London Borough of Hammersmith & Fulham

Health & Wellbeing Board





Like Minded – NWL Mental Health and Wellbeing Strategy – Case for Change

Report of the Collaboration of North West London CCGs

Open Report

Classification - Review & Comment

Key Decision: Yes – endorsement of the attached Case for Change

Wards Affected: All

Accountable Executive Director: Matthew Hannant, Interim Senior Responsible Officer, Director of Strategy & Transformation (Acting), NWL Collaboration of CCGs; Fiona Butler, Clinical Responsible Officer, Chair of NWL Mental Health and Wellbeing Transformation Board, West London CCG

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1. EXECUTIVE SUMMARY

1.1 This report sets out the background to the development of North West London Mental Health and Wellbeing Strategy Case for Change, as part of the Like Minded Programme. The Case for Change describes a shared understanding of the issues the sector faces in relation to Mental Health and Wellbeing and the NWL ambitions for change. It is designed as a call to action - outlining the areas of work that should be developed in the next phase of the programme. 1.2 The Case for Change is included as an appendix to this report – 'Improving mental health and wellbeing in North West London Case for Change – a summary'.

2. RECOMMENDATIONS

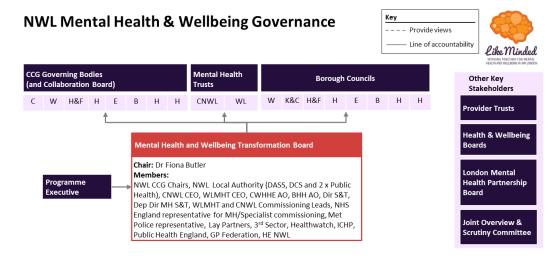
2.1 The Board is requested to support the overall approach outlined in the Like Minded Case for Change, and for this to be formally minuted

3. REASONS FOR DECISION

3.1 We welcome and value your ongoing input into this programme of work, through future Health & Wellbeing Board meetings. Any input provided will support the current stage of work – developing models of care and support to address the challenges described in the Case for Change. The Health and Wellbeing Board will be asked for formal agreement of the Models of Care and Support emerging from this phase of work.

4. INTRODUCTION AND BACKGROUND

- 4.1 In June 2014 the NWL Collaboration Board agreed to build on the previous mental health strategy (called 'Shaping Healthier Lives, 2012-15) and initiate the North West London-wide mental health and wellbeing programme, called "Like Minded" (2015-2020).
- 4.2 The governance of the programme is through the NWL Mental Health and Wellbeing Transformation Board. The Board was formed in May 2015 and has representation from CCGs, Local Authorities, both Mental Health Trusts, other stakeholders and service users (see governance chart below). The Board oversees and supports the development and implementation of Like Minded; their role is to identify the most appropriate priorities and solutions for the programme and ensure delivery. It will manage the interdependencies with other related programmes and transformation work across the 8 boroughs as well as from our service user groups.



4.3 The first phase of the Like Minded programme has focused on the development of a 'Case for Change', which describes the eight major issues identified across

NWL relating to mental health and wellbeing, and the ambitions to improve things (see section 5 below). It is built on a wide range of data, people's experiences, best practice and a structured approach to prioritising, which should enable local partners to target and accelerate improvements to mental health care and wellbeing in our communities.

5. PROPOSAL AND ISSUES

- 5.1 The Like Minded programme has identified eight major issues that we currently face in NW London and the ambitions that we must all sign up to if we are to improve things. They are set out in the Case for Change document, and also below:
- 5.2 **Issue:** Too many people face mental health needs alone

Ambition: We will ensure that mental health needs are better understood and more openly talked about, and we will improve the range of services for people with mental illness in NW London

5.3 **Issue:** Not enough people know how to keep mentally well

Ambition: We will improve wellbeing and resilience, and prevent mental health needs where possible, by: supporting people in their workplace, giving children and young people the skills to cope with different situations, and reducing loneliness for older people.

5.4 **Issue:** We need to improve the quality of care for those with serious and long term mental health needs

Ambition: For people with serious and long-term mental health needs we will: make their care journey simpler and easy to understand, develop new, high-quality services in the community and focus care on community based support rather than just inpatient care so people can stay closer to home.

5.5 **Issue:** Too many people experience common mental illnesses, such as depression and anxiety, in silence

Ambition: For those people experiencing depression and anxiety we will: improve how quickly we identify, especially when people are not currently receiving other healthcare, and improve the quality and quantity of therapy that doesn't require medicines.

5.6 Issue: 3 in 4 lifetime mental health disorders start before you are 18

Ambition: We will ensure that implementation of the national strategy for children and young people responds to our local needs.

5.7 **Issue:** New mothers, those with learning disabilities, the homeless and people with dementia do not get the right mental health care when they need it

Ambition: We will improve the care for specific groups in our community and support available to those who don't always get the mental health care they need within existing services.

5.8 **Issue:** Too many people with long term physical health conditions do not have their mental health taken into account...and vice versa

Ambition: We will make sure that physical health and mental health are supported for people with existing physical or mental long term conditions, learning from other work in NW London around the importance of joining up care.

5.9 **Issue:** Our systems often get in the way of being able to provide high quality care

Ambition: Make sure that our systems help, rather than hinder, joined up care.

5.10 The workstreams outlined below in section 6 aim to realise these ambitions across North West London. The input of key stakeholders from Hammersmith & Fulham into each workstream will be essential for their success.

6. OPTIONS AND ANALYSIS OF OPTIONS

- 6.1 The Case for Change has had input from members of the NWL Mental Health and Wellbeing Transformation Board. It has also received input from service users, some of whom are represented on the Transformation Board through the National Survivor User Network and West London Collaborative.
- 6.2 The Like Minded team have developed a longer narrative Case for Change document, with a supporting short summary. The short summary is presented today for your support, and the longer document is available for download here: http://www.healthiernorthwestlondon.nhs.uk/mental-health
- 6.3 The programme has prioritised the following workstreams to ensure we deliver on our ambitions. We used a prioritisation framework developed in collaboration with our public health leads to identify where the programme can most add value and support a North West London approach.
- 6.4 These workstreams have been convened with partner involvement and with distributed leadership from across sectors. The next steps for each of these workstreams are set out below:

Workstream	Key update/next step
1) Wellbeing and prevention	Workstreams and workplans developed for workplace wellbeing interventions and prevention of conduct disorder, led by Public Health and with input from Frontier Economics.

2) Serious and Long Term mental health needs	Workshops were run throughout September. Current focus is on mapping data and describing current 'as is' state, including current transformation work within CCGs and both mental health trusts. A draft Model of Care and Support will be presented to the 23 October Mental Health and Wellbeing Transformation Board for discussion and comment.	
Common mental health needs	Initial workshop to be held to scope breadth of work.	
4) Children and Young people	Transformation Plans for Future in Mind response now published – detailed timeline with resource to develop, sign off and submit plans by 16 October 2015.	
5) Existing projects	Existing mental health projects, such as perinatal and learning disabilities, will be continued and report to the programme's Strategic Implementation & Evaluation Board.	
6) Enablers	Agreement to develop and address enablers with other Strategy & Transformation programmes, in particular Whole Systems Integrated Care and Primary Care.	

7. CONSULTATION

To date, we have presented the Like Minded programme at the following Boards in Hammersmith and Fulham:

Forum	Date	Discussion
Hammersmith	6-01-15 (Governing	Programme Initiation Document
and Fulham	Body Seminar)	Programme update
CCG	12-5-15 (Governing	Discussion of Case for Change
	Body Seminar)	Governing body endorsement of Case for
	1-9-15 (Governing	Change (8-9-15)
	Body Seminar)	
	8-9-15 (Governing	
	Body)	
Hammersmith	23-03-15 (HWBB)	Programme Initiation Document and
and Fulham		programme update
HWBB		

- Held a meeting for Children and Young people work stream understanding experiences with the Youth Team (23 March 2015)
- Attended and engaged with the Homeless Health Action Group, Hammersmith & Fulham (15 April 2015)
- Ran a workshop on socially excluded groups in Westminster Central Hall (6 May 2015)
- Attended H&F Council of Members meeting (13 May 2015)

- Held a Community of Interest meeting (attended by H&F Service Users) 1
 July 2015)
- Held an 'Innovation Lab' for Serious and Long Term Mental Health Needs at Pimlico Academy (22 September 2015).
- Liz Bruce, Executive Director of Adult Social Care, invited to Transformation Board
- Andrew Christie, Tri-borough Director of Children's Services, represents other DCSs within the West London Alliance on the Mental Health and Wellbeing Transformation Board.
- Had attendance from Tri-borough public health teams at workshops and significant input into each workstream – particularly the Wellbeing & Prevention workstream.

Service users and carers, including a number from Hammersmith and Fulham, have been invited to all the workshops and Board meetings organised by the Like Minded programme. Four service users and carers from Hammersmith and Fulham (and the 7 other NWL boroughs) have been given training by the National Survivor User Network in order to effectively input into programme meetings.

8. EQUALITY IMPLICATIONS

8.1 We recognise that carrying out an EQIA is an integral part of developing proposals within the Like Minded programme. We will procure an external Equalities Impact Assessment (EQIA) towards the end of 2015. Prior to this we are carrying out an internal screening process to identify what data we currently have for each of the boroughs, and the likely impact on mental health. This will then inform a procurement specification for an external EQIA to be carried out.

9. LEGAL IMPLICATIONS

- 9.1 The programme will support the co-production of models of care and support, agree outcomes, assess impact of any proposed changes and oversee the production of business cases. While this may lead to proposals which constitute significant service change and therefore potentially formal consultation, it is envisaged that there will also be large parts which can be taken forward without formal consultation. A key role for the NWL Mental Health and Wellbeing Transformation Board is in quality assuring the development and implementation process. We have a good understanding of the process based on previous consultations such as for Shaping a Healthier Future, and we will build on this knowledge. We have secured legal advice from Capsticks, and will continue to do so.
- 9.2 All NHS bodies proposing a service change must involve the public, patients and staff from initiation through to implementation. National guidance is set out in 'Planning and delivering service changes for patients' (NHSE Dec 2013). This offers a good practice guide intended to help shape local arrangements and to

be used in a way that is both proportionate and flexible. Public consultation is required if there is a significant change to the way services are provided.

- 9.3 Any service change large or small needs to comply with the NHS England four tests and demonstrate evidence of:
- Strong public and patient engagement
- Consistency with current and prospective need for patient choice
- ❖ A clear clinical evidence base
- Support for proposals from clinical commissioners

10. FINANCIAL AND RESOURCES IMPLICATIONS

- 10.1 One of the stated objectives of the programme is to develop improved outcomes and ensure a financially sustainable system for at least the next 5 years. In working up detailed models with partners, the financial impact will be a key consideration. It is too early to quantify the impact at this stage of the programme therefore there are no financial implications identified yet for the Council. The cost of developing the models, and any financial implications within them, will be met by existing resources.
- 10.2 Specifically in relation to the Children's and Young People's work we are currently seeking to secure an additional £352,918 annually available from NHS England through the Future in Mind Transformation programme.

11. IMPLICATIONS FOR BUSINESS

11.1 In delivering mental health services Local Authorities are keen partners – and the Like Minded Strategy aims to take a Whole System view – ensuring new models of care take into account statutory responsibilities of all partners and current work to develop services.

12. RISK MANAGEMENT

- 12.1 The following key risks have been escalated by the programme team to the programme's Steering Committee and Mental Health and Wellbeing Transformation Board. The mitigating actions for which are discussed and agreed monthly.
- 12.2 *Risk 1:* We will not effectively engage with and take the population of North West London with us in supporting the Mental Health and Wellbeing strategy.

Action taken to minimise risk: Like Minded Communications plan being developed; Detailed stakeholder map developed; Like Minded page set up on Shaping a Healthier Future website; Social media used; Stakeholder engagement workshop took place and progress being made to develop engagement plan; Stakeholder newsletter regularly sent out to over 600 stakeholders providing an update on Like Minded progress.

12.3 Risk 2: The number of organisations (CCGs, Trusts, LAs, HWBBs) required to sign off key programme outputs adds complexity and could cause delays to the Programme timeline.

Action taken to minimise risk: Programme plan factors in individual organisation's timescales for sign-off; Transformation Board members to agree to locally drive and support sign off in individual organisations; Case for Change has been circulated to CCGs, Trusts, and is being circulated to HWBBs for endorsement by internal governance structures.

13. PROCUREMENT AND IT STRATEGY IMPLICATIONS

13.1 None identified

LOCAL GOVERNMENT ACT 2000 LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

No.	Description of Background Papers	Name/Ext file/copy	of holder of	Department/ Location
1.	None – all documents are in the public domain			

[Note: Please list <u>only</u> those that are <u>not</u> already in the public domain, i.e. you do not need to include Government publications, previous public reports etc.] Do not list exempt documents. Background Papers must be retained for public inspection for four years after the date of the meeting.

LIST OF APPENDICES:

Improving mental health and wellbeing in North West London Case for Change – a summary