



AGENDA ITEM NO 4

REPORT NO IJB 78/20

ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 9 DECEMBER 2020

TAYSIDE MENTAL HEALTH & WELLBEING STRATEGY

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ABSTRACT

Progress towards the co-design and co-development of the Tayside Mental Health and Wellbeing Strategy has been made. The strategy, which can be found here [Mental Health and Wellbeing Strategy](#) is the version on which we have been engaging and endorsing through November and December.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board: -

- (i) Considers the contents of the report for awareness and notes the progress to date;
- (ii) Agrees that the IJB is assured that the reported progress and actions are being developed in response to the 'Trust and Respect' report (recommendation 2 – development of a strategy as part of a whole system review);
- (iii) Notes progress with the co-creation of the Mental Health and Wellbeing Strategy
- (iv) Requires the Chief Officer and Director of Mental Health to bring a final version of the strategy to the IJB for approval.

2. BACKGROUND

This draft strategy illustrates the co-design and collaboration work that has been undertaken towards a common Tayside Mental Health and Wellbeing Strategy since March 2020. This draft Mental Health and Wellbeing Strategy has seen significant engagement and detailed planning through the programme infrastructure to co-create the first draft. All stakeholders have committed to the ongoing engagement sessions, focus groups, and programme meetings to assemble the MHW Strategy.

This first draft strategy produced at the end of October outlines the scope, scale and content of the strategy and its development to date. This was shared with all key stakeholders who have co-created the strategy. A four week period of further engagement was undertaken with an iterative process of co-creation by those leading and involved in the strategy development. To add to this and expand access to this process we publish the first draft on the NHS Tayside website with a list of key questions and a feedback mechanism to the wider public who may not have been engaged in the process to date. This phase of work commenced on Monday 3rd November 2020.

The next phases of the Strategy timeline is:

- Further feedback and engagement - November 2020
- Draft for Endorsement and Approvals process – December 2020
- Strategy publication and launch January 2021
- Further period of Public Engagement Jan to March 2021

Mental Health staff across Tayside alongside people with lived experience and community organisations with support from the Mental Health and Wellbeing Programme team co-create and co-produce the strategy.

2.1 Assessment

This draft strategy was the culmination of six months work involving over a hundred participants who attended six separate workshops which were facilitated development sessions building each chapter of our strategy.

Pulling this together was a Strategy Writers Group which met monthly during this time. This group had representatives of all HSCPs, all job families in mental health including NHS Tayside staff and has a number of representatives with lived experience and some carers - all these people were fully involved and equally passionate to develop a blueprint for the way we want services to be in the future. We will use this strategy as the blue-print for developing our whole-system change programme.

2.2 Quality/ Patient Care

This will improve quality of mental health services and support throughout Tayside

2.3 Workforce

Once this strategy is approved it will require a business case to detail the additional funding required to achieve the change programme and the service transformation. Once in place and our vision is clear this should improve staff wellbeing as they will all have clarity on their roles, their contribution to the strategy and how they can improve clinical and patient outcomes.

2.4 Financial

Business case is yet to be developed but our aspiration is to reduce duplication and aid communication, using the total Tayside resources for Mental Health in a more cohesive and effective way so that patient centred, recovery focused care is delivered by all.

3.0 Risk Assessment/Management

The independent inquiry **Trust and Respect** requires, in recommendation 2, that a strategy is developed. This is a high priority with an element of risk as we are implementing this change in the context of a global pandemic which is impacting on the mental health of many. The risk is high that services will not be able to respond to this unless we redesign, with this in mind and focus on the priorities all the workshops have delivered. There is a robust Risk management process in place for the projects that are starting to develop to implement this strategy.

3.1 Equality and Diversity, including health inequalities

We are taking account of Tayside's diversity in the development of versions of the strategy and will incorporate easy read versions in other languages. All our work takes account of the health inequalities that often give rise to increased mental health and wellbeing issues and to mental illness and we are aware that those with mental illnesses die of average 20 years before their peers – this strategy seeks to ensure that those people have the best services we can afford. All future work will incorporate an Equity Diversity Impact Assessment.

3.2 Other impacts

We will create a world-class mental health service in Tayside.

4.0 Communication, involvement, engagement and consultation

The Communication and Engagement process within the MHW programme is continuing with a detailed programme of work.

Engagement with those people with Lived Experience, third sector partners and mental health special interest groups continues. The Communication & Engagement Sub Group is now well established and meeting monthly to co-create, co-design and co-deliver communications products. The group is:

- Co-chaired by Brook Marshall, Chief Executive of Feeling Strong, which is a Youth Mental Health Charity in Dundee and the Director of Communication and Engagement, NHS Tayside.
- Strong representation from Third Sector organisations and patient advocacy representatives – and SPG members.
- Members of the group have stepped forward to co-lead as “champions” in their specialist interest field. We have a Media Champion, a Design Champion and a Public Event Champion so far.

4.1 Staff engagement:

To ensure staff voices feature strongly in the strategy and change programme we are working with all teams to invite contributions and participation from all and recognising the key role our staff side partner’s play in co-designing and implementing all of the changes and redesign proposed. We have developed a partnership forum to ensure this.

Staff from across all organisations who deliver mental health services and supports, including third sector organisations, are heavily involved in this co-design and co-creation.

Staff side are helping to develop the communications and engagement plan for the strategy and remain critical to the success of our staff engagement.

4.2 Route to the Meeting

Most meetings have Mental Health as a standing agenda item recognising its priority status in Tayside. This strategy will also been presented at these meetings:

- Dundee and Perth & Kinross Integration Joint Boards
- NHS Tayside Board
- Tayside Executive Partners, Strategic Leadership Group
- Mental Health Integrated Leadership Group





5. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	X
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

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Tayside Population [Mental Health and Wellbeing Strategy](#). First draft for wider consultation. Please use link to find a copy of the draft strategy.

Level of Assurance		System Adequacy	Controls
Comprehensive Assurance		Robust framework of key controls ensures objectives are likely to be achieved.	Controls are applied continuously or with only minor lapses.
Moderate Assurance		Adequate framework of key controls with minor weaknesses present.	Controls are applied frequently but with evidence of non-compliance.
Limited Assurance		Satisfactory framework of key controls but with significant weaknesses evident which are likely to undermine the achievement of objectives.	Controls are applied but with some significant lapses.
No Assurance		High risk of objectives not being achieved due to the absence of key internal controls.	Significant breakdown in the application of controls.