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| Committee | Dated: |
| Health and Wellbeing Board | 21/09/2017 |
| Subject: Mental Health Strategy and Action Plan update | Public |
| Report of: Director of Department of Community and Children's Services | For Information |
| Report author: Tizzy Keller – Strategy Officer (Health and Children) | |

Summary

This report sets out the progress made against the Mental Health Action Plan. It shows what has been achieved and the progress made against the four priorities:

1. Prevention
2. Personalisation
3. Recovery
4. Delivery

Progress against the measures has been good, approximately 90% are green or blue (completed or progressing on time).

Recommendation(s)

Members of the Health and Wellbeing Board are asked to:

- Note the content of this report

Main Report

Background

1. The Mental Health strategy was approved by the City of London Health and Wellbeing Board in December 2015. The City of London Corporation (CoLC) and City and Hackney Clinical Commissioning Group share ownership of the document. It aims to improve the mental health of people in the City, keep people well and then ensure that we provide effective support when mental health problems do arise. An action plan was developed to monitor the progress against four priorities to deliver better outcomes for residents, workers and rough sleepers.

Current Position

2. The progress against the actions in the plan is depicted in the table below:

| RAG status | Traffic light description | Total number of measures | % of Measures |
|------------|--|--------------------------|---------------|
| Blue | Action is complete | 28 | 31% |
| Green | Action is progressing as expected and on time. | 53 | 59% |
| Amber | Problems or risks have been identified that are slowing progress on the action. | 8 | 9% |
| Red | There are significant issues with the action or if the matter needs to be escalated. | 1 | 1% |

Progress against Priorities

Priority 1: Prevention

3. Against this priority there is are two amber actions and one red action:
 - 3.1 The plans to provide mental health first aid (MHFA) to City schools (action 1.5) are under development. Schools have been contacted to find out the need and potential uptake of MHFA courses. Further work needs to be done to arrange the delivery of a MHFA course specific to children and young people in schools.
 - 3.2 Action 1.16 aims to improve the identification of mental health needs of rough sleepers in the City. The completion of a health needs assessment of rough sleepers has been delayed due to a lack of capacity and is awaiting an allocation of resources.
 - 3.3 The action to Increase access to Individual Placement Support (IPS) for SMI in secondary care services by 25% (action 1.18) is covered under the Prevention workstream of the Integrated Care Programme. The CCG is working with London Borough of Hackney and the CoLC to establish the baseline and action plan for this workstream.
4. There has been a reduction of 54% in the number of people detained under the MH act (action 1.19) due to the Street Triage Programme which began 3 months ago.

Priority 2: Personalisation

5. Against this priority, there is three amber actions:
 - 5.1 Action 2.3 is concerned with transferring the case management of some patients with mental health problems to primary care. This action is progressing, the target outcome is to increase transfers from secondary care to primary care to 50 per month and they are currently achieving approximately 40 per month.

5.2 Work is underway to improve the physical health of those with enduring mental health issues (action 2.6). We are working more closely with social prescribing in increase referral activities from City residents.

5.3 Action 2.7 is to provide vulnerable patients with enhanced care plans to help manage their needs and ensure that the care they receive is integrated. The CCG Care planning Group have agreed that GPs will create Co-ordinate My Care (CMC) plans for frail elderly patients with dementia. In addition, the Alzheimer's Society will be creating their community support plans for patients diagnosed with mild to moderate dementia on CMC.

Priority 3: Recovery

6. Against this priority, there are no amber or red actions.

7. The IAPT recovery rate (action 3.5) has increased to above the national target for the last three months and is projected to stay that way.

Priority 4: Delivery

8. Against this priority, there are four amber actions:

8.1 Action 4.11 is led by the CCG and regards the development of a community based 24/7 mental health response for Children and Young People. This is currently in development as part of the CAMHS Alliance CAMHS Transformation Programme. A mapping exercise is underway to evaluate service provision against national requirements. The CCG is working closely with STP and consortium partners to explore opportunities for developing services at a wider footprint level as numbers of CYP requiring this service will be small if applied at a local level. A multiagency task and finish group has been set up to complete this.

8.2 Action 4.16 is concerned with increasing the numbers of people with mental health issues in settled accommodation. The City has commissioned ELFT to deliver a 'Reablement Step-Down' service which helps people with MH issues and others in supported housing to be ready to move-on and offers ongoing support in their new home. In addition, the housing needs of people with Mental Health Illness will be considered in the scoping of the housing strategy.

8.3 A shared-care protocol to improve the physical healthcare of patients prescribed psychotropic medication (action 4.4) has been developed and is waiting on approval from providers.

8.4 The CCG is leading on action 4.17 to ensure we are meeting all care standards for Perinatal mental Health needs. The CAMHS Alliance and related CAMHS Transformation investment will develop a new perinatal service that meets care standards. The CCG are currently investing an additional £150K per year to address unmet need and applying for central money c£200K to achieve work force calculator requirements at the moderate to severe end.

9. Action 4.4 to create parity of esteem between mental and physical health is on target. The CCG are increasing the number of physical health checks conducted by GPs in primary care for people with severe mental health problems. They are monitoring the number of checks and the results in terms of referrals to lifestyle interventions and physical health improvement in their primary care mental health dashboard.

Corporate & Strategic Implications

10. The Mental Health Strategy supports the City of London Corporate Plan's aim to provide modern, efficient and high quality local services within the Square Mile for workers, residents and visitors and to provide valued services, such as education, employment, culture and leisure, to London and the nation.
11. It also supports the following priority from the Department of Community and Children's Services Business Plan: Priority Two – Health and Wellbeing: Promoting the health and well-being of all City residents and workers and improving access to health services in the square mile.

Legal Implications

12. There are no legal implications.

Health Implications

13. The Mental Health Strategy and Action Plan has a positive impact on health and wellbeing in the City of London.

Conclusion

14. The majority of actions are due to be completed within their timescale.
15. The plan is reviewed at the Children's Executive Board meetings to monitor the progress of the actions which will include the work with our partners such as the CCG, ELFT and City and Hackney Mind. The plan will be refreshed in 2017 to incorporate new actions and updates.

Appendix

- Appendix 1 – Mental Health Action Plan

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