## GOVERNING BODY

<table>
<thead>
<tr>
<th>Agenda Item No.</th>
<th>10</th>
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<tbody>
<tr>
<td>Reference No.</td>
<td>IESCCG 19-27</td>
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<tr>
<td>Date.</td>
<td>21 May 2019</td>
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<table>
<thead>
<tr>
<th>Title</th>
<th>Mental Health Way Forward</th>
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<tbody>
<tr>
<td>Lead Chief Officer</td>
<td>Richard Watson, Deputy Accountable Officer and Chief Transformation Officer</td>
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<tr>
<td>Author(s)</td>
<td>Richard Watson</td>
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<tr>
<td>Purpose</td>
<td>To note the progress made in turning the Mental Health and Emotional Wellbeing Strategy into reality and receive an update on the work we have underway with Alliance partners to develop and transform mental health and emotional wellbeing services.</td>
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### Applicable CCG Clinical Priorities:

<table>
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<tr>
<th>Clinical Priority</th>
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<tbody>
<tr>
<td>1. To promote self care</td>
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<tr>
<td>2. To ensure high quality local services where possible</td>
<td>X</td>
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<tr>
<td>3. To improve the health of those most in need</td>
<td>X</td>
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<tr>
<td>4. To improve health &amp; educational attainment for children &amp; young people</td>
<td>X</td>
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<tr>
<td>5. To improve access to mental health services</td>
<td>X</td>
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<tr>
<td>6. To improve outcomes for patients with diabetes to above national averages</td>
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<tr>
<td>7. To improve care for frail elderly individuals</td>
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<tr>
<td>8. To allow patients to die with dignity &amp; compassion &amp; to choose their place of death</td>
<td></td>
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<tr>
<td>9. To ensure that the CCG operates within agreed budgets</td>
<td>X</td>
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### Action required by Governing Body:

To note the progress made in turning the Mental Health and Emotional Wellbeing Strategy into reality and receive an update on the work we have underway with Alliance partners to develop and transform mental health and emotional wellbeing services.

To agree to release £300k to the Alliances to support the creation of the proposed team being brought together to provide further capacity to transform mental health and emotional wellbeing services.
1. **Background**

1.1. Ipswich & East Suffolk CCG (IESCCG) and West Suffolk CCG (WSCCG) (collectively the CCGs) commenced programmes of work in April 2018 to develop a Mental Health & Emotional Wellbeing Strategy and future model for mental health services. The development has been driven by:

1.1.1. increased integrated working with other services focusing on early prevention and intervention for mental health and emotional wellbeing

1.1.2. a need for systems to raise the profile and identify their contribution to improving mental health and emotional wellbeing

1.1.3. a shift in the focus and ongoing commitment to co-production

1.1.4. our main local mental health provider, Norfolk and Suffolk NHS Foundation Trust (NSFT), being rated by the CQC as ‘Inadequate’ for the third time

1.2. The Mental Health & Emotional Wellbeing 10 year strategy 2019-29 was approved by the Governing Body in January 2019 following significant engagement across the system.

1.3. The Mental Health & Emotional Wellbeing 10 year strategy 2019-29 includes; among others, the following principles:

1.3.1. Physical and mental health will be integrated - we will develop services which consider and support mental health and emotional wellbeing, physical health, long term conditions and the wider contributing factors of mental health and emotional wellbeing together.

1.3.2. Additional Investment - our future mental health and emotional wellbeing model needs to be sustainable, appropriately resourced and deliver care which is safe, effective and evidence based. This means that we will need to change the way that we work as a system, and develop increasingly integrated and innovative approaches.

1.3.3. Supporting the Workforce - the workforce within our system, including experts by experience, are our most valuable asset and the key to future success. The new model will require changes in approach and new developments. We wish to provide training and development opportunities for staff to facilitate these and to motivate our staff to build confidence and pride. Our staff will provide a compassionate and effective service that meaningfully integrates physical and mental health interventions. This may lead to different ways of working with partners to enhance service delivery. There will be system-wide learning opportunities that support the integration of the workforce and approaches to care that benefit service users.

1.4. Implementing a new model will have financial implications which is why investment is highlighted as one of the key principles in the strategy¹. If we are to move to a position whereby mental health is considered in line and alongside physical health historic funding priorities will need to shift.

1.5. The CCGs believe that, in order to achieve excellent mental health and emotional wellbeing, our vision for the population of east and west Suffolk is that everyone should get the right support, at the right time, from the right people, in the right place and in the right way.

1.6. Key features of this provision are as follows:

1.6.1. Place based commissioning and provision of MH - defining new ways of organising ourselves around ‘place’, outlined at three broad levels in Suffolk and North East Essex (SNEE) as Whole ICS footprint: population of 1 million; Alliance: East and West - population of 250-350k; and Locality: population of 50k

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¹ Draft East and West Suffolk - Mental Health & Emotional Wellbeing 10 Year Strategy 2019-29
1.6.2. System-wide Leadership and Culture - mental health being everyone’s business and engendering a culture of partners across Suffolk working together to integrate mental, physical and social care provision within our localities and Alliances

1.6.3. Early Help to build individual and community resilience - increased focus and investment on prevention and self-care

1.6.4. Developing the Primary Care & Community Mental Health Service - to develop a community-based mental health service model wrapped around primary care within localities and integrated as part of our Integrated Neighbourhood Teams. Increased specialist mental health support and expertise will be delivered into primary care and the community to improve timely access and intervention.

1.6.5. Mental Health Crisis System Model - the outline future model describes how system partners work together to prevent mental health issues escalating, whilst describing the core mental health functions of a 24/7 crisis system model including Crisis Resolution and Home Treatment Teams (CRHTT), Psychiatric Liaison Services, Police Triage and Early Intervention in Psychosis (EIP) and utilising the 111 service as the gateway into accessing mental health support

1.6.6. Integrated Children's Model (0-25 years) - to build on the Suffolk Children’s Emotional Health and Wellbeing Plan (Year 3) and Emotional Wellbeing Hub development to evolve a fully integrated children’s model across physical, mental health, education and social care.

1.7. This paper outlines the proposed next steps to turn the Strategy into action.

2. Moving Forward

2.1 Our proposals constitute a three-point plan:

Immediate improvements to quality, safety and access

2.2 The immediate priority is to improve the care that people receive. We must ensure the safety of our services; regain the confidence of service users, families and carers; and support Norfolk and Suffolk Foundation Trust (NSFT), its new leadership team and its hard-working and dedicated staff to ensure this happens as quickly as possible.

2.3 NSFT has in place a detailed Quality Improvement Plan to respond to the areas highlighted by the Care Quality Commission (CQC) and this includes short-term and longer-term actions to address immediate safety and quality issues and to ensure improvements are embedded throughout the Trust are consistent and sustainable way.

A new model for delivering mental health – delivering our Mental Health Strategies

2.4 Significant work is underway with a number of investments made including:

- £2.6m in Improving Access to Psychological Therapies & Long Term Conditions – to expand access to psychological support particularly for people with a long term condition such as diabetes, heart failure and COPD by March 2021 increasing the access rate from 19% to 25%

- £2.1m in the development of a Crisis Resolution and Home Treatment Team – development of 24/7 mental health crisis services enabling any resident to access support when they need it including home based assessment and support by March 2020
• £1m to improve Early Intervention in Psychosis services – enabling a bespoke Suffolk wide team that support residents who suffer from psychosis early and prevent crises by June 2019

• Dementia Together (£70,000), Survivors in Transition (£149,000), Suffolk MIND (£42,000), Amparo Suicide Liaison Service (£30,000), Living Life to the Full web support (£45,200), GP mental health education programme (£60,000) – a range of investments in the voluntary sector to provide bespoke support to local residents struggling with different mental health and wellbeing needs with services expanding or coming online by July 2019

• Early Adopter sites in Haverhill, Suffolk Coastal and Ipswich for developing and implementing a new primary care based integrated mental health service offer from autumn 2019

Finding the right integrated model that will continue to deliver improvements

2.5 The CCG is working closely with NSFT, West Suffolk FT (WSFT), East Suffolk and North Essex FT (ESNEFT), Suffolk County Council (SCC) and Suffolk GP Federation as our two Alliances alongside our co-production partners to develop the future model for Suffolk.

2.6 To enable this to happen we are proposing that we commence a process between June and November 2019 to further develop the model. The aim is that we would then start to mobilise any agreed model and service provision by September 2020.

2.7 This timeline is being supported by the development of a service specification which uses the Strategy as its base, clear profiles of all current mental health services and an understanding of the current mental health budget and workforce the CCG commissions. This base information is expected to be completed by early June 2019.

2.8 The Alliances will be continuing to work with our Co-Production partners to ensure we continue to hear the voice of staff and service users, their families and carers to continue to shape this work. Co-production partners are currently working up a costed proposal for how do this which will be ready by 20 May 2019.

2.9 To support this the Alliance have developed a proposal to bring together a small team seconded from within Alliance organisations lead by a full time Programme Director which is currently being recruited to. Both Alliances have prioritised this process for investment through the funding the CCGs are making available in 2019/20 and with this in mind there is an ask of the Governing Body to support the release of £200k to support the funding of this team during 2019/20.

2.10 If the Governing Body endorses the proposal above then an update paper will be brought to the September 2019 Governing Body and an outline proposed model brought through to the November 2019 meeting for decision.
3. **Next Steps**

3.1 Through the current CCG and Alliance Partners Group which meets every three weeks by the end of May the following needs to have been completed:

- Completion of mental health service summaries.
- Completion of draft new service specification.
- Confirmation of interim team being brought together to support the further development of the model.
- Confirmation of the co-production offer to support the further development of the model.

4. **Recommendations**

4.1 To note the progress made in turning the Mental Health and Emotional Wellbeing Strategy into reality and receive an update on the work we have underway with Alliance partners to develop and transform mental health and emotional wellbeing services.

4.2 To agree to release £300k to the Alliances to support the creation of the proposed team being brought together to provide further capacity to transform mental health and emotional wellbeing services.