Date of Meeting: 31st August 2023		ITEM: 7
Thurrock Health and Wellbeing Board		
Southend, Essex and Thurrock All-Age Mental Health Strategy 2023-2028		
Wards and communities affected:	Key Decision: N/A	
Report of: Maria Payne, Strategic Lead – Public Health		
Accountable Assistant Director: Andrea Clement, Assistant Director & Consultant in Public Health		
Accountable Director: Dr Jo Broadbent, Director of Public Health		
This report is Public		

Executive Summary

Partners across Southend, Essex and Thurrock have come together to align existing priorities and develop an All-Age Mental Health Strategy. It is underpinned by population need and also incorporates existing national guidance. The work on this strategy has been ongoing through the last year, led by an external consultancy company (Tricordant), and is now being presented for endorsement and approval at the Boards of all key partners.

It is also proposed for there to be a Strategy Implementation Group established to support the delivery of the ambitions in the strategy.

Commissioner Commentary

Not applicable

- 1. Recommendation(s)
- 1.1 Adopt the draft Southend, Essex, and Thurrock Mental Health strategy in the appendix, which has been developed jointly with health and care partners across the geography of greater Essex.
- 1.2 Agree for Thurrock to be part of a Southend, Essex and Thurrock (SET)-wide Strategy Implementation Group to support and coordinate collaborative working across partners to implement the strategy.

2. Introduction and Background

- 2.1 Support for people with mental health needs is provided by a range of different organisations, some of which are Thurrock-specific, and others span wider geographies, including the Mid and South Essex Integrated Care Board and SET footprints.
- 2.2 Over the last year, colleagues from Thurrock have worked with partners across Southend and Essex, alongside an external consultancy (Tricordant) to:
 - Understand our population needs around mental health, which have been articulated in a separate SET-wide needs assessment document. (Thurrock Public Health colleagues were key to the shaping of this)
 - Respond to the identified needs within the context of national policy and local ICP and organisational strategies
 - Develop a revised 'all age' strategy building on the last SET-wide strategy (2017-21) (see link to previous Health and Wellbeing Board cover paper for this in section 8 of this report.)
 - Explore options for working together to support implementation of the strategy
 - Develop supporting enabler and implementation plans
- 2.3 The core partners on this group have included:
 - North East Essex (part of Suffolk and North East Essex ICS) (NEE)
 - West Essex (part of Hertfordshire and West Essex ICS) (WE)
 - Mid and South Essex ICB (MSE)
 - Southend City Council (SCC)
 - Essex County Council (ECC)
 - Thurrock Council (TC)
 - Essex Partnership University NHS Foundation Trust (EPUT) provider of adult services
 - North East London NHS Foundation Trust (NELFT) provider of children and young people's services
 - In addition, Essex Police have been engaged and are keen to be part of the arrangements established. Voluntary, Community, Faith, and Social Enterprise sector organisations have also been engaged in developing the strategy and will continue to be key partners in the next phase of implementation.
- 2.4 The Thurrock Council input has largely been provided by Adult Social Care Commissioning and Public Health; with oversight from the Mental Health Transformation Board and Mental Health Operational Group meetings, and Children's colleagues.
- 2.5 The strategy document contains details on how it has aimed to coordinate and align with priorities from a range of organisational strategies, with those of

- particular note to Thurrock including the Thurrock Health and Wellbeing Strategy, the Mid and South Essex Integrated Care Strategy and the Better Care Together Thurrock Strategy.
- 2.6 The strategy is intentionally brief for reasons of clarity and deliverability and lays out the 'all age' vision and principles we will work to and the outcomes to be achieved over the next five years, guided by a set of I-Statements. It is shown in summary form below:



To promote good emotional and mental health for everyone, reduce health inequalities and to improve life outcomes for those with mental ill health, enabling them to recover and live well.

I STATEMENTS

- I am treated with respect and dignity by services when I need support
- I have good emotional and mental health and am proactive to manage my physical health
- I can easily access and identify the support I need to live well. I can do this in a timely way.
- I have opportunities to engage in education, training, and/or meaningful employment
- o I feel safe and supported
- I have somewhere suitable to live with access to community networks
- I am able to develop and maintain relationships that matter to me.

OVERARCHING OUTCOMES

Adults, Children and Young People

- Have good mental health.
- Are enabled to recover.
- Are supported to maximise their potential in Education, Training and Employment,
- Can access social networks and feel a connection to their local community or the community they want to be part of.
- Can live as independently as possible in accommodation that is suitable for their needs.
- Are supported to determine and achieve their individual outcomes.

HOW

- Lived experience and co-production
- Increase in joined up working
- Focus on the wider determinants of mental ill health – housing, education and employment not just clinical intervention
- Early Intervention and Prevention
- Increased All Age holistic approaches which include families
- Improved data and quality
- Reduce inequalities related to Mental Health
- Common standards
- Working more closely with voluntary community faith and social enterprise partners
- Support to our staff and volunteers to enable them to work safely, effectively and sustainably
- Joined up and sustainable workforce planning
- Digital support for access and recovery

Prevention & Early Intervention

Acute & Crisis Services

Supporting Recovery

- 2.7 A significant challenge of the previous 2017 Strategy was not its content, (much is still relevant) but its implementation. System partners are therefore determined to develop effective mechanisms for ensuring implementation of the strategy whilst recognising most of the delivery will continue to be at local Place level with ICBs, Local authorities, care providers, VCFSE and other partners working together with people with lived experience, typically in local Alliances. In Thurrock, we anticipate our local Mental Health Transformation Board and Integrated Emotional Wellbeing Partnership will be pivotal mechanisms for ensuring local delivery, alongside the clinical strategies developed by our PCNs.
- 2.8 Partners have developed proposals for a 'Southend, Essex and Thurrock All-Age MH Strategy Implementation Group' (SIG) focussed on overseeing a limited range of key strategic issues around overall strategy delivery and SET system development with partners sharing leadership of individual workstreams as appropriate. It will build on the existing informal working arrangements established for oversight of the strategy development itself.

- 2.9 The SIG will have oversight and monitoring of the overall SET Mental Health Strategy, including the delivery of SET-level outcomes for specialist services (Eating Disorders, Perinatal Mental Health, Personality disorder, and inpatient and community bed-based care). The membership will include senior representatives from the core partners listed in 2.3 above, Essex Police, and have input from people with lived experience.
- 2.10 The SIG will be a collective 'decision recommending body'. Formal decision making will continue in line with individual organisation's internal governance approvals. The SIG will work with a range of supporting groups, including many which exist already:
 - The existing Collaborative Children's Forum which oversees a single contract for the commissioning of Children and Young People's mental health services
 - Existing mental health Taskforce groups adapted as required following a current external review process.
 - New supporting groups, only where needed, which are likely to include:
 - Co-production challenging and supporting the system to ensure coproduction is embedded.
 - Development of joined up approaches to key enablers such as finance, outcome and performance reporting, workforce and digital.
 - Key areas where enhanced focus is needed such as embedding a holistic approach around transition.

3. Issues, Options and Analysis of Options

- 3.1 Option 1 is to do nothing, and not endorse either the strategy or the participation in the Strategy Implementation Group. This means that the SET-wide mental health strategy that has been approved across the rest of the geography and across partner agencies that operate in Thurrock, would not include Thurrock. This would add complexity to existing partnership working arrangements, and mean Thurrock does not have a 'voice' in some of the system-wide transformation programmes that span beyond our sphere of influence. Not approving the strategy risks missing out on an opportunity to lead change alongside partners and ensure that those changes align with existing Thurrock strategic ambitions.
- 3.2 Option 2 is to approve the strategy and participation in the Strategy Implementation Group. This option means that there is a clear, united direction for partners across SET, and is aligned to national policy and all local strategies.

4. Reasons for Recommendation

4.1 Option 2 is recommended – to approve both recommendations 1.1 and 1.2 listed above. In addition to having a SET-wide agreed strategic direction for mental health which spans an all-age approach, having Thurrock participation in the Implementation Group means that we can continue to advocate for Thurrock and align with our existing strategic ambitions.

- 4.2 Some individual partners on the Thurrock Health and Wellbeing Board have already approved this strategy and participation in the Strategy Implementation Group. For example, it has already been endorsed by EPUT and MSE ICB Executive Boards, as well as the other two ICBs in Essex and the Essex Health and Wellbeing Board.
- 4.3 The Board are asked to note it will receive regular updates on progress with implementation of the strategy and development of collaborative working arrangements.
- 5. Consultation (including Overview and Scrutiny, if applicable)
- 5.1 An external agency, Tricordant, were commissioned by Essex County Council to deliver the Mental Health strategy, development of which included gathering inputs from the community and specifically those with lived experience of mental ill-health. They held conversations with over 100 individuals, groups or organisations across Essex.
- 5.2 It is intended that there will be a lived experience group to inform the delivery of the strategy on an ongoing basis with appropriate Thurrock representation on that forum.
- 6. Impact on corporate policies, priorities, performance and community impact
- 6.1 This strategy aligns most closely to Thurrock Council's People Priority:

People – a borough where people of all ages are proud to work and play, live and stay.

This means:

- high quality, consistent and accessible public services which are right first time
- build on our partnerships with statutory, community, voluntary and faith groups to work together to improve health and wellbeing
- communities are empowered to make choices and be safer and stronger together
- 6.2 It also aligns with the Thurrock Health and Wellbeing Strategy, in particular the objectives within domains 1 (Staying Healthier for Longer) and 3 (Person-Led Health and Care).

7. Implications

7.1 Financial

Implications verified by: Not applicable – external partner report

There are no direct financial implications from implementing this strategy or participating in the Strategy Implementation Group. The aims within the strategy include a focus on early intervention and prevention of costs in the long term.

7.2 Legal

Implications verified by: Not applicable – external partner report

There are no direct legal implications from implementing this strategy or participating in the Strategy Implementation Group. It is not a statutory requirement to have a mental health strategy in place. Approval of the strategy does not commit any Thurrock partner to any future commissioning or spending decision.

7.3 **Diversity and Equality**

Implications verified by: Not applicable – external partner report

A Community Equality Impact Assessment has been completed on this strategy by Thurrock Council, and the summary text included below:

The SET Mental Health Strategy outlines a number of commitments and priorities for system partners, including Thurrock Council, which aim to promote good emotional and mental health for everyone, reduce health inequalities and to improve life outcomes for those with mental ill-health, enabling them to recover and live well.

Data analysis undertaken to inform the strategy has identified that there are certain population groups that may be at higher risk of poorer mental health outcomes. We will ensure that the delivery plan underpinning the SET Mental Health Strategy prioritises action for these groups and aligns to other existing strategic commitments within Thurrock to improve community cohesion and reduce health inequalities.

The assessment highlighted that implementation of this strategy will not have an adverse impact on any individuals with a protected characteristic.

7.4 **Other implications** (where significant) – i.e., Staff, Health Inequalities, Sustainability, Crime and Disorder, and Impact on Looked After Children

A focus on reducing health inequalities and on prevention and early intervention are listed in the guiding principles of this strategy; therefore this

approach should mitigating existing inequalities in experience of accessing mental health support.

- 8. Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):
 - Health and Wellbeing Board paper for SET Mental Health and Wellbeing Strategy 2017-21: https://democracy.thurrock.gov.uk/documents/s11028/Essex%20Southend%20and%20Thurrock%20Mental%20Health%20and%20Wellbeing%20Strategy.pdf

9. Appendices to the report

Draft strategy for approval

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