

## **Title of report: Herefordshire and Worcestershire Integrated Care System (ICS) Mental Health Strategy**

**Meeting: Health and Wellbeing Board**

**Meeting date: Monday 6 December 2021**

**Report by: Senior Commissioning Officer - Communities**

### **Classification**

Open

### **Decision type**

This is not an executive decision

### **Wards affected**

All wards

### **Purpose**

To review and endorse the draft Herefordshire and Worcestershire Mental Health Strategy.

### **Recommendation(s)**

**That: The Health and Wellbeing Board**

- a) Endorse the draft Herefordshire and Worcestershire Mental Health Strategy, and determine any recommendations it wishes to make to the council or relevant health bodies to improve the provision of mental health services for Herefordshire.**

### **Alternative options**

1. There are no alternative options. The strategy has been developed by statutory NHS bodies with involvement from stakeholders and partner agencies including Herefordshire Council. There is an expectation within national policy and the NHS Long Term Plan that each Integrated Care System (ICS) area will have a Mental Health Strategy in place.
2. Members may wish to consider whether the Council develops its own mental health strategy. However, as the provision of mental health services is a responsibility of the NHS and Clinical Commissioning Groups, this would not be a recommended option.

### **Key considerations**

3. The strategy has been developed by Herefordshire and Worcestershire Clinical Commissioning Group and overseen by the Integrated Care System (ICS) Mental Health Collaborative Committee (formerly the STP Mental Health Programme Board).

4. The strategy for Herefordshire and Worcestershire sets out how local services will support and treat people with mental health issues over the next five years. The NHS Long Term Plan sets out the strategic direction for mental health services nationally. The Herefordshire and Worcestershire Mental Health Strategy develops the national expectations into a local delivery plan in a way that works for our area, as well as identifying local priorities to meet specific needs based on feedback from stakeholders.
5. The strategy is intended to give effect to various priorities and factors emerging in relation to mental health:
  - i. From 1 April 2020, Herefordshire mental health services transferred from 2Gether NHS Foundation Trust to Herefordshire and Worcestershire Health and Care NHS Trust.
  - ii. The Herefordshire and Worcestershire Integrated Care System (ICS) for Mental Health is focused upon ensuring equitable access to mental health services across the ICS area.
  - iii. Herefordshire and Worcestershire was an early implementer for the transformation of community mental health services for adults, bringing significant resources. Implementation of the transformation locally began in October 2020 in Herefordshire and parts of Worcestershire, with roll out to the rest of the ICS from October 2021.
6. The Herefordshire and Worcestershire Mental Health Strategy sets out ambitions to support and treat people with mental health issues over the next five years, while delivering the national strategy in a way that works for the ICS area, as well as identifying local priorities to meet specific needs based on engagement with stakeholders.
7. In developing the strategy there was a great deal of stakeholder engagement and evidence gathering sessions in the latter part of 2019 and the beginning of 2020. There was a survey and a series of listening events with local stakeholders in autumn 2019, followed by engagement/co-production events in early 2020. Reports detailing this engagement are appended to this report at Appendix 3 & 4.
8. The strategy seeks to articulate a vision for mental health and wellbeing captured within five key areas: Accessible Services; Integrated Services; Community Empowerment; Person-Centred Services; Early Intervention.
9. The impact of the COVID 19 pandemic on all aspects of life during 2020 and into 2021, especially on the NHS, has led to a delay in the strategy being brought forward for consideration by members of the Health and Wellbeing Board.
10. The mental health strategy develops aspects of the Joint Strategic Needs Assessment (JSNA) which states that; ' a key message to local commissioning groups is that individual treatment and pathways developed by traditional health and social care services have to adapt to increasing complexity of need. There is rising demand for management of co-morbidity of physical and mental disorders rather than of single diseases'.
11. There are very clear connections between the focus of the Talk Community strategic approach, and that of the mental health strategy. Talk Community has identified a number of community wellbeing issues that link to mental health, including the recognition of a need for the transformation of mental health services to meet the changing needs of the population, and be delivered closer to the community.
12. The transformation of mental health services commenced across Herefordshire as of 1 October 2020. Community Mental Health Teams have been divided into five new services based around each of the Primary Care Networks. GP surgeries will have direct access to the mental health

teams using an agreed appointment schedule, which should enable patients to be seen and assessed by mental health services much more promptly than was previously the case.

13. In order to provide support across the whole spectrum of mental health disorders from mild to serious, additional support has been commissioned by Herefordshire and Worcestershire Clinical Commissioning Group from voluntary and community services (VCS). 'Link Workers', provided by Herefordshire MIND, have been put in place who will provide support and guidance to people with mild mental health issues. The role of the 'link workers' is to help people to re-connect with their communities, perhaps through Talk Community Hubs, to help address underlying problems which could include unemployment, debt, isolation or loneliness.
14. The COVID-19 pandemic has had a significant impact on the way mental health services are delivered, and the strategy acknowledges this. Although the full extent of this impact is yet to be understood, in managing the earlier phase of the lockdown a number of changes took place in the way mental health services were delivered. These included video conferencing and some ward based staff being re-deployed to provide intensive community based treatment. Some of these changes will develop into more flexible approaches in the future delivery of mental health services.
15. From November 2021 the new Mental Health Support Teams in Schools, available to young people across all the secondary schools of Herefordshire, will become fully operational. The teams provide support to young people who may be self-harming or at risk of developing mental health problems.
16. One of the key areas the strategy is focussing on, is that of community empowerment. This links closely with Herefordshire's Talk Community strategy which aims to achieve :
  - More people participating in their local community
  - More vulnerable people supported in their local community
  - People able to use public services closer to where they live
  - Increased self-declared wellbeing and independence
  - Reduced prevalence and extent of loneliness
  - Reduction in demand for domiciliary care
  - Reduction in demand for primary care and community health services

## **Community impact**

17. The proposed changes in addition to the extra funding for mental health services via the NHS suggest that there should be an overall positive impact on the Herefordshire community. Mental health services will be provided around each of the Primary Care Network areas, with GPs able to refer patients more quickly and with less bureaucracy, and there will be closer links with VCS organisations and community groups including Talk Community Hubs. A key aim is to continue to expand awareness of mental health and self-care, and promote community asset growth.
18. The Herefordshire County Plan 2020-2024, under the 'Community' heading states; 'Our ambition is to make wellbeing inevitable here in Herefordshire by putting physical and mental health at the heart of everything we do. Talk Community is the key council initiative by which we aim to progress this objective'. The Mental Health Strategy identifies Talk Community as an important partner for helping to develop integrated services across statutory and voluntary organisations and to continue to expand awareness of mental health and self-care, and promote community asset growth.

19. There are no direct implications of this report for the Council's role as corporate parent. However, some of the changes to services identified in the Mental Health Strategy should go some way to resolving a number of challenges identified in the current Herefordshire Corporate Parenting Strategy under Priority 5 – 'All looked after children enjoy the best possible health'. For example the introduction of Mental Health Support Teams across all secondary schools to identify young people at risk of developing mental health problems, and reduce the level of self-harming behaviour.
20. There are no specific implications for the council relating to health and safety arising from this report. There may be health and safety implications for partner agencies during the transformation process of mental health services across Herefordshire

## **Environmental Impact**

21. The development of the Mental Health Strategy and its aims and objectives are taking place with reference to the Herefordshire and Worcestershire Clinical Commissioning Group (CCG) 'Green Plan, 2021 – 2022'.
22. The NHS has a very large carbon footprint as a major buyer of goods and services from local, national and international economies and as such, has a significant opportunity to improve economic, environmental and social sustainability. Being sustainable will enable all NHS organisations to make the most of existing resources. Therefore, in practice this will require the CCG to ensure the following principles are mainstreamed into all decision making:
  - a) Planning services which are efficient and effective
  - b) Buying services which provide highest quality at best value and which have the least impact on the environment
  - c) Avoiding duplication, inefficiency and waste
  - d) Focus on preventative, proactive care
  - e) Patients and public engagement and involvement in planning and design of services
  - f) Building resilience and protecting and developing community assets and strengths
  - g) Making best use of all the resources we have
  - h) Minimising carbon emissions This approach should also help to reduce inappropriate demands, reduce waste and incentivise more effective use of service
23. Green Social Prescribing initiatives are being developed. They will provide local systems with the opportunity to work with partners to systematically embed green prescribing into local social prescribing schemes at an individual, community and whole system level and with a particular focus on supporting mental health issue.

## **Equality duty**

24. Please state how does this decision / proposal pay due regards to our public sector equality duty as set out below [do not remove the wording in the note, from section 149, below]

Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
25. The council and the NHS Herefordshire and Worcestershire Clinical Commissioning Groups (CCG) are committed to equality and diversity using the public sector equality duty (Equality Act 2010) to eliminate unlawful discrimination, advance equality of opportunity and foster good relations
26. In the Equality Act a disability means a physical or a mental condition which has a substantial and long-term impact on your ability to do normal day to day activities
27. An Equality Relevance Screening has previously been completed in respect of these recommendations. The screening did not identify any potential Equality considerations requiring further consideration during implementation
28. A copy of the Equality Impact Assessment is attached to this report (Appendix 2). The document identified no potential negative impacts but did indicate potential positive impacts for a number of equality groups including age, disability, race including travelling communities, as well as pregnancy and maternity

### **Resource implications**

29. The strategy has the potential to influence the application of NHS resources to mental health services in Herefordshire, taking into account other changes within NHS services including the transfer of provision to Herefordshire and Worcestershire Health and Care Trust and the transformation of community mental health services.
30. The strategy has no direct resources implications for Herefordshire Council. However, the council will need to review the impact of the strategy regarding access to NHS services for local residents and the use of the council's own resources in meeting individual needs. There are no direct resource implications arising from the Mental Health Strategy, but the strategy will influence the commissioning of new and additional services, the cost of which will be met through NHS resources.
31. As one of 12 Early Implementer sites nationally to transform adult community mental health services in line with the new national framework, Herefordshire and Worcestershire have received a significant increase in NHS funding which will also enable the development of new services around eating disorders and Complex Needs.

### **Legal implications**

32. There are no specific legal implications in the recommendation,

### **Risk management**

33. There are a number of significant changes taking place to the delivery of mental health services in Herefordshire as a result of Herefordshire and Worcestershire Clinical Commissioning Groups amalgamating from April 2020. Similarly the NHS Long Term Plan has specific expectations around the delivery of mental health services. Not endorsing the strategy may lead to some delays with completing the strategy, however changes to the provision of mental health services across Herefordshire have already commenced as of 1 October 2020

Risk / opportunity	Mitigation
<p>Within the new health structures of the Clinical Commissioning Groups and Health and Care Trust, there may be a risk that attention is focussed more on the needs and expectations of Worcestershire.</p>	<p>There are a number of groups in place (e.g. the Mental Health Advisory Group) across Herefordshire able to influence priorities.</p> <p>Herefordshire Mental Health Partnership Board has wide stakeholder membership including representatives from the CCG and Herefordshire and Worcestershire Health and Care NHS Trust.</p> <p>There is specific reference within the strategy to ensuring equitable services across the Integrated Care System footprint</p>
<p>The COVID-19 pandemic and subsequent lockdown caused delays to implementation planning during the early months of 2020 but the original timescales for implementation have not been adjusted accordingly</p>	<p>The CCG and H&amp;W Health and Care Trust are working closely with Primary Care Networks, VCS and Talk Community to mitigate any initial problems with implementation and service delivery during these early stages. The strategy has been updated to address additional pressures put onto mental health and primary care services as a consequence of the COVID 19 pandemic.</p>
<p>There is an opportunity to improve access to a larger range of mental health services covering a wide spectrum of illnesses and disorders.</p>	<p>Herefordshire Council will seek to ensure that it and local partners continue to have input and influence on the development of mental health services so they align with the aims and ambitions as laid out in the current Corporate and County Plans.</p>
<p>There have been challenges in recruiting suitably qualified staff to undertake new roles and responsibilities as community mental health services have expanded.</p>	<p>There is a national issue with regard to recruiting and retaining staff across the health and social care sectors. Herefordshire and Worcestershire Health and Care Trust continue to run recruitment</p>

This has slowed down the expected progress to date

drives and are confident that existing gaps in staffing will be filled.

### Consultees

34. The Clinical Commissioning Group has undertaken a number of engagement events in Herefordshire and Worcestershire during the latter part of 2019 and the beginning of 2020. There was also a survey undertaken in 2019. The full report on the outcomes of the survey and engagement events can be found at Appendix 2.
35. There is now a Mental Health Advisory Group meeting on a monthly basis. The membership includes elected members and officers from Herefordshire Council, senior management of Herefordshire and Worcestershire Health and Care Trust and CCG, VCS representation, as well as individuals with lived experience of mental illness. The forum is used to keep stakeholders up to date with transformation changes and enable some level of scrutiny of progress.
36. Herefordshire Mental Health Partnership Board will continue to have updates on the progress mental health service developments and act as a 'critical friend'. The chairperson of the MHPB is a general practitioner who will be able to observe first-hand how well the transformation programme is working for patients and his colleagues.

### Appendices

Appendix 1 – Mental Health Strategy DRAFT v13

Appendix 2 – Mental Health Strategy Equality Impact Assessment 2019

Appendix 3 – Mental Health Strategy - Engagement Evaluation Report – Final

Appendix 4 – Mental Health Strategy – Engagement Report Summary

### Background papers

None identified

### Report Reviewers Used for appraising this report:

Governance	Mathew Evans	Date 09/11/2021
Finance	Kim Wratten	Date 08/11/2021
Legal	Kate Coughtrie	Date 08/11/2021
Communications	Luenne Featherstone	Date 08/11/2021
Equality Duty	Carol Trachonitis	Date 08/11/2021
Procurement	Lee Robertson	Date 08/11/2021
Risk	Paul Harris	Date 08/11/2021
Approved by	Paul Smith	Date 23/11/2021

