

17 January 2012		ITEM 6
Health and Well-being Overview and Scrutiny Committee		
South Essex Mental Health Strategy		
Report of: Catherine Wilson, Commissioning Officer Mental Health		
Wards and communities affected: All	Key Decision: To note that the South Essex Mental Health Strategy is being written and will be ready for consultation in January 2012.	
Accountable Head of Service: Roger Harris, Head of Commissioning and Resources		
Accountable Director: Jo Olsson, Director People Services		
This report is public		
Purpose of Report: The purpose of this report is to inform the Health and Well-Being Overview and Scrutiny Committee that a South Essex Mental Health Strategy is currently being written jointly by Thurrock Council, Southend-on-Sea Council, Essex County Council and South Essex PCT Cluster. The aim is to have the first draft ready for consultation by January 2012.		

EXECUTIVE SUMMARY

The South Essex Mental Health Strategy is being jointly produced by all Commissioning partners to best serve the population of South Essex.

The strategy is underpinned by the outcomes within No Health Without Mental Health: Cross Government Mental Health Outcomes Strategy (February 2011) which explains how care and support services, Public Health, Adult Social Care, NHS Healthcare and Children's Services, will all contribute to the ambition for improved mental health. The South Essex Mental Health Strategy follows the guidance outlined in No Health Without Mental Health and is linked to the key work that has been undertaken across Essex, Southend and Thurrock to produce a number of strategies including:

- The Dementia Strategy
- The Drug and Alcohol Strategies for all localities

- The Children and Adolescent Mental Health Strategy

To ensure that each Commissioning partner meets not only the cross cutting commissioning needs of South Essex but also the unique needs of each locality and service, each partner will develop individual implementation plans, which will meet local need and be shared and supported within a South Essex Joint Commissioning Team.

1. RECOMMENDATIONS:

1.1 For the Health and Well-Being Overview and Scrutiny Committee to be advised that the South Essex Mental Health Strategy is currently being written and will be available for consultation from January 2012. From this strategy a new model of Mental Health Service Delivery will be developed between all partner agencies and in consultation with service users across South Essex.

2. INTRODUCTION AND BACKGROUND:

2.1 The South Essex Mental Health Strategy sets out a new vision for Mental Health Services in Essex. This vision is guided by three overarching outcomes:

The **three overarching outcomes** we want to achieve are:

1. People get better
2. People have good physical and mental health
3. People achieve the best possible quality of life

2.2 Our vision and the three overarching outcomes will lead to significant changes in the way that Mental Health services are delivered across South Essex. When the strategy has been implemented we will expect to see fundamental differences within that service, the person will be at the centre of any services that they receive fully included in the decisions about their life and any treatment or services they require. To facilitate this we will expect to see:

- Significantly more structured Peer Support
- Much less reliance on inpatient support
- To replace this we want to have a much fuller and more comprehensive level of Community and GP support
- There will be clear entry and exit points for individuals requiring services, with the ability for people to return for support when required to maintain their mental well being.
- The service responses will be seamless and personalised with clear pathways that are accessed and followed by those who use and provide services.

The Strategy is set out as follows:

Chapter 1: **The Introduction** as outlined above.

Chapter 2: **The Case for Change** outlines clearly the need to change how mental health services are provided in South Essex. It summarises feedback from local engagement with service users, carers, mental health professionals, the community and voluntary sector and others. Consistent themes emerge about access to services, how crises are responded to and the strong desire for individuals to be seen as a whole person rather than the focus being on the mental health condition. These themes have underpinned the development of the Strategy. Reductions in funding, rising demand for services and changes to how services are commissioned mean that doing nothing is not an option – this is a great opportunity to review how we can build on and improve the way things are currently done.

Chapter 3: the **Local Health and Social Care Needs Assessment** summarises what is known about mental health in South Essex from the Joint Strategic Needs Assessment, in terms of the scale of need, local risk factors and local high risk groups. It highlights the high correlation between mental and physical ill health and the importance of suitable housing. Many of the high risk factors are linked to deprivation, which means that parts of Basildon, Southend-on-Sea and Thurrock are likely to be most affected. More local evidence of need is required to help implement the Strategy.

Chapter 4: **Current Investment, Activity and Performance**, illustrates the financial challenge for mental health service provision in South Essex. Over £91million is currently spent in South Essex, 86% of this by the health service, but all partners are being called upon to reduce expenditure and make sure that the money that is invested has the most impact in terms on improving outcomes for those who use the service. The Chapter outlines the current investment in mental health, how this is used and provides information on how South Essex is performing when compared with others providing similar services.

Chapter 5: **The Way Forward**, sets out a new framework for commissioning and delivering improved outcomes, including suggested measures of performance and guidance on how commissioning will work in South Essex.

2.3 Implementation of this Strategy will bring a new approach to the joint commissioning and provision of mental health services in South Essex.

It will support our vision for improving mental health by:

- focussing on recovery and what works for individuals
- providing rapid access to services and advice – “anytime, anyplace, anywhere”
- ensuring that pathways are mapped to support the individual
- challenging stigma, creating visibility and promoting inclusion
- encouraging peer support and personalised responses
- providing more support to GPs and the community
- ensuring that physical and mental health are considered together

3. ISSUES AND/OR OPTIONS:

N/A

4. CONSULTATION (including Overview and Scrutiny, if applicable)

- 4.1 The development of this strategy has been undertaken in partnership through a rigorous consultation process which has included contributions from service users and carers, voluntary organisations, GPs, Provider Services, Clinicians within Mental Health and Mental Health social care and health practitioners.
- 4.2 The consultation on the Strategy itself will go back to all the individuals and organisations who contributed to its development requesting comment and contribution. From this an implementation plan will be produced with significant input from service users, carers and partner organisations.
- 4.3 Our existing Section 75 agreement with our mental health providers South Essex Partnership Trust (SEPT) which details the arrangements for the secondment of our social work staff over to SEPT has been extended until the 31st March 2013. The Strategy will support us in ensuring Thurrock are in a good position during early 2012 to decide if this should be renewed further or different options for service change and delivery explored.

5. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT

- 5.1 The provision of good quality Mental Health Services across Thurrock have far reaching consequences for individual and the communities' well-being and a positive strategy focusing on good outcomes and recovery for individuals will ensure the people with Mental Ill Health achieve the best possible quality of life.

6. IMPLICATIONS

6.1 Financial

Implications verified by:
Telephone and email:

Michael Jones
01375 652772
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The information contained within the report details a strategy. At this stage there are no direct financial implications, but if any arise as a result of the strategy, these will form part of the Councils budget monitoring and financial management process

6.2 **Legal**

Implications verified by: **Lee Bartlett**
 Telephone and email: **01375 652167**
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There are no legal implications arising from this report

6.3 **Diversity and Equality**

Implications verified by: **Samson DeAlyn**
 Telephone and email: **01375 652472**
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There will be an Equality Impact Assessment undertaken for the strategy and the implementation plan that will follow. The strategy provides detailed information about the prevalence of mental ill health within all localities and communities within South Essex. The outcome model that will be developed from the strategy will ensure that all diversity and equality issues are key and integral to any future service response.

6.4 **Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental**

N/A

7. **CONCLUSION**

7.1 Once the Strategy is completed it will be available to members of the Health and Well-Being Overview and Scrutiny Committee.

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