HEALTH SCRUTINY PANEL EMOTIONAL WELLBEING AND MENTAL HEALTH – ACTION PLAN

Response from the Director for Children, Families and Learning, the Director for Social Care and Middlesbrough PCT

30 April 2009

SCRUTINY RECOMMENDATION	Service Response PROPOSED ACTION	BY Whom	Budget Cost	Timescale	PC
1. The Panel would like to hear from Middlesbrough's Dept of Social Care and Middlesbrough PCT, how they are planning to implement the emerging national policy, regarding more preventative services. This is especially so around the prevention of social isolation, which can lead to poor mental health. The Panel would welcome the opportunity to contribute to that work and would be interested to hear how the local authority and PCT are making budgetary provision for such programmes.	The NE Branch of ADASS (Association of Directors of Adults Social Services) intends to commission independent research into the effectiveness and cost benefits of a range of preventative services. This will provide an evidence base for the future development of the Local Preventative Services. In addition, Middlesbrough Council Social Care Scrutiny Panel are currently investigating provision of preventative services. The implementation of the Scrutiny Panel's recommendations are likely to support the further development of services designed to improve emotional well being.	Director of Social Care	Nil (Research project funded by Regional Improvement and efficiency partnership)	Dec 2009	PCT re The Pa colleag to impl prever social descril the PC well be providi comme planne though from 1 can be provisi
2. The Panel would like to see the local authority make it easier for community groups providing activities for older people to access community grant monies, to enable such activities to have a surer financial footing and become more sustainable. This could be done through increased advertisement or awareness raising. The local authority could target specific groups to ensure their awareness of such monies if felt appropriate.	The Council and the PCT will take steps to ensure that opportunities to access grant monies, for example the PCT Easy Access Fund and the Council Grants Programme are improved through increased awareness raising.	Council Grant Officer Joint Public Health Director			progra prever physic particip activitio
3. The Panel feels that as a condition of financial support being granted to Community Councils, a proportion of that figure should be spent on activities for older people in their area of influence. Such programmes could be aimed at combating social isolation and specifically targeted at those in perceived danger of social isolation.					
4. The Panel would like to receive progress reports on the two recommendations above at 2 and 3.					

APPENDIX A

CT response to specific recommendations

response to recommendations 1-4

Panel sought detail from the PCT and social care agues regarding plans and budgetary provision plement emerging national policy regarding entative services particularly regarding the role of al isolation for this vulnerable group. As ribed in the PCT's operating plan and reflected in PCT's financial investment in mental health and being services, the PCT is committed to ding services for all members of the local munity including older people. Along side work ned with regards to dementia which typically gh not exclusively impacts upon older people, 1st April 2009 the PCT's support for older people be further demonstrated through free swimming ision for the over 60s and an 'Ăctive for Life' ramme. These initiatives will support both the entative/wellbeing agenda as well as result in ical health benefits, and encourage the cipation of older people in social and community ities.

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5. The panel recommends that Middlesbrough PCT, Middlesbrough Council and partners use their best endeavours to deliver a mental health first aid programme, specifically designed for Children & Young People. Further, that all staff working with children & young people be given the opportunity to attend that specialist mental health first aid training, when it is operational.	A Multi-Agency Working Party, including the involvement of young people, has been established to develop a Self Harm Protocol. This will consider specialist mental health training including training in attachment and risk and resilience. External CAMHS consultant trained in Mental Health First Aid Course will be engaged to build on training already provided to 75 professionals in Middlesbrough in 2008.	Director of Public Health	Existing resources	March 2010	PCT re Recon recom aimed workin part of and ac the Ch Plan. recom will se scope
6. The Panel recommends that school governors, investigate how that particular school can seek to address emotional wellbeing training for staff.	Reasonably priced training opportunities will be sought and raised with governors through the Governors' Forum.	Head of Governor Support	School budgets	Ongoing	develo childre should 'Be He AOP C improv treatm tacklin of poo innova
7. The Panel recommends that the Children's Trust seeks clarity on how it is identifying the mental health and emotional wellbeing needs of children. The Panel would like to hear the outcome of that exercise and hear the examples of the services being commissioned.	The Trust will review the mental health and emotional wellbeing needs of children through the Be Healthy group in line with a recommendation in the Annual Performance Assessment (APA).	Director of Public Health	Existing resources	March 2010	PCT re The lo on the appoin togeth emerg the con and we the PC the Lo commi Health detaile of child recom of key using I Middle unders health outcom key pa deliver

response to recommendations 5, 6 and 8

ommendation 5, 6 and 8 which makes mmendations to provide awareness and training ad at children young people and professionals ing with this group, this will be incorporated as of the planned review of the effectiveness of child adolescent mental health services as detailed in Child Health scheme of the Annual Operating . This includes school provision as mmended in the report. The PCT suggests, and eek to work with partners during 2009/10 to e the feasibility of commissioning work on loping Mental Health First Aid programmes for ren and young people, specifically that this work Id be progressed through the Children's Trust's

Healthy' Theme Group in the first instance. The Child Health scheme also describes plans to ove the commissioning of prevention and ment modalities for young people as well as ing wider issues such as recognising indicators for mental health and challenging stigma using vative and targeted social marketing appreciates.

response to recommendation 7

local authority and the PCT have representatives e Children's Trust Board through joint intments that will ensure all organisations work ther to develop a shared understanding of the rging role for Children's Trusts and their role in commissioning and provision of emotional health wellbeing services for children. As an example, PCT through the Children's Trust, has supported ocal Authority through facilitating the missioning of work from the North East Public th Observatory [NEPHO] in 2009 to undertake a led systematic audit of the mental health needs ildren and young people. NEPHO has mmended that a detailed analysis is undertaken y national data sets in the first instance and local data, extrapolate relevant data to the lesbrough population to gain a clearer erstanding of the prevalence of specific mental h disorders in children and young people. The ome of this work should be widely shared with partners to inform the future commissioning and ery of services

8. The Panel recommends that a systematic audit takes place to inform the incidence of poor mental health in Middlesbrough amongst children and young people. Until this is done, a commissioning strategy and associated investment cannot be reliably undertaken. This should be completed as a priority.	Children and Young People's Trust will audit mental health needs.	Director of Public Health	Existing resources	March 2010	See PC above.
9. The Panel would encourage the Children's Trust, to support Looked After Children and their foster families in accessing leisure facilities.	will continue to support Looked After	Deputy Director, Safeguarding	Existing resources	Ongoing	PCT re Reassu with pa young p children investn to expa with pa
10. The Panel recommends that Middlesbrough Council, as a corporate parent, continues to invest in leisure passes for Looked After Children and their foster families.	Middlesbrough Council will continue to invest in leisure passes for Looked After Children and their foster families.	Deputy Director, Safeguarding	Existing resources	Ongoing	
11. Middlesbrough PCT looks to actively support Looked After Children their foster families in undertaking leisure activities, which would be beneficial for their physical and mental health.					See PC
12. The Panel recommends that Middlesbrough Council and PCT extend services for Adult Mental Health first aid across the town, so it is accessible for all people who would benefit from the training in the performance of their job. The Panel would envisage that this would necessitate extra investment in the programme.	Mental Health First Aid across the	Head Of Service MH and LD Middlesbrough Council and Commissioning Manager MH Services in Middlesbrough PCT	£40k	December 2009	PCT re The co recogn integra has cle confide provide probler delivere investe will see 2009/1 well ref Annual

PCT response to recommendations 5 and 6 e.

response to recommendation 9 and 11

ssurance has been sought from the PCT, along partners invest in leisure facilities for children and og people, actively supporting looked after ren and foster families. The PCT has a history of stment in this area and welcomes the opportunity spand investment and service provision working partners.

PCT response to recommendation 9 above

response to recommendation 12

contribution of Mental Health First Aid (MHFA) is gnised in the PCT Strategy as part of a suite of rated programmes and this particular programme clear benefits of increasing awareness and dence in trained individuals to identify and de support to people with mental health lems. In addition to the training that has been ered as part of regional work, the PCT has sted an additional £10,000 in MHFA this year and eek to identify additional resources during 0/10. The PCT hopes that this commitment is also reflected in the attached extract from the 2009/10 ual Operating Plan.

PCT re		13. The Panel recommends that the PCT
		commissions a comprehensive range of
Middles		services, from as wide range of providers as
recomr		possible, aimed at assisting people with
and inv		mental health concerns, at the earliest
array o		possible juncture. This would assist General
the ea		Practice in being able to have more options
total b		of appropriate support for people, such as
local h		debt advice where relevant and talking
already		therapies.
progra		therapies.
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sets ou		
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service		
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worker		
current		
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response to recommendations 13 and 14

esbrough PCT notes the Panel's mendations that the organisation commissions nvests in a wide range of service form a diverse of providers to support mental health needs at arliest opportunity. The PCT in 2009/10 has a budget of £277 million to invest in improving health services with the additional investment dy outlined for psychological services and MEND ammes.

PCT strategy together with the regional strategy but a 'stepped care' model for mental health and being services with an emphasis on early ention and timely response for people. This is sure delivery of interventions and support at the priate level of intensity to meet individual needs. two of the model has a particular focus on low interventions and guided self help set to be ble through primary care. There has already investment in additional staff at this level, the uction of computerised CBT, work with library es to support books on prescription, education narmacy staff and primary care mental health ers on sleep hygiene. Additionally the PCT ntly supports through the Citizens Advice Bureau its advice and for those returning to work.

services will be delivered by a range of ders and will have formal links to Job Centre Condition Management Programme and pational Health departments. The service model les people to self refer if appropriate which in the sites has proven to be effective in encouraging as to the services from traditionally hard to reach be such as BME communities and men. As ed, IAPT represents a significant and continued tment by the PCT.

dition to the primary care and community based al health services commissioned through Tees, and Wear Valley Foundation NHS Trust, the PCT resources primary care mental health services ly from GP practices such as practice attached sellors, community pharmacists as well as MIND ort services and Advocacy with third sector ders.

PCT Strategy recognises the need to focus on asing the level of investment in primary and

					preven investm needs input, in Provide the PC need to other s suppor health advice, maximi
14. Connected to the above, the Panel would recommend that the PCT support this policy shift by committing substantial investment to its implementation. The Panel would not seek to suggest a precise sum, but would recommend that it is substantially more than the current 3% spend on primary care services out of the budgetary provision for adult mental health services.					See PO
15. The Panel would, in the near future, like to see evidence of the PCT and the Middlesbrough Council implementing joint investment plans for the emotional wellbeing and mental health services in Middlesbrough, which is very much a shared priority.	The Council will collaborate with the PCT in any joint investment plans for emotional well being and mental health services in Middlesbrough through Be Healthy group in line with a recommendation in the APA.	Director of Public Health	Existing resources	March 2010	PCT re With re welcom partner jointly s contribu well-be teams, service the Cou specific well-be suppor misuse the Act
16. As a final observation, the Panel notes that there will be indicators that can be devised to ascertain whether the suggested actions above have had an impact. For example, the success of a Commissioning Strategy will largely be borne out as to whether GPs feel that there are more options in prescribing services for poor mental health. It would also be indicative of an improved					PCT re The PC indicate implem for talk for drug people accom

entative interventions and this will require stments in these areas to be balanced with the s of other services that require a more intensive , including in-patient and secure services. ders such as GPs are integral to the delivery of CT's strategy and the PCT acknowledges the to communicate more effectively with these and service providers the range of alternative ort options available for people with mental h needs e.g. personalised care budgets, debt ee, talking therapies etc. to ensure that uptake is mised.

PCT response to recommendation 13 above.

response to recommendation 15

regards to joint investment plans the PCT omes the opportunity to work collaboratively with ers and there are a range of services which are y supported by the PCT and Local Authority that ibute to improving mental health and emotional being. These include integrated mental heath s, user and carer involvement and advocacy ces. In the current year Middlesbrough PCT and council jointly invested in a range of services that fically will improve mental health and emotional being and resilience such as 'Families First', orting children and families at risk of substance se, in addition to the outlined free swimming and ctive for Life programmes for older people.

response to recommendation 16

PCT Strategy is underpinned by a range of ators to assess progress and the effectiveness of ementation. These include reduced waiting times lking therapies, reduction in hospital admissions rug and alcohol misuse, increased numbers of le with mental health problems in settled mmodation and employment and a reduction in

commissioning strategy, if General Practice felt that services were improving. In addition, the success of more mental health first aid training for those in contact with young people or older people may mean an increase in accurate and appropriate referrals.				people depres also be to ensu commis improve young, Middles
17. The Panel would suggest that in considering new commissioning strategies, such performance measures are investigated.	Head of Service (MH & LD) and relevant PCT leads	Nil. Within existing resources	Performance Indicators determined by September 2009.	

Additional information from the Middlesbrough Primary Care Trust

Strategic Overview

The PCT's Strategy sets out a clear framework for the future development of wellbeing and mental health services. It demonstrates the commitment of the PCT to tackling this agenda through the inclusion of 'Mental Health and Wellbeing' as one of the strategy's eight strategic themes. This is supported by robust operational delivery plans and investment; examples include £1million mental health investment to improve access to psychological services as well as £286,000 for the MEND programme (Mind, Exercise, Nutrition, Do it!) pioneered by the PCT which promote wellbeing and the associated benefits of exercise and nutrition on mental health.

The aim of the PCT strategy is to support people to live healthy, resilient and engaged lives, supported by appropriate and personalised services. The holistic approach taken by the PCT is reflected in its plans to focus on the development of an integrated system to better manage mental health needs, and improve the wellbeing of individuals as well as the wider community.

The strategy builds upon the national culture shift in relation to this agenda and this direction of travel is clearly endorsed by the Panel. It reflects the significant improvements in the access to, quality of, range and responsiveness of services for people with mental health needs since the publication of the National Service Framework (NSF) in 1999 which focussed on mental wellbeing and health promotion and prevention, rather than solely treatment. In addition, the Strategy is aligned to regional strategic health plans such as NHS North East's *Our Vision, Our Future, Our North East* and the regional health and wellbeing strategy *Better Health, Fairer Health*. Furthermore, the strategy addresses issues identified through the local Joint Strategic Needs Assessment with Local Authority partners.

Delivering Improvements in Mental Health and Wellbeing

The PCT's Annual Operating Plan 2009-10 outlines the first year of implementation of the PCT strategy and clearly describes the actions, measures of success and the underpinning investment required to achieve each scheme. In addition to a dedicated mental health and wellbeing scheme (Appendix 1), these issues also feature within other schemes such as the Child Health scheme, reflecting the PCT's whole systems approach.

Key first steps towards delivering well being are to better align services to needs with parallel commitment given to improving access to psychological therapies. The Panel's concern regarding the availability of psychological therapies in primary care highlighted in the Panel's report is shared by the PCT and, as outlined within the Annual Operating Plan (AOP), priorities for the first year of the five year strategy include proactively progressing the Improving Access to Psychological Therapies (IAPT) programme ahead of national timeframes. This programme will increase psychological service provision and support recovery and the promotion of social inclusion, within reduced waiting times.

Other AOP priorities include working with partners to develop and deliver the Stepped Model of Care approach. This will improve early diagnosis and management of mental health as well as include a review of investments and disinvestments to ensure provision supports the model's ethos. In addition, the PCT will tackle specific issues such as dementia and dual diagnosis ensuring services reflect national strategies whilst responding to local needs as well as and improve quality monitoring (addressing recommendations 16 and 17) to inform value for money assessments, including the development of user focused outcome measures.

Progress against the Annual Operating Plan will be subject to robust monitoring by the PCT's Board's through well established assurance mechanisms, in particular regular reviews of the PCT Business Plan through a Compliance panel chaired by a non Executive Board member.

le claiming incapacity benefit due to anxiety and ession. However, other indicators of progress will be developed by the PCT as the strategy unfolds sure effective implementation, investment and nissioned service provision to demonstrably ove the mental health and wellbeing of the g, working age and older people of lesbrough.