



**AGENDA ITEM NO 8**

**REPORT NO IJB 33/23**

**ANGUS HEALTH AND SOCIAL CARE**

**INTEGRATION JOINT BOARD – 21 JUNE 2023**

**ANGUS LIVING LIFE WELL SUMMARY UPDATE REPORT**

**GAIL SMITH, CHIEF OFFICER**

**ABSTRACT**

The purpose of this report is to provide Angus Integration Joint Board with an annual report in relation to the progress of Angus Living Life Well Plan.

**1. RECOMMENDATIONS**

It is recommended that the Integration Joint Board: -

- (i) Acknowledge and discuss the progress made in relation to the Angus Living Life Well implementation plan.
- (ii) Accept future progress updates post June 2023 will be included as part of the Strategic Planning Update.

**2. BACKGROUND**

- 2.1 The living Life Well implementation plan for Angus, Report 37/22 was approved at the June 2022 IJB, with an update Report 87/22, provided to the December 2022 IJB, and further update, Report 6/23 to the February 2023 IJB.
- 2.2 The Angus Living Life Well Implementation/Improvement Plan June 2022 – December 2024 details the improvements planned for a lifelong approach to mental health in Angus. The implementation plan describes a range of actions that will meet agreed outcomes, aligned to the Tayside Living Life Well priority areas, and developed in consultation with service users, carers, staff and other agencies.

**3. CURRENT POSITION**

- 3.1 To ensure ongoing monitoring and assurance of the Angus Living Life Well Plan this annual update has been produced to provide information about the status of recommendations, the next steps for recommendations which have been met, and to provide assurance regarding the governance around these recommendations.
- 3.2 Work continues by identified leads to progress the Angus Living Life Well Plan. A SharePoint site has been developed with a reporting template established and tested. This is used to gather information from leads on actions taken to date, future actions planned, key performance measures, challenges, risks and a RAG status to provide transparency regarding the status of recommendations, and ongoing monitoring, assurance and governance.
- 3.3 Leads for each recommendation provide quarterly updates which are reported to Angus Mental Health and Wellbeing Network Strategic Oversight Group (AMHAWN SOG) which is

the governance structure for this improvement plan. Recommendation Leads also provide updates to their relevant clinical care and performance groups as required.

3.4 Currently the 39 actions within the Living Life Well Implementation Plan have the following status:

- Blue (Complete) – 14
- Green (On track) – 12
- Amber (Some concerns with meeting deadlines) – 13
- Red (Requires Urgent Attention) – 0

3.6 Of the 13 amber actions,

- 1 is due to the priority of the action but are on track to meet their deadline
- 4 have missed deadline due to Tayside work still being in progress, timescales have been revised to take account of this.
- 1 is due to National work not being completed, resulting in a delay to local implementation.
- 6 have not met the deadline date due to a resource gap which has now been filled and are now being progressed and timescales revised.
- 1 has missed the deadline date but is an ongoing action with no need for escalation.

3.7 Of the 14 blue actions,

- 11 of these actions have now become business as usual.
- 3 of the actions within the LLW Plan have led to further work being undertaken under other improvement programmes. For example, the business case for a Crisis Centre has been completed at a Tayside level but Angus will now undertake their own evaluation of need and work will come under the Angus Urgent & Unscheduled Care Programme.

A summary update on all 39 actions can be found at Appendix 1.

### 3.8 **PERFORMANCE DATA AND FEEDBACK**

#### **Adult Integrated Mental Health Services**

- 100% compliance across all mental health teams (operational, admin and planning) with induction planning and standards
- 100% compliance with appraisals across all mental health teams
- 100% compliance with supervision across all mental health teams
- % of staff completing all mandatory training has increased across all teams.

#### **7-day CMHT Service**

- Now fully implemented with 204 referrals from 1/7/22 to 21/5/23 and 92% of appointments attended.
- Service user feedback undertaken in July 2022 all agreed or strongly agreed that they worker had listened to them and felt supported with the following comments made:

*“Perfect. Just what needed at the time”*

*“Staff really flexible about time of appointment and support provided. I really felt listened to and felt the worker heard what I was saying. They also helped me plan ahead with next steps. I've been referred a couple of times and the service has been great both times”*

*“Worker was professional. Asked how I was feeling. Put me at ease”*

*“I felt really listened to as I was struggling to communicate what the issue was. Staff were really patient with me to make sure I was heard”*

## **Peer Support**

- Peer Support is now fully embedded across 13 GP surgeries in Angus with the Peer Workers part of both the Mental Health and Wellbeing Hubs in the North and this will be replicated as we roll out the Hubs in the South.
- From 1/7/22 to 31/3/23 Peer Support has received 2464 referrals, 1380 in the North, delivered by Hillcrest Futures and 1084 in the South delivered by Penumbra.
- Top 7 presenting issues consistent across both organisations. Some people identified more than one area of concern:
  1. Mental Health (General) (720)
  2. Low Mood (563)
  3. Anxiety (603)
  4. Bereavement (109)
  5. Stress (172)
  6. Relationship Issues (112)
  7. Trauma (80)
- **Outcome of referrals:** The majority of people were signposted to self-help activities (919) or community supports (661), followed by referral for specialist mental health support (257) or referral back to the GP (86).
- The majority of people self-reported 'positive progress' of 'no change' as a result from being involved with the Peer Service through Hillcrest Futures and Penumbra.
- Hillcrest Futures SIPP trained 186 people, and Penumbra offered 18 wellbeing workshops which are open to Peer Service and Angus Nova referrals.

## **Angus Nova Project**

- 283 referrals in total from 1/7/22 to 31/3/23
- Top 4 presenting issue reported by those accessing the service. Some people identified more than one area of concern:
  1. Wellbeing management (88)
  2. Anxiety (71)
  3. Social inclusion (69)
  4. Low confidence (65)
- **Outcome of referrals:** The majority of people Moved Actively – person engaged in service, achieved planned outcomes and moved on (88 people) or Did not attend – person never engaged in service after being referred (85) followed by Disengaged – person engaged in service then stopped attending – reason not always known (73) or Service no longer meeting supported persons' needs – persons needs are no longer met by service remit (37).
- Feedback from a small sample of people showed:
  - Most people thought that support had a positive impact on their life 'very much' and 'quite a lot'
  - They were treated with kindness and dignity 'all or most of the time'
  - Staff did what they said they would do 'all or most of the time'
  - On a Scale of 1-10 rated the support they received between 8 and 10

## **Mental Health and Wellbeing Enhanced Community Support (ECS) Hubs**

- The Hub in the North East continues to work extremely well with referrals in Year 2 on par with Year 2 of around 1400 with no referral rejected.

- In the first month the North West Hub received 167 referrals with no referral rejected with the majority being seen by Peer, CMHT and Psychology.
- An initial evaluation of the North West Hub with staff reported a positive impact on their practice with staff member commenting:

*“It has been fantastic getting to know members of the multi-disciplinary teams and being able to share knowledge and expertise. It has been very beneficial for me as a practitioner, improving my knowledge and understanding in relation to mental health and the services available within the local area”.*

*“It has enhanced the support for my peer workers, increased partnership working, enables a quicker response to patient care and shared learning and practice”.*

*“Much better and more efficient communication between all involved, including new referrals and any further follow ups/joint working”.*

- With patients commenting:

*“The mental health peer worker I was allocated for very friendly and helpful”.*

*“The referral definitely helped”.*

*“Being able to talk to a professional really helped with my upsetting issues”.*

*“The peer worker at made me feel really comfortable and supported”.*

*“Very helpful and quick response”.*

*“Was referred to peer support who helped me get support from psychology”.*

### 3.9 TAYSIDE MENTAL HEALTH AND LEARNING DISABILITIES IMPLEMENTATION PLAN.

IJB Members were asked at the March 23 IJB Report No 15/23 to agree the Tayside Mental Health and Learning Disabilities Implementation Plan which was prepared in response to the six recommendations set out in the final report of the Independent Oversight and Assurance Group into Tayside Mental Health Services published in January 2023.

This plan is set in the context of a revised governance structure and refines the priorities which had been identified in the Living Life Well Strategy. The impact of this work on the Angus Implementation Plan at this stage is unknown but will be monitored through the Tayside Mental Health and Learning Disabilities Whole System Change Programme and AMHAWN SOG.

The original six priorities in the Tayside improvement plan submitted to Scottish Government has been increased to include the four further priorities below. These new priorities and the original six priorities are in line with planning in Angus and compliment actions planned under the Angus Living Life Well Improvement Plan. Angus is well represented in Tayside mental health planning groups and are contributing to whole systems planning across Tayside.

Four additional priorities in the Tayside Improvement Plan.

Priority	Intended Outcome
Integrated Substance Use and Mental Health	There are processes in place to ensure that people who have co-occurring substance use and mental health needs are able to access appropriate services, and that these services work together to support the people's needs
Whole System Redesign of Learning Disabilities	<p>People with a learning disability will experience reduced health inequalities</p> <p>People with a learning disability receive the right support at home/community to maintain</p>

	<p>their health and wellbeing</p> <p>People with a learning disability will receive the right support to minimise the likelihood of requiring admission to hospital</p> <p>People with a learning disability will be less likely to be unnecessarily delayed within in-patient care longer than required</p> <p>People with a learning disability will be less likely to require a placement out with their local area</p>
Crisis & Urgent Care	The re-design of a centralised crisis response to enable a Tayside-wide specialist emergency mental health assessment function, with clear links to local Emergency Departments, Scottish Ambulance and NHS Scotland Police Triage.
Tayside Specialist Community Mental Health Service Redesign	By February 2024 redesign and implement a co-produced model of care for the Tayside Specialist Community Mental Health Service. Ensuring equitable, effective, treatment, care and support for people living in the community with complex and severe mental illness.

#### 4. PROPOSALS

- 4.1 Angus IJB note the progress made from the annual report and be assured that progress will continue to be made in relation to delivering on the actions within the Living Life Well Implementation Plan.
- 4.2 Agree further reporting on the LLW Plan to the IJB will come as part of the Strategic Planning Group update, with quarterly governance reporting to AMHAWN SOG to provide assurance.

#### 5. FINANCIAL IMPLICATIONS

An action to develop a financial framework to support the mental health improvement programme across Tayside is included in the Implementation Plan to Scottish Government, which includes the delivery of the Tayside Living Life Well Plan.

#### 6. RISK

As per reports IJB 87/22 and IJB 6/23 the uncertainty of funding in relation to the Angus Mental Health and Wellbeing in Primary Care Plan in its current form, will not be achievable. Specifically, the action to develop a 24/7 mental health and wellbeing/crisis centre.

Confirmation from Scottish Government on the future of the Mental Health and Wellbeing in Primary Care funding has still not been received. Angus has taken the position as that the previously approved funding will not be available, and work is underway to look at current commissioned services and work with partners to address this.

Data analysis so far has indicated a low level of need for a crisis centre in Angus overnight. Based on this, agreement has been given for the crisis/community wellbeing centre to be included in the programme of work under Angus Urgent and Unscheduled Care and reported

through the Angus Urgent and Unscheduled Care Steering Group. A workstream is currently being established to ensure a pathway of care that is best fit for the population of Angus is implemented.

This risk will be reviewed in line with the Tayside Priority 2 area of work.

<b><u>Risk Description</u></b>	Progression of a 24/7 Crisis Centre (Community Wellbeing Centre) for Angus
<b><u>Risk Category</u></b>	Operational, Governance, Political, Financial
<b><u>Inherent Risk Level</u></b>	Likelihood 5 x Impact 5 = Risk Scoring 25 (which is a Very High-Risk Level)
<b><u>Mitigating Actions</u></b>	<ul style="list-style-type: none"> <li>- Mental Health Crisis Support now part of the Angus Urgent and Unscheduled Care Programme</li> <li>- Mental Health Crisis Support Workstream to be established in the next few weeks</li> <li>- Review the original Tayside options appraisal</li> <li>- Collate and review Angus data in relation to crisis support to identify current needs and gaps</li> </ul>
<b><u>Residual Risk Level</u></b>	Likelihood 4 x Impact 4 = Risk Scoring 3 (which is a High Level)
<b><u>Planned Risk Level</u></b>	Likelihood 3 x Impact 3 = Risk Scoring 3 (which is a Medium Risk Level)
<b><u>Approval recommendation</u></b>	Given our developed understanding of the situation and in line with the IJBs risk appetite, the risk is deemed to be Medium and manageable at this current time.

**7. OTHER IMPLICATIONS (IF APPLICABLE)**

N/A

**8. EQUALITY IMPACT ASSESSMENT**

An Equality Impact Assessment is required and is included in **Appendix 2**.

**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.

<b>Direction Required to Angus Council, NHS Tayside or Both</b>	<b>Direction to:</b>	
	No Direction Required	X
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

**REPORT AUTHOR: Jill Galloway, Head of Health and Community Care**

**EMAIL DETAILS: [tay.angushscp@nhs.scot](mailto:tay.angushscp@nhs.scot)**

List of Appendices

- Appendix 1 Angus LLW Annual Summary
- Appendix 2 EQIA