

# Report of the Interim Strategic Director of Adult and Community Services and the Chief Officer Bradford City and Bradford Districts Clinical Commissioning Groups to the meeting of the Health and Wellbeing Board to be held on 19<sup>th</sup> September 2016

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## Subject:

**Working Better Together 2** – A Whole System for Health and Wellbeing – Joint Mental Health and Wellbeing Strategy Development

## Summary statement:

Update on development of a joint Mental Health and Wellbeing Strategy for Bradford, Airedale and Craven

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Bernard Lanigan, Interim Strategic Director, Adult and Community Services  
Helen Hirst, Chief Officer Bradford City and Bradford Districts CCGs  
Report Contact: Ali-Jan Haider  
Phone: (01274) 237290  
E-mail: [alijan.haider@bradford.nhs.uk](mailto:alijan.haider@bradford.nhs.uk)

## Portfolio:

**Health and Wellbeing**

## Overview & Scrutiny Area:

**Health and Social Care**



## 1. SUMMARY

**The Working Better Together** report is a standing item at the Health and Wellbeing Board that brings regular updates on development of a whole system approach to health, social care and wellbeing; for example supporting further integration between health and social care organisations and processes and directing the health and wellbeing system to develop integrated strategies.

This report notifies the Board that a presentation will be made at the Board meeting to provide a further update on the development of a Mental Health and Wellbeing Strategy for Bradford, Airedale and Craven and assurance that good progress is being made and draws out themes from the draft strategy.

## 2. BACKGROUND

### 2.1 Mental Health and Wellbeing Strategy

An external review of Mental Health Commissioning in 2015 recommended the development of a strategy and stakeholder engagement and improving governance for mental health. In February 2016 the Bradford Health and Wellbeing Board approved a proposal to develop an integrated approach to Mental Health and Wellbeing.

In April 2016 the Board held a dedicated session on Mental Health and Wellbeing and provided feedback to the Joint Commissioner to request that the strategy should: have a strong emphasis on integrated working, prevention, early intervention and building community resilience; address the relationship with wider determinants of health such as housing and homelessness and employment; and should encompass the mental wellbeing of children and young people as well as adults.

In July 2016 the Board received an update on the development of an all-age mental health strategy for the district in partnership with stakeholders. Development commenced in April 2016 and is scheduled for completion by September 30<sup>th</sup> 2016.

The Strategy was described as covering the full spectrum of mental health, from ameliorating the broader determinants of poor mental health, to mental wellbeing and suicide prevention to the care and treatment of those who have a mental illness.

The Board expressed concern that progress should be accelerated and recorded the following decision:

**That a further report be submitted to the Board in 2016 which addresses the comments made at the meeting and includes the following information:**

**The outcomes and objectives of the joint mental health and wellbeing strategy**



## **The timeline for achieving those outcomes and objectives The budget involved in providing joint mental health services**

**Action: Interim Strategic Director Adult and Community Services/Director of Collaboration Bradford City, Bradford Districts and Airedale, Wharfedale and Craven Clinical Commissioning Groups**

A presentation at the meeting will outline progress and themes from the work to date.

### **3. OTHER CONSIDERATIONS**

The programme mandate sets out the vision and aims of the strategy in brief.

#### **3.1 Programme mandate – summary**

The programme of work requires a broad range of stakeholders to work in partnership to deliver the required outcomes and the purpose of this paper is to provide a high level description of these to enable the Board to be clear about what will be achieved, how it will be delivered and by when. This will be central to informing its role of monitoring and steering the progress of the work. The programme will:

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- Engage with stakeholders including the broader public, patients, carers, NHS and LA Commissioners and providers from both the statutory and VCS sectors and ensure they understand the strategy process and receive feedback.
- Redesign local governance arrangements to provide oversight and management of the delivery of an agreed mental health improvement plan.
- Deliver a clearly articulated, aspirational and imaginative Vision for Mental Health and Wellbeing across Bradford, Airedale and Craven for the next 5 years, using clear language that is accessible to all and is shared and owned by local stakeholders.
- The Vision will be supported by a comprehensive Mental Health Transformation plan that sets out a detailed SMART action plan that describes the initial short to medium term plans and outcomes.
- The Programme will deliver a Vision and plan that aims to deliver:
  - Excellent quality of care, identifying less than optimum clinical outcomes, patient experience or return on investment and unwarranted variation in care or cost
  - At lower cost, by carefully selecting strategies that, together, produce more value for the same or similar resource
  - While improving population health, to re-balance the care of patients from acute care to prevention, self-care and living well.
- Will ensure that local plans reflect national priorities as well as local aspirations
- Deliver the Vision and Transformational plan for stakeholder endorsement by the end of September 2016.



## 3.2 National context

The development of the strategy takes place in the national context set by the Five Year Forward View for Mental Health, published in February 2016. This report from the independent Mental Health Taskforce to the NHS in England focused on the experience of people with mental health problems and initiated a process of transformation to achieve the recognition of equal importance between mental and physical health for people of all ages. In July 2016 five common principles for local areas were published:

- co-production with people with lived experience of services, their families and carers
- working in partnership with local public, private and voluntary sector organisations, recognising the contributions of each to improving mental health and wellbeing
- identifying needs and intervening at the earliest appropriate opportunity to reduce the likelihood of escalation and distress and support recovery
- designing and delivering person-centred care, underpinned by evidence, which supports people to lead fuller, happier lives
- underpinning the commitments through outcome-focused, intelligent and data-driven commissioning.

These have been adopted in developing the joint mental health strategy for Bradford, Airedale and Craven to improve mental health and wellbeing for all people.

In respect of children and young people further context is provided by Future in Mind, published in March 2015 by the government's Children and Young People's Task Force. Work is underway in the District to develop a Transformation Plan against the five key themes of:

- Promoting resilience, prevention and early intervention
- Improving access to effective support – a system without tiers
- Care of the most vulnerable
- Transparency and Accountability
- Developing the Workforce

Other areas of recognised national importance are:

- Improving the physical health of people with mental health problems
- Safe places for people in mental health crisis
- Services for older people that respond to the full range of potential needs and are integrated with social care, primary care and care for physical health conditions
- Rapid access to services for people with anxiety, depression, eating disorders and for those experiencing a first episode of psychosis



### **3.3 Individual sections of the Draft Strategy**

A number of sections are in full draft and are outlined in brief below.

#### **3.3.1 What we know**

As well as the national context set out above, an early section of the draft strategy describes local knowledge about the diverse population of the District in respect of:

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- factors that increase the risk of mental illness – genetic factors, social, economic and environmental factors
- the inter-relationship between physical and mental health and increased cost of care for people with long-term conditions and mental health needs.
- the impact of stigma
- the range of conditions
- a focus on childhood and the importance of the early years to establish good mental wellbeing
- key messages from people with mental health needs
- how services are currently organised
- service gaps and areas for improvement
- the national context
- inter-relationship with other local programmes

#### **3.3.2 Where do we want to be?**

This section of the strategy focuses on commissioning and integration of existing services including:

- community and place-based solutions
- high-quality services for those that need them,
- intervening early to reduce the need for more specialised services
- building on existing strengths, resources and resilience
- primary, secondary and tertiary prevention
- primary care and secondary care services,
- psychological therapies
- integrating mental health approaches into other services and care pathways including substance misuse, alcohol and learning disability and autism.

#### **3.3.3 How do we get there?**

Workforce development is identified as a key route to effect change through the Integrated Workforce Programme and is tasked to develop a system wide integrated health and social care workforce that is fit for the future. This section also focuses on sustainability of the sector.

The role of the Voluntary and Community Sector is acknowledged as local organisations working with vulnerable and marginalised people and embedded in local communities.



This section also considers ways to create better value from available resource - considering evidence-based commissioning, wider population approaches and building resilience as well as considering the use of technology and the future contribution of Accountable Care Systems.

#### **4. FINANCIAL & RESOURCE APPRAISAL**

An overview of resource for mental health commissioning was presented to the Health and Wellbeing Board in February 2016 and currently stands at the level included in the 2016-17 Better Care Fund for the District.

#### **5. RISK MANAGEMENT AND GOVERNANCE ISSUES**

Mental Health governance structures have been developed in line with the agreements set out at the February 2016 meeting of the Health and Wellbeing Board and are providing the leadership for the development of the strategy for Mental Health and Wellbeing. No outstanding risk issues are associated with this programme at the current time.

#### **6. LEGAL APPRAISAL**

#### **7. OTHER IMPLICATIONS**

##### **7.1 EQUALITY & DIVERSITY**

The joint Strategy for Mental Wellbeing will address issues of equality and diversity as they apply to protected characteristics groups. In addition the Strategy will address inequalities that are not covered under the Equality Act 2010 for example relating to deprivation in particular as poor health outcomes, health inequalities and equity of access to and uptake of services is often associated with areas of high deprivation.

##### **7.2 SUSTAINABILITY IMPLICATIONS**

The Sustainability and Transformation Plans for Bradford and Craven and for West Yorkshire will address sustainability issues in relation to financial sustainability through the work to close the finance gap for the health and social care economy. Estates workstreams will address the sustainability issues set out in the Carter Review.

##### **7.3 GREENHOUSE GAS EMISSIONS IMPACTS**

None

##### **7.4 COMMUNITY SAFETY IMPLICATIONS**



No specific community safety issues are anticipated to arise from the development and publication of the joint Strategy for Mental Health and Wellbeing.

## **7.5 HUMAN RIGHTS ACT**

The current position in respect of Human Rights Act implications, for example in relation to Deprivation of Liberty, is unlikely to be impacted by the publication of the MH and Wellbeing Strategy.

## **7.6 TRADE UNION**

None

## **7.7 WARD IMPLICATIONS**

None

## **8. NOT FOR PUBLICATION DOCUMENTS**

None

## **9. OPTIONS**

None

## **10. RECOMMENDATIONS**

That the Board receives the update and provides feedback to further shape the strategy and encourages wide participation in consultation on the draft strategy through its constituent organisations.

## **11. APPENDICES**

None

## **12. BACKGROUND DOCUMENTS**

None

