



ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD – 8 DECEMBER 2021
ANGUS MENTAL HEALTH AND WELLBEING UPDATE
GAIL SMITH, CHIEF OFFICER

ABSTRACT

The purpose of this report is to provide Angus Integration Joint Board with an update in relation to Mental Health and Wellbeing provision in Angus.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:-

- (i) Supports and approves the direction of travel for the Living Life Well (LLW) in Angus Implementation Plan.
- (ii) Notes the requirements under section 36 of the Public Bodies (Joint Working) (Scotland) Act 2014 relating to engagement. An extended period of planning for engagement has been required and engagement will continue until April 2022.
- (iii) Notes the Communications and Engagement Plan (appendix 2) for the Living Life Well in Angus Implementation Plan.
- (iv) Notes the risks detailed in the report.
- (v) Notes the financial framework to support the Living Life Well Strategy remains outstanding.
- (vi) Notes progress to date in relation to the delivery of Mental Health & Wellbeing Services in Angus.
- (vii) Notes progress with Listen, Learn Change Recommendations
- (viii) Requests an update report be brought back to April 2022 IJB meeting.

2. BACKGROUND

Since the formation of Angus Health and Social Care Partnership, local mental health services have made a significant shift to planning, providing and supporting wellbeing services and initiatives to compliment secondary care treatment and protection services. This is essential in order to build community resilience, promote early intervention, self-management, empower local populations to recognise and support individuals or groups with health and wellbeing needs and to break down barriers and challenge stigma.

The Angus Mental Health and Wellbeing Network (AMHAWN) was established in 2019, and comprises of statutory and third sector providers, service users and carer representatives from the whole mental health spectrum, including children, adult and older people.

Its vision for Angus is to support:

- All agencies working together to promote prevention and early intervention opportunities and activities.
- Service improvements.
- Effective links with other strategic planning groups including the Angus HSCP Strategic Planning Group and the Tayside Mental Health and Wellbeing Strategy Board.

The aim of the Network is to achieve the best outcome possible for the citizens of Angus in relation to all aspects of mental health and wellbeing, including suicide prevention. An example of the Networks success to date has been co-ordinating financial support to third sector organisations to increase their capacity as a consequence of COVID-19.

Work has continued through the AMHAWN to progress local developments to meet the needs of the Angus population as well as ensure critical links are maintained across the whole system to support the delivery of Listen, Learn, Change (LLC) following the publication of the report.

3. CURRENT POSITION

Within Angus a number of areas of work have progressed to enhance the service provided and the service continues to work in partnership with all key stakeholders including service users and carers to inform the developments. The Head of Community and Health Care Services and the Service Leader continue to participate in the Tayside Integrated Leadership Group and link with the emerging work coming out of 'Living Life Well' (LLW).

There have been many areas progressed following Angus IJB report IJB55/21. These are detailed below:-

- Development officer has taken up post to support the further development and monitor progress with both the LLW and LLC implementation plans
- 7 day service has now been fully rolled out across Angus, data is analysed on a weekly basis, and a formal evaluation is commencing this month. The 7 day Community Mental Health service commenced in the north localities on 17th April 2021 and in the South from 20th September 2021. The 7 day service supports early supported discharge as well as prevention of admission. It also accepts referrals from crisis response and home treatment team, inpatients, and service users currently on the CMHT caseload. Currently an average of six or seven people are supported at the weekend and there are a high proportion of referrals for adults who are actively planning or considering / completing suicide. A formal evaluation of the service is being undertaken.
- The extension of contracts for Mental Health and Wellbeing Peer Workers to support 11-16 year olds has now commenced. There was a slight delay in offering appointments due to the need for different privacy notices and consent arrangements for young people. This has been agreed, staff have been recruited and the service has commenced. The first service monitoring meeting will be in February 2022.
- Evaluation has concluded on the Enhanced Community Support (ECS) Service, operational since March 2021. Set up as a test of change which co-located GPs, mental health and wellbeing services and substance services, and provided one referral route for these services.
 - 641 referrals have come through the new hub March to Nov 2021. Qualitative and quantitative data has been gathered and processed, outcome and balancing measures collected.
 - 88% of referrers report their practice has improved and the hub has had a positive impact on how they carry out their role.
 - 75% of referrers report better co-ordination of services.
 - 100% of staff are positive about multi-disciplinary working.
 - 75% of referrers and 64% of staff report positive impact for patients.

- 70% of patients surveyed were aware they had been referred to a hub and were given appropriate information from their GP.
 - 60% of patients were contacted about an appointment within 1 week & 80% within 2 weeks.
- GP referrers comments include:
 - “Patient access appropriate services much more quickly”
 - “We no longer have referrals refused”
 - “My clinical time has been spent on relevant assessment and treatment, improving patient journey and clinical efficiency”
 - “Better informed access to professional colleagues, faster, simpler routes of communication”
 - “Single point of referral helpful”
- Staff comments include:
 - “Many positives include, better communication, closer MDT working, referral process improving, accessible GP’s and patient mental health and welling improving”
 - “Yes it has built a fantastic good working relationship for our team, it has enabled them to be pro-active in seeking further supports for patients”
 - “It has greatly improved communication between services, more joint appointments have been arranged so that we can find out which service best suits the patient”
 - Referrals in timely manner –meaning clients are being offered most relevant support promptly, discussions between professionals to where best meets clients needs, more joint appointments –reducing duplicate assessments, improving client care journey”
 - “Yes, I feel it is a lot easier to access services for patients –or even have a conversation to see what service best fits for patients or alternative support routes in this area”

Although service users will be less aware of the change in process brought about by ECS, two hundred patient surveys were distributed to ascertain service users experiences of being referred to the hub. Unfortunately there was only a 5% return rate. We are currently agreeing an alternative method for gathering patient feedback to inform further service development.

- Next steps for Enhanced Community Support (ECS) include
 - Brechin Health Centre being invited to join the ECS hub; when they join the hub will manage referrals for the whole of the North East GP Cluster Group.
 - Planning will commence for rolling out ECS in the remaining 3 GP Cluster Groups. The evaluation will be tabled at Angus Clinical Partnership Group to further discuss with Primary Care Services.
- Penumbra have been awarded the Distress Brief Intervention (DBI) contract for Tayside and a detailed implementation plan is in place to develop this service with clear milestones, actions and timescales. DBI workers will initially be based in the Penumbra Office in Arbroath and will provide a blended model with face to face, telephone and ‘Near Me’ video appointments. DBI provides a compassionate response to people in distress within 24 hours, and for up to 2 weeks. Initial referrers will be GPs and Emergency Departments; referral pathways will commence in stages in conjunction with referrers. Penumbra are currently recruiting staff for the DBI service and interviews are commencing at the end of November. This service is projected to be operational in three months, allowing time for recruitment and staff training.

- Improved working relationships continue between Community and In-patient Mental Health Services.
- Progressing with recruitment to Pharmacy Technician Post

Tayside Mental Health and Wellbeing Strategy: Living Life Well

Year One Tayside Priorities have been approved by both the Operational Steering Group and Programme Board. A planning session to deliver the whole system Implementation Plan for the Year One Priorities for LLW was held on the 19 November 2021 where further opportunities were identified for Tayside-wide collaborative working.

Within year 1 agreed priorities, a number of projects, workstreams and sub-groups have been established and are actively progressing with agreed deliverables:

- **Primary & Community Mental Health Project**

Crisis and Urgent Care

Work is ongoing to develop the business case for delivering the preferred option from the Options Appraisal. A workshop in September defined 5 sub-workstreams which are now progressing with their respective areas of delivery:

1. Urgent Referrals.
2. Intensive Home Treatment Model.
3. Centrally Enabled Crisis Response.
4. Community Wellbeing Centres.
5. Evaluation.

- **Integrated Mental Health Substance Misuse**

Health Improvement Scotland Transformation Team are supporting this workstream to complete person centred design and improvement. The first of a series of 'Defining the Future' workshops was held in early October, including those involved in acute and community mental health services across Tayside.

- **Specialist Adult Mental Health Service Project**

Early Intervention Psychosis Workstream: the bid to Healthcare Improvement Scotland (HIS) to support the Early Intervention Psychosis Pathways Pilot with Dundee as the pathfinder site was successful.

Adult Neurodevelopment Workstream: workshops with key stakeholders are taking place between June and March 2022 to define and agree the key principles to take forward.

- **Learning Disabilities and Mental Health Project**

A change of scope for the project to support strategic and whole system developments and focus on the needs of people with learning disabilities was approved. Work is progressing for a single Steering Group to be established. The first of two workshops is scheduled at the end of October.

They will review priorities identified during workshops carried out pre-COVID-19 and identify key priorities to take forward.

- **Medical Staffing**

There remains a dependency on use of agency/locum staff in General Adult Psychiatry (GAP) and Learning Disability Services; significant efforts are ongoing to stabilise medical staffing and work is progressing, with support from NHS Tayside Finance Team.

Living Life Well Angus Implementation Plan

A draft improvement plan to deliver the Living Life Well Strategy in Angus has been developed. This is a working document based on previous LLW communication and engagement across Tayside. Over 600 people were involved in over 1,300 encounters to define, write and design the Living Life Well Strategy. This included many residents with lived

experience, their families and carers working alongside voluntary and third sector organisations, staff, local authorities, Police Scotland and NHS Tayside. Further engagement will comply with the legislative duties and principles for engagement and will involve people early, make information readily available, give people enough time to respond, and explain the decision making process.

The improvement plan is based around the Living Life Well Priorities;

- Good Mental Health for All.
- Primary and Community Mental Health.
- Specialist Adult Mental Health Services.
- Children and Young People's Mental Health.
- Learning Disabilities and Mental Health.
- Older People's Mental Health.

The improvement plan includes actions for adult mental health, psychiatry of old age, substance services, learning disability services, children and young people, community planning, and the third sector interfaces. The aims of the plan are to:

- Support prevention and early intervention for poor mental health.
- Tackle stigma and discrimination and reduce inequalities.
- Improve access to the right services at the right time, as close to home as possible.
- Provide high -quality, person-centred care and treatment in all settings.
- Co-ordinate care, treatment and support.
- Improve the physical health of people living with mental illness and reduce early mortality.
- Manage and monitor system performance and system improvement.
- Improve transitions between services and supports.
- Ensure services provide a good patient experience; people get the support they need, when they need it, where they need it, in a way that they're not passed around services, or have to repeat their story over and over again.
- A system that makes safety and all aspects of quality (safety, effectiveness, patient -centeredness, timeliness, efficiency, and equity) central to mental health service delivery.

These aims are consistent with the four Angus Health and Social Care Partnership strategic priorities and the nine National Health and Wellbeing Outcomes.

Angus Mental Health and Wellbeing Network (AMHAWN) and the new Strategic Oversight Group for AMHAWN will have responsibility for the outcomes in the improvement plan, and reviewing and monitoring these actions.

There were plans to have communication and engagement activity undertaken by December 2021 but the initial workshop undertaken with Senior Managers in AHSCP indicated that the format of the plan needed more work to ensure that actions and outcomes were clearer. This is being undertaken and communication and engagement activity will commence in January 2022.

Living Life Well Angus Communication and Engagement Plan

Angus HSCP contributes to the Tayside LLW Communication and Engagement Sub-Group. In January 2021, this group published a LLW [Communication and Engagement Report](#) which outlines the approach to communication and engagement to support the LLW Strategy.

Stakeholders from across Angus contributed to shaping the Tayside LLW Strategy. This included members of the Angus Mental and Wellbeing Network (AMHAWN), established in 2019, and comprises of statutory and third sector providers, service users and carer representatives from the whole mental health spectrum, including children, adult and older people.

Communication and engagement is important to the way we work, particularly with the people delivering and receiving services, as we know this results in better outcomes. We are committed to transparency and meaningful engagement on all our work. It is also important that we feedback, which we will do this in various ways, for example through 'you said, we did reports.'

All elements of the Angus LLW Plan will be reviewed via engagement and co-production with local communities, people with lived experience of mental ill health and mental health services, their families and carers, and will be evidenced throughout the implementation of the plan.

Appendix 2 provides details of the actions that will be taken to progress communication and engagement activities

Listen Learn Change (LLC) Action Plan

All Health and Social Care Partnerships have now been invited to a weekly LLC meeting to review the recommendations and review the evidence available to demonstrate progress or achievement.

An update on progress with LLC recommendations was included in NHS Tayside Board report BOARD78/2021 in October 2021. This report sets out a realistic and evidenced status update of what teams and services have achieved against the 51 Recommendations (49 for NHS Tayside 2 for Scottish Government) since the publication of the Listen Learn Change Action Plan in August 2020, and what the next steps are to build on and strengthen the progress made so far.

Angus has contributed, along with Tayside colleagues, to progress with the 49 recommendations within the Trust and Respect Report. As of 18 October 2021:

- 36 are complete with sufficient evidence.
- 2 are complete with partial evidence.
- 11 are work in progress, but significant progress has been made.

4. PROPOSALS

Angus IJB note progress continues to be made in relation to meeting the Mental Health and Wellbeing needs of the Angus population.

5. FINANCIAL IMPLICATIONS

Tayside Mental Health Strategic Financial Plan

As noted previously Finance teams across NHS Tayside and the 3 IJBs have started to progress work with Mental Health operational leads to develop high level strategic financial plans for Mental Health Services. These plans will be expected to provide a description of current financial resources in the system, current commitments and map out further potential investment priorities identified to deliver the Mental Health & Wellbeing Strategy. Furthermore, the plans will describe any shift of resources within the system, note any financial deficits and highlight any specific needs that require to be addressed as part of the Mental Health Strategy. An outstanding action since December 2020, this reflects both the complexity of resolving this issue but also the multiple competing pressures within the overall system.

It now seems likely that an emerging high-level strategic financial plan for Tayside Mental Health Services will be for financial year 2022/23 and beyond. This time delay has not necessarily stopped other facets of the broader Mental Health Strategy progressing and local financial frameworks continue to be updated.

Angus Mental Health & Wellbeing Financial Plans

As is noted in this report a number of local developments have financial implications. Funding streams are evolving and individual developments are being supported by specific local financial plans reliant, generally on existing local funding or funds provided nationally (e.g. Action 15).

6. RISK

- Decision regarding In Patient Mental Health facility remains outstanding

- Seaton Grove – Engagement with private care providers in planning for private specialist residential accommodation for adults with a severe and enduring mental health disorder has been unsuccessful to date.
- Currently Community Mental Health Teams (CMHT), Angus Integrated Drugs and Alcohol Recovery Service (AIDARS) and Psychiatry of Old Age (POA) are assessing and discussing need and demand within their service for specialist residential provision to ascertain if this has changed post COVID-19, and this will inform planning. A housing needs analysis in adult mental health indicated a strong need for specialist supported accommodation, and some need for specialist residential care beds.
- Mulberry Unit
NHS Tayside are continuing to progress the options appraisal for Mental Health In-patients and a decision is awaited from the Mental Health Strategic Leadership Group.
- Multiple recording systems and duplicated reporting
 - CMHT have a number of required IT systems - EMIS, CF6/ Eclipse, TrakCare, Clinical Portal etc that staff have to complete to ensure appropriate information is listed. Risks remain around having clear information guidance in respect to integrated partnership working. Discussions have commenced with NHS Tayside to support partnership for this but as the main NHS recording system EMIS is being re-contracted next year no changes are possible currently. Future change to enable NHS and Angus Council systems to communicate will require additional resources to support the additional development time. AIDARS are undertaking a test of change for some staff to reduce the number of systems used and learning will be taken from this.
- Number of Mental Health Delayed Discharges
 - Number of delayed discharges in Mental Health continue to be a challenge due to the complexity of patients within the in patient mental health facilities. The services continue to work with the In-Patient team to review the position and progress as early a discharge as possible.

7. OTHER IMPLICATIONS (IF APPLICABLE)

N/A

8. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment is required and is included in Appendix 1.

9. 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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List of Appendices:

Appendix 1 EQA

Appendix 2 Communication and Engagement Plan