2.4 Physical Health

- On-going application of the Physical Healthcare and Mental Health Policy.
- Improve assessment and referral pathways to ensure that people with a serious mental illness have their physical health monitored and managed effectively with no barriers to service access.
- Continuing the commitment within Mental Health Services to a programme of training and development for staff to ensure that the delivery of physical healthcare meets current standards.

#### 2.5 Recovery Orientated and Trauma-aware services

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<sup>1</sup> [Scottish Government's Mental Health Strategy 2017-27](#)

- Collaboration with people with lived experience, local Mental Health networks and Scottish Recovery Network do develop co-production approaches to promoting recovery.
- Work with partners to pilot the introduction of Recovery Colleges in the Board area.
- Develop and implement a model of Peer Support Workers.

## 2.6 Primary Care

- To assess the implications of the new GP contract, particularly around the potential for additional Mental Health workers.
- The Mental Health Strategy should be considered as a contributing element of the Primary Care Improvement Plans.
- Work to manage and support those with long term physical conditions should be expanded and prioritised to ensure that effective communication of physical and mental health condition management requirements are shared between clinicians in both Primary Care and Mental Health settings.

## 2.7 Community and Specialist Teams

- A focus on maximising efficiency and effectiveness of our Community Mental Health Teams (CMHTs) in order to manage the current trend of 3% increases in demand each year and to manage additional demand as a consequence of proposed reductions to bed capacity.
- A review of eligibility criteria, length of contact and models of support in specialist teams to help create capacity within Adult Community Mental Health Teams.
- The introduction of a matched care approach to the provision of care and treatment for Borderline Personality Disorder.

## 2.8 Social Care

- Where necessary, a more integrated management of supported accommodation (or equivalent) and care home placements with 'health' bed management to optimise "flow" in and out of integrated Health and Social Care beds/places.
- Consider commissioning 'step-down' intermediate care provision to maximise the opportunity to support people to live as independently as possible in community settings.
- Review specialist and mainstream care home commissioning needs, including to support people over 65 years of age potentially suitable for discharge as part of the re-provision programme.

## 2.9 Unscheduled Care

- Liaison/Out of Hours (OOH): provide a single Adult Mental Health Liaison service across Greater Glasgow and Clyde, providing one point of access for referrals for each Acute Hospital, with defined response and accessibility criteria for departments.
- Crisis Resolution and Home Treatment/OOH: provide a consistent model of crisis resolution and home treatment across the NHS Board area available for community care and home treatment as an alternative to hospital admission from 8am to 11pm, 7 days a week.
- OOH: provide a single phone number for all Unscheduled Care arising OOH. An experienced clinician could offer guidance to referrers, directing calls to local

Crisis Resolution Home Treatment Teams (CRHTs) (or CMHTs and other daytime services) as needed.

## 2.10 Bed Modelling

- A combined reduction to Adult Mental Health Inpatient bed capacity of approximately 100 beds, in line with benchmarking analysis and proposed reinvestments in community services.
- Development and implementation of an Adult Acute Care Pathway across all adult acute inpatient sites; the application of more clearly defined standards and consistent practice within Intensive and High Dependency Rehabilitation wards; and an aim to move away from hospital based wards for people requiring long-term, 24/7 care.
- A greater focus on addressing delays in discharge and ensuring a proactive approach to discharge planning - this will include closer integration with community and social care services to ensure joint prioritisation of resources and a smoother patient flow across inpatient and community settings.



### 3. Engagement with stakeholders and consultation

- 3.1 In developing the East Renfrewshire HSCP strategic plan we worked with Voluntary Action East Renfrewshire and other partners to engage with the public on the strategic priorities for Health and Social Care. We recognise the importance of developing a mature relationship between different partners, including members of the public, the third and independent sector for effective and impactful strategic commissioning. With this in mind, our engagement will be an on-going process and will deepen over the course of the Strategic Plan.
- 3.2 Insight from the engagement work so far has shown general agreement with the strategic priorities we have identified. We are learning more about variation of need and aspiration amongst different communities – both communities of ‘place’ and communities of interest - that needs to shape and influence our Strategic and Locality Commissioning.
- 3.3 In relation to mental health and well-being, the themes were:
- People experience inflexibility of services, particularly the model of primary care mental health, and do not see this as person-centred
  - Recognition of a gap between current offer of social and service support and a desire for more peer support and groups
  - Accessing support is difficult and information is hard to find
  - Young people are proactive in accessing online support. They often wish to remain anonymous and this has led them to contact Samaritans.
  - Importance of developing a recovery plan after a period of crisis

#### **Community Justice Partnership**

- 3.4 Action 15 funding was discussed at our last community Justice Partnership and although it was acknowledged that East Renfrewshire HSCP would contribute to the NHS Greater Glasgow and Clyde wide priorities in relation to prisons and custody suites it was agreed to identify where training and awareness raising could strengthen local services and support and the CJ Partnership lead and Mental Health lead were tasked with developing proposals for the Partnership’s next meeting. Senior officer from the HSCP are members of the Community Justice Partnership.

#### **Engagement with Alcohol and Drugs Partnership**

- 3.5 East Renfrewshire HSCP will continue to develop connectivity between Mental Health and the Alcohol and Drugs Partnership. It will particularly focus on those adults with complex needs who access both services and require significant support from accident and emergency, criminal justice services and primary care. Our Senior Manager for recovery services has oversight and direction of both mental health and addiction services and our Chief Officer chairs the ADP.

#### **Engagement with Children’s Planning Core Group**

3.6 Integrated Children’s planning is very well established in East Renfrewshire. There has been a particular focus on prevention and early intervention through Early Years and Parenting Strategies and this will continue. Our work on Corporate Parenting is strong and awareness of the impact of ACES is high. Our work to improve the mental health and wellbeing of children and young people will be led in partnership with colleagues from Education and the third sector.

### Engagement with Primary Care Improvement Plan (PCIP)

3.7 There has been close working between the teams developing the PCIP and the mental health plan. The PCIP proposes to fund an additional two link workers to support mental health and wellbeing to build on the current HSCP investment of two link workers to ensure all GP practices in East Renfrewshire have an aligned link worker.

### Funding Allocation

Mental Health Action 15 Funding	2018/19 £'000	2019/20 £'000	2020/21 £'000	2021/22 £'000
Per Scottish Government allocation letter of 23 May 2018	172	265	375	499

### Proposals for investment for Action 15 funding

3.8 Our initial proposals for investment of Action 15 funding are set out below. Some of the investment is time limited – to improve waiting time performance and to support a redesign of services. Other proposals have been developed pan – Greater Glasgow and Clyde and set out East Renfrewshire’s share of the required investment.

#### Local investment proposed:

- Tier 2 support for children and young people – building on our investment with Children 1<sup>st</sup> to expand our family wellbeing service
- Peer support workers
- Improving information and signposting – website development
- Waiting time initiative to improve access to primary care mental health services pending re-design
- Fixed term Development and Improvement post to support re-design of mental health services
- Potential extension of RAMH crisis service
- Increased consultant sessions in our Older People’s Mental Health team
- Additional Link Workers funded through PCIP

#### GG&C wide Commitments

- Development of Crisis service to cover all GGC

- Expand the Psychiatric liaison service to support and divert from A&E
- Improved access to psychological interventions in prisons
- Investment in Police Custody services
- Development of borderline personality disorder service
- Investment in eCBT to roll out across all HSCPs

3.9 A detailed plan and financial statement will be developed by September. Our current estimate of the number of new posts funded through Action 15 and PCIP in relation to mental health and wellbeing, including system wide services is approximately 12 wte. In the interim we will consult and engage with other HSCPs, clinicians and third sector partners on the detail of this plan.

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