From:	Graham Gibbens, Cabinet Member - Adult Social Care and Public Health
	Andrew Scott-Clark, Director of Public Health
To:	Adult Social Care and Health Cabinet Committee
Date:	11 September 2015
Subject:	Update on Live it Well - The Kent and Medway Mental Health Strategy – 2010 – 2015
Classification:	Unrestricted
Past Pathway:	This is the first committee to consider this report
Future Pathway:	N/A
Electoral Divisions:	All

#### Summary

To provide an update on progress for Members against the Live it Well Strategy 2010 – 2015:

To agree for the approach to the development of the next phase of a "Live it Well Strategy" for the next five years, given the changes to the NHS commissioning structures for mental health. The proposal in this paper is to develop a set of key principles which will link to local CCG strategies for Mental Health and enable coordination between NHS and KCC as well as other partners

This paper also proposes that the governance of this whole system mental health strategy is transferred to the Kent Health and Wellbeing Board.

#### **Recommendations:**

The Adult Social Care and Health Cabinet Committee is asked to:

i) Comment on the approach to develop a new and updated set of guiding principles for mental health commissioning, based on the previous Live it Well Strategy Commitments.

ii) Comment on the timescales for the development of the principles across the Kent health economy.

iii) Comment on and endorse the governance for Mental Health 'whole system' commissioning and the move to the Health and Wellbeing Board as per the timescales set out in the report.

iv) Agree that commenting on, or the direction of specific KCC Public Health and Social Care mental health decisions remain the business of this committee.

#### 1. Introduction

- 1.1 This paper presents the update on the Live It Well strategy for mental health and wellbeing for Kent. The Strategy was live from 2010 to 2015 and there has been an agreement to extend the life of the strategy to 2016 while the Kent health and well-being economy decide its next strategic direction. The strategy has 10 principles, described in this paper, and they broadly follow national guidance on responsible commissioning in mental health. However, since the strategy's development, there have been many commissioning changes and therefore Kent County Council and the seven CCGs are reviewing the outcomes in the current strategy with the aim of creating a framework that is more fit for purpose for 2016-2020.
- 1.2 The "Live it Well" strategy was presented to Members at the Adult Social Services Policy Overview and Scrutiny Committee on 30 March 2010. It set out a strategy for delivering Kent's mental health services for the next five years. The aim of the strategy is to promote good mental health and wellbeing in the community, reduce the number of people who have common mental health problems, and lessen the stigma and discrimination associated with mental ill-health.
- 1.3 "Live it Well" targets prevention at those at higher risk but also wants to make sure the right services are there when people need them. Services will be personalised, will involve service users and their families in equal partnership, will aid recovery and will help people reintegrate into their communities. They will promote the best care and promote accessible, supportive and empowering relationships. Wherever possible, services will be community-based, targeted towards primary care and close to where people live.
- 1.4 These attributes were decided following consultation with service users and carers. They said they wanted services that were local, personalised, timely and non-stigmatising. The "Live it Well" strategy fits well with the national policy "No Health without Mental Health"
- 1.5 The Kent Joint Health and Wellbeing Strategy sets five strategic outcomes to improve the health and wellbeing for Kent residents. Outcome four of that Strategy aims to support people with mental ill-health issues to 'live well'. These link closely but not exactly to the Live it Well strategy.
- 1.6 The Health and Social Care Act 2012 has provided a new structure for commissioning mental health services across Kent, with some services such as offender mental health services being commissioned by NHS England, with the majority of services transferring from Primary Care Trusts to the Clinical Commissioning Groups (CCGs). Since the development of the strategy the landscape has changed dramatically, along with new policies such as the Crisis Concordat.
- 1.7 *NHS Five Year Forward View*: published in 2014, the Forward View sets out a vision for the future of NHS. It contains ambitions to invest much more heavily in prevention, as well as closing the gap between physical and mental health services (parity of esteem).

- 1.8 The 2014 Care Act introduced major new duties for local authorities in relation to how they conduct assessments, the way they plan care and how they support carers.
- 1.9 Kent Public Health publish a Mental Health Needs Assessment which gives the 'whole system' overview and commissioning recommendations which feed into the Kent Joint Strategic Needs Assessment. The headlines for the last JSNA highlighted self-harm, adult personality disorder, eating disorders, access to psychological therapies and better data quality for severe mental illness.

# 2. Live it Well Strategy for Kent 2010- 2015

- 2.1 The strategy is based on 10 commitments, to be delivered during the lifetime of the five year strategy. These 10 commitments are:
  - Public services, the voluntary sector, and the independent sector will work together to improve mental health and wellbeing.
  - We will lessen the stigma, discrimination and unhelpful labelling attached to mental ill health and those using mental health services.
  - We will reduce the occurrence and severity of common mental health problems by improving wellbeing for more people at higher risk.
  - We will improve the life expectancy and the physical health of those with severe mental illness, and improve the recognition of mental health needs in the treatment of all those with physical conditions and disabilities.
  - We will reduce the number of suicides.
  - We will ensure that all people with a significant mental health concern, or their carers, can access a local crisis response service at any time and an urgent response within 24 hours.
  - We will ensure that all people using services are offered a service personal to them, giving them more choice and control.
  - We will deliver better recovery outcomes for more people using services with care at home as the norm.
  - We will ensure that more people with both mental health needs and drug and/or alcohol dependency (dual diagnosis) are receiving an effective service.
  - We will deliver more effective mental health services for offenders and those anywhere in the criminal justice system.

# 3. Outcomes Achieved 2015

Commitment	Review of Actions	
<ul> <li>Public services, the voluntary sector, and the independent sector will work together to improve mental health and wellbeing</li> </ul>	<ul> <li>The Live It Well website and social media accounts have been developed which work together to promote over 450 mental health and wellbeing services</li> <li>Organisations such as Kent Police are asking their front line officers to promote the website</li> <li>A community mental health and</li> </ul>	

			wellbeing service is being currently tendered across Kent in conjunction with CCG's
•	We will lessen the stigma, discrimination and unhelpful labelling attached to mental ill health and those using mental health services	•	KCC PH are rolling out both the Six Ways to Wellbeing campaign and Mental Health First Aid training to the community
		•	Kent County Council (as an employer) has also signed up to the Time To Change campaign designed to raise awareness of mental health in the workplace
		•	Kent CCG's have instructed all providers for NHS contracts 2015/16 to be working towards Mindful Employer status and to ensure all staff are MH awareness trained
•	We will reduce the occurrence and severity of common mental health problems by improving wellbeing for more people at higher risk	•	A series of psychological talking therapies (often referred to as IAPT services) are being delivered across the county
•	We will improve the life expectancy and the physical health of those with severe mental illness, and improve the recognition of mental health needs in the treatment of all those with physical conditions and disabilities	•	Mental health liaison services are now available in A&E departments. Hospitals are receiving support from mental health nurses and consultants in acute settings. CCG's are tasked with commissioning and providing high quality health care for people with long term conditions including mental health via health checks and pro- active care.
•	We will reduce the number of suicides	•	Despite the implementation of the 2010-15 Kent and Medway Suicide Prevention Strategy, the number of suicides per year has increased (particularly amongst men) and the Kent rate is now higher than the national rate
		•	A number of initiatives to targeting men's mental health (for example the Kent Sheds Project and mental health first aid) have been implemented and will form part of the 2015-20 Suicide Prevention Strategy
•	We will ensure that all people with a significant mental health concern, or their carers, can access a local crisis	•	The Kent and Medway Mental Health Crisis Concordat have been signed by over thirty organisations within Kent.

response service at any time and an urgent response within 24 hours	An associated Action Plan sets out a wide variety of measures which will improve how individuals suffering a MH crisis will be cared for and treated
We will ensure that all people using services are offered a service personal to them, giving them more choice and control	<ul> <li>The development of the Community Mental Health and Wellbeing Service         <ul> <li>offering non stigmatising, wraparound, social support and signposting will be commissioned in 2016</li> </ul> </li> <li>There are 99 accredited Brokers who have worked with 171 people to develop their individualised support plan during 2014-2015</li> </ul>
We will deliver better recovery outcomes for more people using services with care at home as the norm	Primary Care Community Link workers and specialist mental health workers are in place across the county to better support people in recovery
• We will ensure that more people with both mental health needs and drug and/or alcohol dependency (dual diagnosis) are receiving an effective service	<ul> <li>A Dual Diagnosis Protocol has been agreed between KMPT, KCC and substance misuse providers and is currently being embedded into practice and commissioning strategies</li> </ul>
We will deliver more effective mental health services for offenders and those anywhere in the criminal justice system	<ul> <li>A community offender's health needs assessment has been undertaken and highlighted the need for offenders to be given appropriate MH and substance misuse services. NHS England are the lead partners. Since the strategy was developed the commissioning arrangements for prisons and probation have changed considerably</li> <li>There is also considerable emphasis more recently on drug and alcohol services and Domestic Violence</li> </ul>

# 4. Progress to Date

- 4.1 There has been considerable progress with a number of these commitments. KCC, through Adult Social Care and Public Health, has made a contribution, either in a leading role or in supporting CCG colleagues, in many initiatives designed to deliver on these commitments.
- 4.2 There is a 'one stop' on-line resource called **Live it Well Website.** This has had increased investment and significant improvements made over five years, e.g. A revised search facility was launched in August 2013 so that information can be accessed by CCG area on the "Live it Well" website.

The new database of over 420 resources enables people to search under common mental health issues such as anxiety or depression. This website is a collaboration between KCC, CCGs and West Kent MIND and is the public focus of the "Live it Well" strategy. It provides easy access to extensive information about local mental health and wellbeing services, reducing the stigma that can be attached to mental health and connecting people to resources that can reduce the occurrence and severity of common mental health problems. It also hosts the Public Health Six Ways to Wellbeing campaign. The website was used by 76,802 people during 2013-2014 with 153,769 page views. Compared with 2014, 2015 saw 81,382 people using the website, with 215,381 page views, a 5.6% increase in people using the site and 40.07% increase in engagement in page views. The website is found at www.liveitwell.org.uk

- 4.3 Support from the Mental Health Matters helpline is now available 24 hours a day, 365 days a year. People feeling distressed, anxious or down, are able to call the Mental Health Matters helpline on 0800 107 0160. Support workers at the helpline use counselling skills to provide confidential emotional support and guidance, free of charge. They also have details of a range of self-help resources and local services. Between April 2014 and April 2015, there were a total of 15,939 calls countywide, compared to 2,078 calls for the same period in 2010. This represents a 667% increase in calls over a 5 year period.
- 4.4 The Live it Library is where service users, carers and professionals can tell their recovery stories. This is a collaborative project between KCC, Kent and Medway NHS and Social Care Partnership Trust. The library now contains over 60 'books' of personal stories. The project aims to challenge stigma, promote understanding, offer hope and enable people to talk about their experiences of living with mental health issues. The library has now successfully moved to the KMPT website <a href="http://www.kmpt.nhs.uk/live-it-library.htm">http://www.kmpt.nhs.uk/live-it-library.htm</a>.
- 4.5 The Live it Well strategy promotes personalisation, giving more choice and control to service users, There are now 99 brokers accredited by Signpost UK: an independent organisation that provides assurance that brokers will always act with probity and in service users' interests. These brokers have assisted KCC in having over 800 people receiving self-directed support. This service principle has been incorporated into the community mental health and wellbeing service.
- 4.6 KCC has contributed to the development of a protocol for services for those people with both mental health needs and substance misuse, to ensure services work together and people receive effective services. These have been backed up with promotion and training activities across all involved organisations in the statutory and independent sectors. An increased number of people accessed alcohol treatment in 2013-2014 whilst the number of people accessing drug treatment declined during the same period. A key area of concern is the higher than average proportion of people entering prison with substance misuse dependency that were not previously known to community treatment teams.

- 4.7 There has been a significant improvement in the access to psychological talking therapies with improved choice of providers. Investment has risen from £1.8 million in 2009/2010 to £6 million in 2013/2014. These services can be accessed through a GP referral or self-referral. During 2013/14 there were around 31,855 referrals to primary care talking therapies across Kent. Overall this is a success in Kent with South Kent Coast CCG being the 5th best access to therapy in England and having the 15th best recovery rates in the UK. West Kent CCG was the worst CCG 18 months ago but recent indicators show that they have now hit the national target.
- 4.8 CCGs have developed primary care mental health specialist roles in order to support people who have long term mental health conditions being discharged from secondary services back to primary care. The practitioners' role is to support the GP with improving their physical health such as smoking cessation, weight management, tackling malnutrition and substance misuse as well as ensuring they are managing their mental health and are linked into community resources.
- 4.9 In partnership with Public Health, Adult Social Care and the CCGs there has been a further investment of £500k into primary care with the establishment of the primary care community link worker service to all Clinical Commissioning Group (CCG) areas in the county of Kent, commencing 1<sup>st</sup> October 2013. This contract has been extended for a further 6 month period and will be incorporated into the new Community Mental Health and Wellbeing service from the 1<sup>st</sup> April 2016. The aim of the service is to provide individually tailored, one to one and time limited support to individuals with mental health needs to access community resources and to promote social inclusion. During 2014 2015 this resulted in:
  - 1581 people in contact with service this year
  - 1417 (89%) exits (successfully completed programme)
  - 49% presented with housing and/or benefits as an issue that impacted their mental health & wellbeing
  - 28% of referrals are self-referrals
  - 87% report higher confidence, self esteem
  - 70% state that they feel less isolated
  - 83% feel better able to manage mental distress
- 4.10 The vision for the community mental health and wellbeing, service which is currently being tendered, is to keep people well and provide a holistic offer of support for individuals living with mental health and wellbeing needs in Kent and to deliver support in line with national and local guidance and protocols. Everyone who experiences mental health needs has the right to individually tailored one-to-one support to engage in mainstream social leisure, educational, and cultural activities, in ordinary settings, alongside other members of the community who are not using services. The new approach will put a greater focus on outcomes and engage people in innovative ways to achieve these outcomes. Key aims of the service are to; aid recovery and prevent relapse, improve health and social care outcomes for individuals with poor mental health and wellbeing, prevent suicide and reduce the stigma associated with mental illness (parity of esteem), prevent

entry into formal social care and health systems, and prevent negative health outcomes associated with poor mental health.

- 4.11 The ways in which people are supported can be flexible, person-centred and can help people to make the best use of their community. Providers will help connect and empower communities as there is extensive evidence that connected communities are healthier communities. The service will ensure compliance with statutory responsibilities consistent and equitable across Kent (excluding Medway) providing the right advice, information and assistance to support people across the spectrum of severity. (The service will include the transition challenges faced by young people into adulthood). The model will be based on social inclusion using a community emotional wellbeing, mental health and recovery model and will deliver social interventions through the community to anyone needing mental health and wellbeing support in Primary Care.
- 4.12 Liaison psychiatry services based in Kent's general hospitals improve the quality of care for people attending or admitted with a mental health condition, prevent unnecessary admissions and reduce their lengths of stay. There was a 20% reduction in the number of people known to secondary care mental health services who attended Kent's emergency departments. There has been new investment from the CCGs to develop new models of services to support individuals and prevent a crisis through crisis cafes.
- 4.13 Access to a specialist mental health assessment has improved considerably over the last 3 years and there is now a single point of access for all referrals to secondary mental health services. Nationally there has been a significant rise in demand for acute mental health inpatient beds which has resulted in patients from Kent being admitted out of area when a bed is not available locally. The plan to reconfigure acute services has seen an increase in local beds and strengthening of crisis resolution home treatment services.
- 4.14 The Approved Mental Health Professional (AMHP) service was reviewed in 2012/2013. This saw the development of a new model of service in June 2014. This service is centrally managed with all referrals for Mental Health Act assessments being received, triaged and assessed. There has been a 13% increase in referrals to the Kent AMHP service from 2013-2014 to 2014-2015. Nationally the increase was 5%. Section 136 assessments account for over a third of Mental Health Act assessments in the last financial year.
- 4.15 More effective mental health services have been provided for offenders through a registered mental health nurse being in every police station 7 days per week 7.00am 9pm across Kent and Medway. No victim of a sexual assault aged 13+ has to wait no more than 1 hour for examination and assessment. Every prisoner across Kent and Medway has access to improving access to psychological therapies (IAPT) across Kent and Medway's prison estate, including Medway secure training centre and Cookham Wood young offender institute.

4.16 There were 182 suicides in Kent and Medway in 2013, an increase from 145 in 2012. In 2013, there were 36 suicides where an individual had had contact with KMPT in the last 12 months. Occupations such as construction, road transport drivers and agriculture have high rates over suicide in Kent over the last decade. The 2015-2020 suicide prevention strategy will: reduce the risk of suicide in key high risk groups; tailor approaches to improve mental health and wellbeing in Kent and Medway; reduce access to the means of suicide; produce better information and support to those bereaved or effected by suicide; support the media in delivering sensitive approaches to suicide and suicidal behaviour: support research, data collection and monitoring. A full report on the Suicide Prevention Strategy was presented to this Cabinet Committee in July 2015.

# 5. Development of Kent Wide Guiding Principles for Mental Health 2015-2020

- 5.1 The review of the Live it Well Strategy has been considered by each CCG and NHS England and Partners to assess the direction of travel for Mental Health Commissioning in Kent for the next 5 years.
- 5.2 Currently the commissioning responsibilities fall to a number of agencies: KCC is responsible for Social care and support, suicide prevention, mental health promotion and substance misuse and rehabilitation as well as duties under the Care Act. NHS England is responsible for Specialist Mental Health and Prison & Offenders. CCGs are responsible for Acute, Community and placements.
- 5.3 The 7 Kent CCGs have arranged their mental health commissioning to be organised via 3 co-ordinating Centres (The East Kent CCGs co-ordinated by South Kent Coast) and have by far the largest share of the Commissioning budget.
- 5.4 Due to the fact that all commissioning partners (NHS England, NHS CCGs) have their own priorities and strategies, they have agreed to work together with KCC to develop a set of shared 'principles' rather than share one overarching strategy. It has been agreed that the branding of "Live it Well" should continue for these principles.
- 5.5 There is little appetite to refresh one sole Mental Health strategy for all Kent commissioners. A better way forward, suggested by the NHS partners, is to use the Health & Wellbeing Board and its shared Health and Well Being strategy as the joint strategic approach. Outcome 4 of the Health and Well Being Strategy is for Mental Health and the strengthening of this outcome may be sufficient.
- 5.6 The review of the current Live it Well Strategy (by the NHS CCGs) has showed the current 10 strategic 'Commitments' were more similar to 'guiding principles' rather than clear, measurable, strategy objectives, and has also suggested that they be strengthened and updated to reflect current concerns e.g. Self Harm, Parity of Esteem.
- 5.7 The proposal is that a task and finish group be set up to agree a refreshed set of 'Principles' that all partners can sign up to, broadly similar to the 10 Live it Well Commitments described in this paper. However the principles will be

updated to reflect current Kent concerns and widely engage stakeholders, including KCC members.

- 5.8 Under a set of new 'Principles', each Commissioning agency e.g KCC, NHS England and NHS CCGs will publish their commissioning plans linked to Outcome 4 of the Health and Well Being Strategy for Kent. As the Live it Well branding is well known across Kent and fits with the Health and Well Being Strategy, it is proposed that this title is kept. CCG and NHS leads have agreed this approach.
- 5.9 KCC already has a Suicide Prevention Strategy, an Alcohol Strategy, and a commissioning plan for Community and Primary Care Well Being. A Drug Strategy is being developed and all fit under the objectives of Outcome 4 of the Health and Well Being Strategy for Kent.

#### 6. Governance

- 6.1 The current governance arrangements are that a report is presented to the Adult Social Care and Health Cabinet Committee on a yearly basis on the progress of the Live it Well strategy.
- 6.2 As this is a multi-agency approach to delivering mental health services, it is proposed to transfer the reporting of this and its updated 'principles' to the Kent Health and Wellbeing Board so that it becomes more strategically aligned to the Health and Wellbeing Strategy (Outcome 4).
- 6.3 Strategies that are specifically led by KCC and decisions required on elements of the Live it Well strategy (both Public Health and Social Care) will remain the business of the Adult Social Care and Health Cabinet Committee.

#### 7. Timescales

- 7.1 A set of new and updated Principles for Mental Health Commissioning to be developed and agreed by all partners (based on the 10 Commitments of the current Live it Well Strategy).
- 7.2 Any replacement key principles must be agreed across the whole mental health economy, with the following timescales.
  - Autumn 2015 public and stakeholder engagement and development of key principles – Public Health lead.
  - Winter 2015 preparation of a draft strategic framework for mental health commissioning Public Health lead.
  - Spring 2016 public consultation.
  - April 2016 formal adoption.

### 8. Recommendations:

The Adult Social Care and Health Cabinet Committee is asked to:

i) Comment on the approach to develop a new and updated set of guiding principles for mental health commissioning based on the previous Live it Well Strategy Commitments.

ii) Comment on the timescales for the development of the Principles across the Kent health economy.

iii) Comment and endorse the governance for Mental Health 'whole system' commissioning to the move to the Health and Wellbeing Board as per the timescales above.

iv) Agree that specific County Council Public Health and Social Care mental health decisions remain the business of this committee.

#### 9. Background Documents

*Live it Well: the strategy for improving the mental health and wellbeing of people in Kent and Medway 2010 – 2015.* 

#### 10. Contact Details

### • Lead Officers:

- Jessica Mookherjee, Consultant in Public Health 03000 416493
   Jessica.mookherjee@kent.gov.uk
- Sue Scamell, Commissioning Manager Mental Health 03000 415482
   <u>Sue.scamell@kent.gov.uk</u>

#### **Relevant Director**

Andrew Scott-Clark Director of Public Health 0300 333 5176 Andrew.scott-clark@kent.gov.uk

Penny Southern Director of Disabled Children, Adults Learning Disability and Mental Health 03000 415505 Penny.Southern@kent.gov.uk