

Report of the Director of Strategic Partnerships to the meeting of Health and Social Care Overview and Scrutiny Committee to be held on 6 December 2018

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Subject:

Mental wellbeing in Bradford and Craven – spotlight on services.

Summary statement:

This paper provides highlights of the district wide Mental Wellbeing Strategy and a spotlight on four key service areas: Employment support for people with mental illness, psychological therapies, perinatal services and the acute care pathway.

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Portfolio:

Healthy People and Places

Overview & Scrutiny Area:

Health and Social Care

1. SUMMARY

1.1 The Mental Wellbeing Strategy provides a system wide approach to addressing the wider determinants of poor mental health, focus on the integration of physical and mental wellbeing and ensure that when people need mental health services, they are accessible and responsive.

1.2 This paper describes how our local health and care partnerships are working together to achieve the objectives of the strategy with a spotlight on four key areas of activity; employment, perinatal mental health services, psychological therapies and the acute care pathway.

1.3 Delivering the strategy for our population amidst challenging times requires a system wide partnership approach. We request the Health and Social Care Overview and Scrutiny committee members to:

1. Receive and comment on the progress of the Mental Wellbeing Strategy in particular around the spotlight areas.
2. Ensure that Mental Health is a key consideration in every policy and programme that comes before the committee
3. Raise the profile of mental wellbeing champions by agreeing to be champions and promote mental wellbeing within your key portfolio areas.
4. To accept our partnership offer of mental health training for all committee members including getting to know our services better by shadowing our teams.

2. BACKGROUND

2.1 Mental health issues will affect about 155,000 people in our locality at some time during a person's life, with approximately 6,200 people being in need of and in contact with specialist mental health services at any given time.

2.2 There are a number of risk factors that contribute to poor mental including a combination of genetics, personal circumstances and the environment a person lives in. Social issues such as the impact of poverty, living conditions, prejudice and discrimination, the quality of relationships, work and other activities are also very relevant.

2.3 In January 2017 we launched the strategy for Mental Wellbeing in Bradford and Craven. This all age strategy has been developed through extensive and detailed working with partners and stakeholders across our local health and care partnership including the involvement of families, carers and people.

2.4 Our Mental Wellbeing Strategy sets out the principles of our work to focus and our Joint Health and Wellbeing Strategy sets out our ambition for a happy and healthy Bradford District, where people have greater control over their wellbeing, living in their own homes and communities for as long as they are able, with the right support when it is needed. Our local health and care partnerships are working

towards a district where we achieve the following strategic objectives for our population:

1. Early action, awareness and prevention
2. Promote good wellbeing
3. Easy access to integrated care
4. Services focussed on recovery
5. Transformation of services

2.5 Progress to date

2.5. The paper provides an overview of progress against the 5 strategic outcomes. These includes developing leadership and partnerships across the system to embed mental wellbeing within strategic programmes, better outcomes for people and their carers, the involvement of people and their carers in shaping and improving services, key workforce developments and linking to wider West Yorkshire & Harrogate work.

2.6 Spotlight on four areas

2.6. The paper provides a spotlight on four areas of key activity. These are the vocational and employment services, psychological therapy services, perinatal mental health services and the acute care pathways.

2.7 Vocational and employment services.

2.7 There are currently 3 commissioned mental health pre-employment and employment services delivered in Bradford District and Craven.

1. Individual Placement and Support (IPS) delivered by Bradford District Care Foundation Trust (BDCFT)
2. Pathways to Employment Service delivered by The Cellar Trust
3. STEPs into Employment Service delivered by The Cellar Trust and BDCFT

2.7.1 Our aim is to support and develop people at every stage of their recovery to become ready for work and then to access employment. We will also concentrate on supporting people having difficulty in work due to their mental health, to retain their employment, thus avoiding the risk of long-term worklessness. The services have supported over 453 people in the past year. Outcomes include 73% moved onto vocational and employment opportunities and 36% paid employment.

2.7.2. In line with the Mental Wellbeing Strategy there is an opportunity to build on the existing partnership working between the providers, as well as the links to adult social care, to develop an integrated approach to the delivery of pre-employment and employment support for people with mental health problems.

2.8 Psychological Therapies

2.8 Psychological therapies in adult mental health are hosted across 3 services; MyWellbeing College, Community mental health psychological therapy services and Intensive psychological therapy services.

2.8.1 MyWellbeing College (MWC) is an Improving Access to Psychological Therapies (IAPT) service, delivering NICE recommended evidence based step 2 and step 3 interventions for people from 16 years of age. Steps refer to intensity of intervention, step 2 being low intensity which includes 'Guided Self-Help' (GSH); also commonly referred to as psycho-education. Step 3 refers to high intensity interventions, commonly delivered 1:1 by an accredited psychotherapist.

2.8.2 Bradford residents can self-refer via telephone or register their interest online via the MyWellbeing College website (www.bmywelbeingcollege.nhs.uk). The website includes information about the various 'courses' offered by MWC and VCS partners. There is also a knowledge bank of wellbeing information that all residents can access and use at home.

2.8.3 The community mental health psychological therapy services consists of clinical psychologists and psychotherapists organised into locality based teams, which align with each Community Mental Health Team (CMHT). Staff provide individual and group psychotherapy along with consultation to the wider CMHT.

2.8.4 The Intensive Psychological Therapy Service consists of Clinical Psychologists, Psychotherapists and Occupational Therapists. Multiple-therapies will be offered in parallel with two functions; some therapy will be aimed at exploring the underlying factors linked to the presenting difficulties, often trauma experiences; alongside this therapy will be offered which is containing ie supports the person to cope with the distress generated from the explorative therapy.

2.8.5 The Psychological services have a range of challenges around access, meeting times and meeting the needs of older people and people from Black and minority ethnic (BME) communities. The Care Trust has taken a range of steps to address these challenges and improve the access and recovery rates for people.

2.9 Perinatal mental wellbeing services

2.9 The perinatal period (the period including pregnancy and the first year following the birth of a child) is a time of psychological stress and vulnerability. Perinatal mental health problems is expected to affect around 1 in 5 women and covers a wide range of conditions. Exposure to a maternal mental health problem, and associated lifestyle factors, is associated with:

- poor pregnancy outcomes including still-birth and prematurity.
- an increased risk of behavioural and emotional problems for the baby later in life
- an increased risk of impaired mother–baby interactions and parenting difficulties, particularly in women with a chronic mental illness, which in turn may have a negative impact on the baby.

2.9.1 Bradford launched a Specialist Mother and Baby Mental Health Service (SMABS) in 2018 using funding provided by NHS England as part of Future in Mind and Five Year Forward View investments.

2.9.2 The service provides a professionals' perinatal mental health advice line and from June to October, SMABS had received 436 calls, spending 207 hours providing advice. Of these contacts, 53 were accepted into service for specialist

perinatal assessments, the majority of contacts were for advice only and others were referred on to appropriate alternative services.

2.10 Acute Care Services

2.10 Bradford District Care NHS Foundation Trust, working in partnership with the Police, Council and VCS partners provides care to people experiencing mental health crisis across a dynamic and integrated acute care pathway. The service includes The First Response service, the Intensive Home Treatment Team and works across the acute inpatient wards, safer spaces, the community mental health teams, early intervention in psychosis, accident and emergency services and the perinatal service.

2.10.1 Key progress with the acute pathway include achieving no out of area placements in over 3 years, embedding a proactive approach to care, reduced incidents, better recovery outcome and reduced lengths of stay on our wards.

2.11 Challenges and opportunities

2.11 Social and demographic changes provide a range of challenges to our mental health services. Our approach in Bradford has been to take a system partnership approach to addressing challenges. Partnership approaches to the above services have seen seamless service provision for people and their carers, better outcomes and experiences, efficiencies and staff satisfaction. There are key opportunities for us as we transform our community services to have a recovery focussed approach.

3. OTHER CONSIDERATIONS

3.1 The Mental Wellbeing Programme is governed by the Mental Health and Wellbeing Partnership Board on behalf of the Health and Care Partnerships in Bradford and Craven. The overall plans are signed off by the Health and Wellbeing Board and are integral to our Joint Health and Wellbeing Strategy for Bradford and Airedale 2018-23: Connecting people and place for better health and wellbeing, and the West Yorkshire and Harrogate Health and Care Partnership Plan.

3.2 Engagement is carried out with the public (including service users and carers) and key stakeholder partners (including clinical staff and providers) on an ongoing basis and routinely shapes and informs improvements to our programme of work.

4. FINANCIAL & RESOURCE APPRAISAL

4.1 The Mental Health and Wellbeing Partnership Board sets the direction and provides a broad framework for decisions about the use of resources for the Mental health Programme. This is reviewed by the Health and Care Partnership Board on a quarterly basis.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 The Health and Care Partnership Board owns and provides overall governance of the Mental Health Programme of work. Risk and delivery is managed by the

Mental Health and Wellbeing Partnership Board through a performance management framework with annual reporting to the Health and Wellbeing Board.

6. LEGAL APPRAISAL

No legal issues.

7. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

7.1 The Mental Wellbeing Strategy aims to reduce the barriers and issues people face in accessing mental health services and address the wider determinants of mental health inequalities which in some can disproportionately affect people with protected characteristics under the Equality Act 2010. As such the Strategy aims to make a positive contribution to our population with protected characteristics.

7.2 SUSTAINABILITY IMPLICATIONS

7.2 The Mental Wellbeing Strategy supports work at the local and West Yorkshire & Harrogate level to ensure that services are sustainable within the available budget.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

7.3 No direct implications. Implementation of the transformation plan involves increased opportunity and access for young people to community and physical activities in the District which may have some impact on greenhouse gas emissions if the number of car journeys were to decrease as a result.

7.4 COMMUNITY SAFETY IMPLICATIONS

7.4 No direct implications, however community safety is a key enabling factor allowing children, young people and families to engage in civic and community activities. Reduced social isolation will enhance wellbeing.

7.5 HUMAN RIGHTS ACT

7.5 As services supporting people with mental health issues through transition, the aims of good practice in hospital and community settings align with human rights values. This includes, promoting independence and wellbeing, in the least restrictive setting possible, promoting recovery, focusing the needs and wishes of the person and promoting autonomy. Using a human rights approach allows staff to weigh the rights of the service user whilst taking into account the risks, which could affect the person's/other people's safety or wellbeing. Within the health and social care partnership, social work practice and community services are steeped in upholding human rights, keeping the person's voice at the heart of all we do and driving us to continually learn and improve.

7.6 TRADE UNION

No direct implications.

7.7 WARD IMPLICATIONS

7.7 In areas with poor health and wellbeing and higher levels of health inequalities, different approaches are needed to improve access, deliver effective services, improve mental health and wellbeing and reduce health inequalities.

7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS

Not applicable.

7.9 IMPLICATIONS FOR CORPORATE PARENTING

No direct implications.

7.10 ISSUES ARISING FROM PRIVACY IMPACT ASSESSMENT

Not applicable.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

No options are provided.

10. RECOMMENDATIONS

The Health and Social Care Overview and Scrutiny committee are invited to:

10.1: Receive and comment on the progress of the Mental Wellbeing Strategy in particular around the spotlight areas.

10.2: Ensure that Mental Health is a key consideration in every policy and programme that comes before the committee.

10.3: Raise the profile of mental wellbeing champions by agreeing to be champions and promote mental wellbeing.

10.4: To consider the partnership's offer of mental health training for all committee members including getting to know our services better by shadowing our teams.

11. APPENDICES

Appendix 1: Mental health and wellbeing services spotlight report

Appendix 2: Mental health outcome plan