HEALTH AND WELLBEING SCRUTINY COMMITTEE

ADULT MENTAL HEALTH STRATEGY UPDATE

REPORT OF THE DIRECTOR OF PLACE (SUNDERLAND) – NORTH EAST AND NORTH CUMBRIA INTEGRATED CARE BOARD

1. PURPOSE OF THE REPORT

1.1 To provide the Health and Wellbeing Scrutiny Committee with an update on the work that has taken place to implement the Adult Mental Health Strategy for Sunderland which was approved for publication in June 2021.

2. BACKGROUND

- 2.1 As presented to the Health and Wellbeing Scrutiny Committee in November 2020, the former Sunderland CCG had committed to developing an Adult Mental Health Strategy for the city.
- 2.2 This report will provide a summary of the progress made around implementation of the three key principles of the strategy.
- 2.3 The development of the strategy took place over four phases which have previously been described to the committee and consisted of:
 - Phase one engagement on the scope.
 - Phase two involving people.
 - Phase three review of findings.
 - Phase four present and publish the strategy.

Using the analysis generated from the engagement phase we generated our vision and three key priorities:

Everyone's Mental Health Matters: Empowering people by supporting individuals, families, and communities to improve and maintain mental and physical health, so they can lead fulfilling and healthy lives.

Priority One: An ounce of prevention is better than a pound of care: Strengthening and promoting lifelong mental health and wellbeing with a focus on prevention.

Priority Two: Right Response, Right Time, Right Place: Ensuring there is appropriate and timely access to flexible and inclusive mental health care services for all, focussing on the whole person.

Priority Three: Working with you on what matters to you: Delivering care designed around the individual, without barriers across teams, services, and organisations.

3. CURRENT POSITION – PRIORITY ONE

3.1 Our strategy pledged four important commitments to deliver priority one – 'an ounce of prevention is better than a pound of care'. A short summary of progress against each commitment is noted as follows:

Our Commitment

We will promote mental health awareness to address wider determinants of health and strengthen coping strategies with a focus on the greatest areas of communities in need.

Our Progress

We are currently working alongside the recently mobilised family hubs to ensure that we can support families across the city who may not usually access support. Whilst some of the focus is on developing parent/infant relationships, we are also looking wider than this and developing dedicated Talking Therapies support sessions which will be held in the hubs and allow new parents to bring along their babies (and children) to reduce any additional barriers this may present.

Sitting alongside the family hubs, is a Maternal Mental Health Link Worker who is offering invaluable support to families. The worker can provide practical, emotional and social support to new and expectant mothers in Sunderland who are struggling with their mental health.

"Ray's Corner" is an established mental health support resource and is widely available across the community. The presence of 'the Corner' has grown and is now available in all welcome spaces (previously termed warm spaces) that the Local Authority supported. Funding has been secured for further roll out of the "Corner's", with a particular focus on Sunderland's Family Hubs and workplaces.

The Ray's Corner resource is now being expanded further and a QR code has been developed for small spaces where a physical resource is not possible. The QR code, once scanned, will take the user to a whole host of resources to support mental health and wellbeing as well as suicide prevention material. The QR code has already been posted in toilets in the city centre and provides a discrete option for the public to access information. [At the time of writing this paper the QR code has been accessed 1872 times.]

We will work in partnership with communities to identify priorities, understand barriers to access, and co-produce solutions in relation to mental health and wellbeing.

All counselling staff within Sunderland Counselling Service have received specific training on working with neurodiverse patients which includes basic background and information on what terms means, how people might present as well as specific techniques to support and potential therapy adaptions to ensure the service is accessible to all people. Further training has been commissioned for 2024 to support autistic people, which will be delivered by colleagues who have experience of working with autistic clients.

We will develop and implement a prevention system to strengthen public mental health delivery.

Led by the Public Health team, progress has been made against the implementation of the Prevention Concordat for Better Mental Health. A range of programmes are being utilised to provide a holistic picture of mental health priorities within Sunderland. Some of the key achievement include:

- The near real time surveillance system has been established, providing intelligence of suspected suicides, in a timely manner, enabling earlier intervention and prevention.
- Findings from the Better Mental Health Evaluation have been shared and additional Public Health funding has been secured to drive forward recommendations.
- Sunderland's social prescribing model has evolved significantly and is now known as 'Sunderland Links for Life'. A provider has been commissioned to develop the digital platform.
- Sunderland's Suicide Prevention Action Plan has been refreshed for the period of 2023-2026, in line with the announcement of the new national suicide prevention strategy.
- Every Mind Matters Campaigns have been delivered across key dates of the year, with plans to do more targeted marketing with children and young people over the next few months.

We will promote and encourage the uptake of annual health checks for patients with serious mental illness to support their mental wellbeing and prevent physical ill health. We are continuing to support both primary and secondary care to ensure that patients with a severe mental illness (SMI) in Sunderland have an annual health check.

We have significantly improved our achievement over the last year and can report that at the end of the financial year 2022/23 we achieved an increased position of 59.9% against the national 60% target.

As at the end of quarter 2 of 2023/24 Sunderland practices had achieved a position of 50% and whilst this is lower than the year end position. It is noted that this is process where patients are recalled for their check annually, therefore we expect to the position to match or even improve, last year's position as we approach year end.

However, there is recognition that despite planned achievement, further work is required to ensure that our vulnerable patients are supported and encouraged to undertake a healthcheck to monitor and maintain their physical health.

Our Mental Health Primary Care team has expanded recently and now includes Mental Health Wellbeing Support Worker Roles. Although they are non-clinical roles, they will be able to support to support practices in the healthcheck process in the form of engaging with patients, administrative processes (retrieving results) and potentially (with appropriate training/competencies) undertaking phlebotomy.

4.0 CURRENT POSITION – PRIORITY TWO

4.1 Our strategy pledged four important commitments to deliver priority two – 'right response, right time, right place'. A short summary of progress again each commitment is noted as follows:

Our Commitment

We will Improve accessibility of mental health care and support by working in partnership to co-produce and improve services.

Our Progress

Wellbeinginfo.org is a resource hosted by Washington Mind which constraints a wide range of mental health and wellbeing material. During quarter 2 of 2023/24, the site received 19,900 unique visits and 32,050 page views. A new element to the site was launched in August 2023 and a live chat service is now available. This provides support to individuals to maintain their health and wellbeing by providing safe and confidential signposting conversations with a member of the team that can help with a range of subjects.

We are continuing to develop plans to implement Community Mental Health Hubs (CMH Hubs) within a number of our six PCN areas. Originally, we had anticipated that these would be operational by the Autumn of 2023. Unfortunately contractual and capital work issues have delayed progress; we are now planning to mobilise in the Spring of 2024. These mental health hubs will be integrated within communities with high levels of deprivation with the aim to increase accessibility to low level mental health services.

People will be able to access low level mental health support closer to where they live and in their communities. People who attend the community venues for other reasons may be encouraged to seek mental health support, thus preventing longer term issues. The CMH Hubs will provide appointments and will be available on a drop-in basis, which will create access, including to those people who may be unable to keep appointments.

This is an attempt to take a preventative approach to mental health and well-being while supporting patients to live better in their community, reducing the need for accessing higher level support.

We will work with specific groups of people who don't typically access services and are at greatest risk of mental health to ensure fair and equitable access.

The Fans Museum in Sunderland has been commissioned to provide outreach support for those with mental health issues through providing physical activities to support individuals who may present with low level mental health, anxiety or wellbeing concerns. We recognise that a large footfall to the museum are men, which we know through our extensive engagement are less likely to seek support for their mental health needs. Over the summer/autumn months of this year, the museum ran several football coaching sessions with ex-professional footballers. Each session had an average of 30 participants, totalling around 380 participants over the period. Alongside this, the museum also offered music hubs, one to one sessions, and offered telephone support calls.

Veterans in Crisis (ViC) has been commissioned to

provide counselling support to veterans and their families (including their children), which takes into account their military experiences. The service is fully utilised and in the last guarter, 55 hours of adults counselling and 61 hours of veteran's children's counselling has been delivered. The service is provided at ViCs hub which service users find more accessible and it's a venue that is familiar to them. We will promote the help and support available Our Community Connector Programme continues and to all communities to prevent mental ill-health encourages patients and residents to access and improve mental health and wellbeing. appropriate support to help manage and improve their mental health and wellbeing. The programme also offers support and resources to organisations across the city including networking opportunities, training, and access to Peer Community Coordinator's. date, we have 197 areas including community hubs, business and GP surgeries registered with the We have 75 trained community programme. connectors and offered 240 peer support sessions which saw a total of 968 attendances. We have taken the opportunity to tap into communities by utilising warm hubs spaces to raise awareness of mental health support in methods such as hosting Ray's Corner and advertising Talking Therapies. We are working with partners across the city to We will work with service providers to deliver equality in mental health care (access, address the barriers identified in our engagement experience, and outcomes) so no-one is left work, some of these are new and emerging as new behind by implementing the Advancing Mental challenges for communities present themselves. Health Equality Framework. We recognise that there are groups of patients who do not routinely ask for help to improve their mental health, particularly males, people with disabilities and Asian, and other ethnically communities. We are therefore looking to further understand these barriers, basing our work on the Advancing Mental Health Equality Framework to ensure our service delivery models are open and accessible to all, with equity as the standard. Our links to informal support groups across the voluntary sector will provide a valuable gateway into reaching out to

5.0 CURRENT POSITION – PRIORITY THREE

5.1 Our strategy pledged five important commitments to deliver priority three – 'working with you on what matters to you'. A short summary of progress against each commitment is noted as follows:

these vulnerable groups of patients.

Our Commitment	Our Progress
We will identify and increase ways to involve people with lived experience of mental ill health, and their carers, to co-produce, quality assure, and improve services.	We are committed to drawing on the expertise of people with lived experience as we know the benefits that this can bring to service design. We work closely with the University's Patient Carer and Public Involvement Team as well as the ICB's Lived Experience Director.
	We are currently in the process of identifying experts by experience to join the All Together Better

Programme for Mental Health, Learning Disabilities and Autism and the Sunderland Suicide Prevention Action Group. This will provide a valuable resource into both of those groups and will ensure we are holistically represented by all relevant partners.

We will ensure services work together, promote inclusive access to care and treatment to avoid people 'slipping through the gaps' or being caught in competing thresholds and access criteria.

In 2023, we launched Mental Health MDTs in the North PCN area. To date, 72 patients have been discussed within the MDTs and appropriate care plans put in place. The interim evaluation indicates that positive outcomes are being achieved and those involved have found the sessions extremely beneficial in terms of supporting patients but also developing relationships between services. The next stage of the pilot is the roll out of MDTs across all PCNs in a phased approach. The purpose of the MDT is to:

- Develop multi-disciplinary working that includes multiple professionals.
- Deliver proactive, patient centred care to those with the most complex mental health needs.
- Provide timely services at Neighbourhood level.
- Promote a patient centred culture.
- Facilitate appropriate information sharing to coordinate care.

We will explore new approaches to ensure services wrap around people and are proactive with them, including methods of delivery to support all services users, such as peer support, telephone advice and guidance, communication methods.

The Mental Health Link Workers within Sunderland Counselling Service act as a wrap around provision for people accessing or struggling to engage with primary or secondary services. They will link with the patient to see what additional support they may need, build relationships with them and thus be able to intervene early should their mental health worsen.

Since their inception 18 months ago, the workers have supported 409 clients and can demonstrate a significant improvement in clients wellbeing. The service uses the Warwick Edinburgh Mental Wellbeing Scale (WEMWS) to measure outcomes and improvement, which is a scale of 14 positively worded items for assessing a population's mental wellbeing. WEMWBS can measure improvements in positive mental health that are not captured using other, negatively phrased measures. The high correlation with negatively phrased measures means that improvements in mental wellbeing, as measured by WEMWBS, indicate a reduction in mental health problems.

To date, 86.2% of patients report meaningful positive (statistically significant) change with an average improvement of 14 points on the WEMWBS scale, where an improvement of over 8 points would suggest an important level of change.

When compared to UK population norms, we would expect to see a mean score of 51. For our patient group, our starting mean score was 29.4 (well below the national norm) and our ending mean score was 44, (far closer to the national mean). According to UK population norms, we would expect to see 15% of people scoring as having high wellbeing and 19% having low wellbeing. At the start of our intervention, 91% of our clients reported low wellbeing and only 1% scored in the high range. At the end of the

intervention, 50% scored in the low range, 43% in the moderate range and 8% in the high range. While these changes do not show that the intervention cured everyone or solved everyone's problems, they do indicate a significant shift towards positive wellbeing.

Sunderland and Washington Mind have been commissioned to provide a yearlong 'listening ear' service. The service provides support for people who don't fit the criteria for counselling, and for those recently discharged from hospital. It can be a steppingstone into the community support offer and can include support groups, wellbeing activities and arts and crafts courses. Many clients report they are looking for alternatives to abate the loneliness or understand that they are not the only one feeling this way. Most participants continue to use the service to look for a resolution to the problem at hand or take advantage of another service.

We will ensure patients feel enabled, empowered, and confident to self-manage conditions.

Significant work has been undertaken to promote awareness and self-help techniques for women experiencing menopausal symptoms which has been extremely well received. There is a wealth of information promoted on wellbeinginginfo.org to support self-help and education. In addition to this, a new group service within Talking Therapies has been launched. The group is specifically focused on helping service users to better understand the relationship between female hormonal changes linked to perimenopause, menopause and mental health and manage their current difficulties more effectively. Sunderland have been one of three areas successful in a bid to implement a Women's Health Hubs across the North East and North Cumbria, and the teams will be taking every opportunity to ensure that services such as that described can be made available within the hubs.

We are seeing an increasing number of service users reporting social issues relating to the cost-of-living crisis. Headlight, a community organisation that we have commissioned, are recognising this and in response are providing an advice service in relation to welfare benefits, debt and money management and more increasingly housing issues. The service also provides signposting to specific mental health support to prevent escalation of poor mental health resulting from financial and social issues.

We will ensure there is effective transition...

- from children and young peoples to adult mental health services
- from service to service/organisation to organisation
- following discharge from services

To support transition for our Children and Young People (CYP) into adult services, we have appointed a Strategic Transitions Lead. It is anticipated that this role will have a significant positive impact on transition so that care pathways are smooth and without disruption to care. This role will also support the implementation of i-Thrive in Sunderland and will work with all system partners who are involved in service delivery. The role is split in three key areas: health, education and social care.

A full-scale transition event is planned for early 2024, and this will include all system partners and is an opportunity to showcase what services are available as CYP move into adult services across health,

education and social care. The Sunderland Parent Carers Forum are involved in this work to ensure we have appropriate lived experience representation. In addition to the event, a leaflet on transitions will be developed in co-production with the parent and carer forum. The leaflet will provide advice and guidance on what to expect in transitional pathways and what support is available to the CYP and their families.

Education will look at internship and employment and transition to further education. Our CYP tell us this can be an anxious time and providing preventative support at the earliest opportunity will reduce the needs for mode intensive support further down the line.

We recognise a number of patients in despair attend the Emergency Department (ED) for support following escalation of symptoms. In acknowledgement of this we have appointed Link Workers who will work alongside the Psychiatric Liaison Team within the ED. They will proactively support individuals who present to provide emotional and practical support, a listening ear, and many other support services. Once a patient has been safely discharged from the ED, the Link Worker will be able to follow up the patient in the community to ensure they are engaging with recommended care plans as well as overall community support to prevent further escalation of their condition and re-attendance in ED.

We have been working closely with our main provider of secondary care mental health services in attempt to improve the discharge process and ensure that documentation, focuses on informing primary care of outcomes, future care plans, medication choices and the rationale behind this. Colleagues have codeveloped templates which are currently being ratified for roll out within clinical systems. Whilst an initial focus has been on discharge correspondence, there is also a desire to take this further in all clinical correspondence.

6.0 NEXT STEPS

- 6.1 Our strategy remarked that we would be assured of its delivery when our residents were confident, they would:
 - Know how and where to access the support they need;
 - Get the right response at the right time;
 - Feel their individual circumstances are considered and prioritised during care planning;
 - Feel empowered to take control of their own mental health and wellbeing;
 - Be living the life they want to live.
- 6.2 As the strategy approaches year three of its lifespan, it is important that we take an opportunity to evaluate and measure it's impact to date, and understand where, if appropriate, further work may be required to ensure we are confident we have delivered its aims and objectives.

6.3 A mid-strategy review will take place in 2024/25, which will include a data/activity review utilising local and regional intelligence. Alongside this we will work with our key partners to host a range of focus groups with service users and carers to measure the impact of our strategy, specifically in relation to the points noted in 6.1.

7.0 **RECOMMENDATION**

7.1 Members are asked to note the content of this report and note the progress that is being made towards the delivery and interim evaluation of the Adults Mental Health Strategy outcomes in Sunderland.

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