Approaching good mental health in Harrow.

Health and Wellbeing Board November 2020

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- 2. Policy context
- 3. A broad approach to MH across the Life Course
- 4. Schools and young people
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Burden of mental ill-health



- 1:4 adults Common Mental Health Disorder
- 50% of long-term mental health problems emerge by the age of 14
- 30,000 people with a Common Mental Health Disorder, most <65 years
- 13,000 people registered with depression
- 2,800 people registered with a Serious Mental Illness.
- Approximately 1:8 children (5-19) have at least one mental disorder
- 20% of 10-19 year olds say they need mental health support or know someone who does

Poor mental health is correlated to similar population characteristics as severe infection with Covid – 19;

Age, occupation, long term conditions, and of great relevance to Harrow, BAME (refugee/asylum seekers, and Somali, Afghan, Tamil populations)

Covid-19



Impact of Covid19 on mental health service delivery

- Nationally the reported rates for people experiencing depression, anxiety and mental distress is double what they were at the same point last year
- However in March 2020 across the country there were 220,000 fewer referrals for psychological therapy services than in 2019
- In July, NHS data indicated CAMHS receiving the largest number of referrals on record
- Young Minds survey of children with a history of mental problems reported that 32% had much worse MH
- Kooth (digital provider) reported 58% increase in activity compared to the previous year
- Between 2020 and 2029 we could expect the following increases, an extra 1,400 people with a Common Mental Health Disorder (to 28,000), and an extra 1,300 on the CPA (to 16,300)

Harrow mental health services need to adapt and plan for this new deterioration in people's wellbeing across the wider population

Policy context



- Policy history leading to the 2019 NHS Long Term
 Plan and the ambitions of the Five Year Forward View:
 - Perinatal Mental Health,
 - Children and Young People's (CYP) Mental Health,
 - Adult Common Mental Illnesses (IAPT),
 - Adult Severe Mental Illnesses (SMI) Community Care,
 - Mental Health Crisis Care and Liaison,
 - Therapeutic Acute Mental Health Inpatient Care,
 - Suicide Reduction and Bereavement Support,
 - Problem Gambling Mental Health Support,
 - Rough sleeping Mental Health Support.

2020 in Harrow:

- Health and Wellbeing Strategy
- Harrow Borough Plan
- Out Of Hospital / Recovery Plan and integrated care

A broad approach to Mental Health across the Life Course



Tier 4 and 5 Tertiary,
Specialist & Acute services

Tier 3 Secondary
Community Mental Health
Services

Tier 2 Primary Care

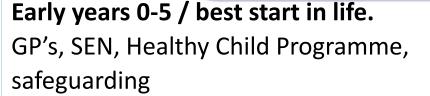
Indicated Tier 1 Individual support / targeting those with symptoms

Selective / Early help for people in groups, demographics or communities at risk

Universal for everyone where there is an opportunity such as schools or workplaces

Health and care system

Prevention



Children and young people 6-19 / education and development.

CAMHS, Educational Psychologists, Childrens social care, Substance Misuse, Sexual health, transition

Adults 25-64 / risk, work, parenting.

Adult social care, primary care pathways,

early intervention in psychosis, work programme, suicide prevention, workplace wellbeing, carers

Older people / physical health, housing.

Dementia, LTC, social isolation, financial exploitation, transition

Schools



- Good social, emotional and mental well-being are the basis of adopting healthy behaviours and preventing mental health problems.
- Schools have identified areas of focus such as training for staff, mental health & well-being policies and access to specific workshops, for example resilience programmes and parent workshops.
- A whole school approach recognises that a pupil's well-being is impacted by aspects of school life beyond learning and that schools are not only there to provide targeted support for vulnerable individuals.
- Harrow has been successful in their application to be part of the 2020-2021 waves of the NHSE Mental Health Support Teams in schools
- A complex picture of provision for young people...

Provision for young people



LA & CCG Commissioned

- 1. YOT CAMHS Worker
 - 2. Harrow Horizons
- 3. Children Looked After Health Assessment inc mental health assessments

London North West -

- **1.** Community Eating Disorder Service
 - 2. Crisis & Urgent Pathway

Vol Sector Commissioned

- 1. Heads Up Project inc LGBT, ADHD & Autism, Refugee & Asylum Seekers
 - 2. WISH Self Harm
 - 3. Harrow Young Carers

LA Commissioned

- 1. Children & Young Adults with Disabilities Service
 - 2. Early Support Team
 - 3. Youth Offending Team
- 4. Educational Psychology Service
 - 5. Social care Early Intervention/Child in Need
- 6. Health Visiting/School nursing
- 7. Assessment & Review Service

Children & Young People

who are GP registered, educated or residents of

Harrow

CCG Commissioned

- 1. CAMHS inc Specialist LD/ND CAMHS
 - 2. Kooth Online counselling
- 3. Youth Justice Liaison Diversion worker
- 4. Learning Disabilities SW
- 5. Child Well-being Practitioners

Schools Commissioning

- 1. School Counsellors
- 2. Harrow Horizons Enhanced Service
- 3. Emotional Literacy Support Assistant Programme

Public Health Commissioned

- 1. Mental Health First Aid in Schools
- 2. Healthy Schools London

Mapping services to the Thrive Model



- Early support hubs
- School provision
- Educational Psychology service
- Young Harrow Foundation
- Harrow Young Carers
- Heads Up
- MHST

- CAMHS
- Inpatient
- Youth Offending Team
- Youth Justice Liaison and Diversion

Getting advice.

Signposting, self management and one off contact

Getting help.

Goals focused evidence informed and outcomes focused intervention

Prevention, Promotion, Thriving

Getting risk support.

Risk management and crisis response

Getting more help.

Extensive treatment

Kooth Harrow Horizons Heads Up MH ST

- CAMHS
- Community facing eating disorder service

Community Mental Health Services: Strategic review



Scope of Commissioning Review

- A. The efficiency and effectiveness of the current recovery pathway experienced by people with mental health support needs; and
- B. The extent to which both the Council directly provided and commissioned services maximised people's independence and social inclusion i.e.
 - The Bridge
 - Wiseworks
 - Look Ahead and Rethink Floating support services
 - 7 & 14/15 Kenton Road
 - Rethink Supported Housing
 - Family Carers
 - CNWL S75 Spot purchased placements
 - Personal budget allocation

Key Findings



Silo working by and within organisations –The absence of a whole system approach inhibits creative solutions

Provider services creating Dependency rather than enabling Independence- requires a transition from a building-centred focus to a person-centred focus to increase people's access to personalised support in their local community

Few people moving to their own home-needs a redesign of the supported accommodation portfolio and pathway to facilitate people achieving more independence

Lack of recognition of the full potential of the voluntary sector as a key strategic partner in the recovery and prevention pathway

Carers support - is the offer truly aligned with the principles contained within the Care Act 2014?

Interdependencies

- CNWL/PCN Community Hub model
- 2. Person-centred strength based community approach
- 3. Harrow Out of Hospital Strategy/Recovery Pathway
- 4. Integrated Care Partnership



Drivers for a New model of Community Support Services

- Creating a new holistic and sustainable whole system support offer co-produced with Harrow residents
- Maintaining people's health and wellbeing during the Covid pandemic from new ways of working
- Growing the service offer to begin to provide advice and support options for residents suffering mental ill health as a result of unemployment, financial stress or bereavement
- Maintaining a service offer to clients with high support needs in a virtual way
- Developing the provider position as part of a recovery/ resilience service model

Developing a Community Model



We start with the person

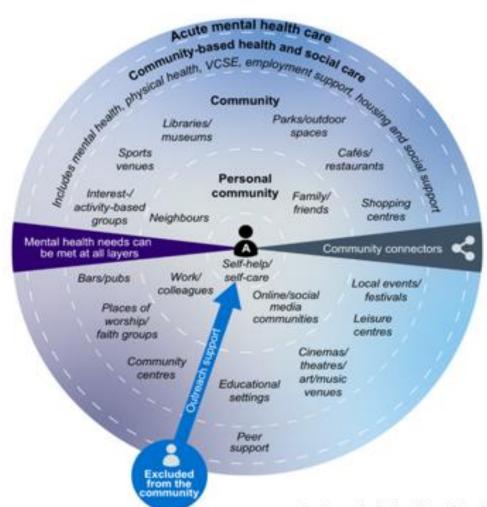


And co-ordinate the required support services at the right time and in the right place around them

Developing a Community Model



What does a whole system approach to mental health and well being look like?



The Commissioning Mental Health framework for adults and older adults (NCCMH September 2019)



The emerging Mental Health (MH) model in Somerset

Single Point of

Self referral

and/or referral

from professional

Access – senior and experienced MH professionals making appropriate assessments to flow patients to correct evel' at the start of the respective pathway

Stepping down and recovery

People step up and down between all levels as required, ensuring that least intervention is provided at the right and earliest time. A single point of access will be developed to support the flow of people entering and moving across the system

Promoting positive mental and emotional wellbeing (level 0)

Creating supportive and inclusive communities, identifying the social determinants of health and addressing, the resulting health inequalities, by building social capital and capacity.

Acute/Urgent Care including Home Treatment and inpatient beds (level 5)

Crisis interventions and urgent care support including home treatment, admission avoidance support services (e.g., crisis houses) acute Mental Health beds provided by specialist services

Emotional Wellbeing Support (level 1)

Community based Health interventions, including social prescribing, health coach informal networks, primary care MH support workers and peer support workers, physical Health checks, etc.

Specialist Therapies (level 3)

mmunity MH Services (level

Additional provision for those who exceed the IAPT criteria who would benefit from talking therapies at a more specialist level (e.g., CAT or DBT interventions)

Specialist recovery focused MH support for those with higher level MH needs including psychosis, severe depression, complex personality disorders, etc., active care-coordination provided by multidisciplinary community teams.

Timely support and early intervention -IAPT (level 2)

Talking therapies /IAPT core services, for anxiety and depression, increasing digital access, widening reach of services., Long Term Condition and symptom management provision streamlined within an integrated approach with physical health commissioning, including medically unexplained conditions.



Next Steps in Harrow

Establish

Establish a coproduction group with membership from all stakeholders

Redesign

Redesign of the community support service network as part of a whole system approach to recovery and resilience

Develop

Develop the OOH recovery pathway that provides a holistic response that enables people to safely transition from inpatients to their own home

Refresh of S75 Partnership agreement between Harrow Council & CNWL

Conclusion



- Mental health impacts all of us all of the time Understanding key risk points in life helps design the partnership response
- Universal awareness and promotion of mental health is essential

- Tiered provision for more acute needs should have clear pathways and access points
- Appropriate design starts by engaging the individual