

**MENTAL HEALTH – NEW HORIZONS CONSULTATION****RESPONSE BY KENT COUNTY COUNCIL**

**Cabinet Member – Graham Gibbens  
Lead Director – Steve Leidecker**

- 1) This response is built around the twelve consultation questions which have formed the basis of DH engagement with statutory agencies, voluntary groups, users and carers and the general public.
- 2) Kent County Council agrees with and supports the vision and strategy set out in New Horizons. The focus on self directed support, personalisation and tackling stigma in mental health is especially welcome. We also particularly endorse the key theme in New Horizons of promoting positive mental health for all and the collaborative working which this will require across public and private sector organisations and across all sectors of society. The significance of early intervention and targeted prevention is vitally important in developing effective mental health services and these themes are endorsed by the Council as part of our overall strategy on Adult Services.
- 3) Kent County Council believes that the three main challenges for mental health services are the profound demographic changes, the effects at least in the short to medium term of the current recession and the increasing perception of societal fracture and increasing levels of stress experienced by individuals and families. New Horizons takes a much broader approach to these problems than the previous National Service Framework and Kent believes that the emphasis on targeted prevention, health and wellbeing initiatives and recovery based services is the right one for the future.
- 4) We believe it is essential that housing and particularly specialised supported housing is seen as a vital part of a dynamic and effective preventative strategy. We believe that investment in appropriate housing and adaptations and improved access to social housing will provide better value for money in the longer term. Kent has developed a number of supported housing schemes with District and Borough Council partners as well as through Private Finance Initiatives. The emphasis on building thorough research evidence is welcome in many aspects of the vision but needs to be developed in relation to long term benefits of supported housing.
- 5) We welcome the focus on targeted preventative support, however we are mindful of the challenges associated with shifting resources away from current expensive service models where the demand within these services continues to increase. There is good evidence from within and outside the UK that investment in a range of new services including ‘talking therapies’ accessible through primary care and community settings is effective. In this regard we welcome the IAPT programme and its continued expansion. Social care services and investment in for example employment and

vocational advice need to build strong links with IAPT so there is a simple integrated approach within primary care with effective signposting.

- 6) The vision rightly identifies that mental health is everybody's business and emphasises the need for effective promotion of positive mental health. KCC supports this and believes that Local Authorities have a key role to play in delivering this through leadership across the public and private sectors.
- 7) We welcome the approach based on a public mental health framework and using this to address inequalities in mental health. The report clearly sets out the strong links between poverty and deprivation alongside the evidence that people with mental health problems have higher rates of preventable physical health problems and shorter life expectancy than the general population. In Kent we have a joint director of Public Health and a Public Health Observatory with strong links to PCT based health promotion teams. New Horizons further reinforces the need to work in close partnership under a unified strategy to develop better individual and community resilience and to reduce inequalities. Pathway redesign in, for example, stroke care needs to be sensitive to the particular problems that people with mental health problems might experience in accessing primary health care services.
- 8) We entirely support the guiding principles although we would further emphasise the importance of social inclusion in society and the broader values of social care associated with respect and dignity. We believe that mental health care generally needs to be more open and accountable. We also consider that it is very important to include principles of listening to and involving families and carers.
- 9) The focus on tackling stigma and discrimination and particularly for older people where the problems are compounded by 'ageist' attitudes is a fundamental part of ensuring that individuals do not become disconnected from their communities. Kent County Council recognises the role of local authorities in providing strong leadership and active engagement in both national and local campaigns. We have supported local voluntary group's initiatives as well as promoting local arts groups as a means of individual fulfilment and broader community awareness. However we recognise the need to do much more in this field with employers, local political institutions and community groups as the social determinants of mental ill-health become more and more obvious. We believe our support and funding to the voluntary sector and the vital role they can play provides a strong basis for extending our role and influence in this area.
- 10) We believe that a continued drive toward self directed support, direct payments and personalisation will ultimately redefine the nature of strategic commissioning and what is important from the service user perspective. However we recognise the workforce challenges with a professional culture that does not easily 'let go'. Whilst personalisation is clearly articulated for social care and beginning to be embedded in the new performance framework, this does not appear to be the case in the NHS. The Personal Health Budget pilots are welcome and East Kent PCT is part of this

programme with mental health as part of their proposals. However there needs to be more clarity on the national work on Payment by Results (PBR) and personalisation. The personalisation pilot sites in mental health social care provided insight and evidence on the value of individual budgets. However the sample was relatively small and more comprehensive research is required.

- 11) The effectiveness of various models whereby social care staff work in integrated teams with NHS staff in provider trusts is hampered by difficulties of incompatible electronic systems. This often results in wasteful dual entry. These problems are likely to be exacerbated if under a framework of New Horizons resources shift toward primary care. There needs to be more recognition nationally of these issues so that local solutions can be more effectively implemented.
- 12) The significance of improving access to employment and training, the role of vocational advisors and joint work with Job Centre Plus are all supported as key aspects of the vision and the recovery ethos Kent continues to invest in vocational advisors working very closely with Community Mental Health Teams and developing a mixed economy of job coaching and support arrangements through the Kent Supported Employment scheme and various voluntary sector providers. We need to do more with employers to assist them to manage stress in the workplace, combat stigma and set more of an example as a major Kent employer.
- 13) We believe there is a much wider scope for the use of innovative technology to support people with mental health problems. As part of KCC's personalisation agenda we will extend on line self assessment. We have developed a web based healthy living site with links to local services hosted by a third sector organisation. We are a site for the DH Whole Systems Demonstrator and people with dementia are benefiting from Telehealth and Telecare services. As part of this we have established a peer support group which could be extended to mental health users. We are also introducing the Kent Card as part of our performance lead approach to doubling the number of direct payments in mental health services during the current year.
- 14) We recognise the significant issues to improve transition from child and adolescent mental health services to adult services and the critical issue that mental health services must work with families and not just individuals. There are complex issues of eligibility, service boundaries and the legal framework with which this cluster of services operate.
- 15) The Total Place initiative is relevant to the vision and the ambition of New Horizons. We consider that more cross reference to this and local regeneration strategies could be helpful in ensuring the success of New Horizons.

16) KCC supports the overall approach in New Horizons. We recognise that local government has a key role in this - equally success will also depend on creating a genuine shared vision across all NHS organisations as well as other partners. We believe that some of the building blocks in Kent are in place for this with a detailed JSNA, collaborative joint commissioning arrangements, a responsive third sector and a commitment to evidence based outcome led services with examples of excellence across the health, social care and independent sectors. There is also a political will within KCC to change and develop mental health services. However the scale of the transformation and delivery of the vision on the ground represents a considerable challenge at a time when financial resources will be much tighter and no new resources will be available.