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Supplementary Information for Scrutiny Board (Adults, Health and Active Lifestyles) Meeting on Tuesday 21st March 2023.

Agenda item 11 (Work Schedule) – Appendix 2 - Adults, Health and Active Lifestyles
Scrutiny Board. Working Group Summary: Leeds Mental Health Strategy 2020-2025.

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Scrutiny Board (Adults, Health & Active Lifestyles

Working Group Summary: Leeds Mental Health Strategy 2020-2025

For consideration: 21st March 2023





Adults, Health & Active Lifestyles Scrutiny Board

Leeds Mental Health Strategy 2020-2025

Background: Being a mentally healthy city for everyone is a vision set out in the Leeds Health and Wellbeing Strategy. To achieve this vision, a Leeds Mental Health Strategy (2020-2025) was developed and the Scrutiny Board agreed to hold a working group meeting to consider the current position surrounding the delivery of this Strategy, with a view to also identifying key areas that would potentially benefit from more focused scrutiny work during the 2023/24 municipal year. This meeting was held on 9th March 2023 and involved input from a range of health and care partner representatives. This summary note sets out the main issues and key conclusions arising from the working group's discussion for the consideration of the full Scrutiny Board.

Attendees: This working group meeting was attended by the following individuals:

BOARD MEMBERS:

Councillor Marshall-Katung (Chair)	Councillor E Taylor
Councillor C Anderson	Councillor E Thomson
Councillor S Burke	Dr J Beal—Co-opted Member, Healthwatch Leeds
Councillor N Harrington	

Apologies: Cllrs Farley, Gibson, Iqbal, Hart-Brooke, Kidger.

OTHER ATTENDEES:

Councillor Fiona Venner Executive Member for Adult and Children's Social Care and Health Partnerships	Liz Hindmarsh Programme Manager Transforming Community Mental Health, Leeds & York Partnership NHS Foundation Trust (LYPFT)
Tony Cooke Chief Officer Health Partnerships	Alison Kenyon Deputy Director of Service Development, LYPFT
Neil Maguire Delivery Support Lead, Health Partnerships Team	Eddie Devine Head of Mental Health Pathway Integration, Leeds ICB
Caron Walker Chief Officer Consultant Public Health	Dr Jamie Pick Clinical Director, LYPFT
Max Naismith Head of Service, Adults and Health	Sharon Prince Deputy Director Psychological Professions, LYPFT
Pip Goff Third Sector Representative	

Recommendation: The Scrutiny Board (Adults, Health and Active Lifestyles) is asked to consider the content of this summary note and endorse the key conclusions, including recommendations.

Adults, Health & Active Lifestyles Scrutiny Board Focusing on services for adults and public health services to monitor progress towards improving health, lifestyles and quality of care across the city; and providing oversight of integration and partnership working within and between the council and health bodies. The Board will also oversee the active lifestyle related functions and activity across the city.

Key Conclusions

1

The Leeds Mental Health Strategy (2020-2025) is for all ages and aims to ensure that activity across children's and adult services, across both prevention and treatment and in community settings and hospitals, can be better aligned and have the greatest impact on people's lives.

The Board welcomes the 2022 updated version of the Strategy which now reflects the impact of the pandemic on the city and includes new workstreams that focus on 'Covid Recovery', 'Transforming Community Mental Health Services' and 'Redesigning Crisis Services'

2

The Strategy signals that all organisations and sectors have a key role to play in achieving the overall vision of Leeds being a mentally healthy city for everyone. In supporting the passions, outcomes and priorities set out within the Strategy to achieve this vision, the Board has also been assured of the high level of attention and governance that is surrounding the delivery of this Strategy.

3

Different elements of the Strategy have mobilised at different rates at different times and for different reasons. Having the opportunity to engage with Senior Responsible Officers (SROs) and Implementation Leads linked to the Strategy has helped the Board to understand the key factors associated with how and why activity has progressed, but also where activity has stalled and what the general barriers or risks are that may prevent the realisation of success. Moving forward, it is recommended that the successor Scrutiny Board continues to closely monitor general progress during the 2023/24 municipal year.

4

The Strategy acknowledges that a third of people using mental health crisis services in Leeds had not been known to mental health services and that many of them would also be better served by community mental health services. Particular importance is therefore placed on health and social care systems scaling up the prevention offer, which is very much linked to the new workstream on 'Transforming Community Mental Health Services'. In recognition of the significant benefits to potentially arise from the Community Mental Health Transformation Programme, it is recommended that the successor Scrutiny Board also undertakes a more focused piece of work that aims to assist in the successful delivery of this programme.



Summary of Main Issues

Understanding the purpose of the Strategy

The Leeds Mental Health Strategy (2020-2025) is for all ages and therefore covers plans to improve mental health and wellbeing from conception through to end of life. It also makes clear the contribution that other policy areas, such as housing or community safety, make towards people having good mental health. While noting that there are also other strategies in Leeds that address the mental health of children and young people and the mental health of older people, Board Members noted that the intention of the Leeds Mental Health Strategy is not to replace these existing strategies and work programmes, but to provide a unified vision for mental health in the city. This means that activity across children's and adult services, across both prevention and treatment, and in community settings and hospitals, can be better aligned and therefore have the greatest impact on people's lives.

Updating the context to reflect the impact of Covid-19

Given that the Strategy was first developed and approved by the Leeds Health and Wellbeing Board before the start of the Covid-19 pandemic, it was subsequently reviewed and updated during 2022 to reflect the impact of the pandemic on the city.

Board Members therefore received the 2022 updated version of the Strategy detailing the three passions, five outcomes and eight priorities linked to achieving the overall vision of Leeds being a mentally healthy city for everyone (a one page summary is set out in Appendix 1). Given the changing context of the Strategy, particular attention was drawn to the three additional workstreams that had been added since 2020. These are focused on 'Covid Recovery', 'Transforming Community Mental Health Services' and 'Redesigning Crisis Services' and have important connections to all eight priorities as well as being vital ways in which to achieve the five outcomes and three passions.

Aligning governance and strategy delivery.

The Leeds Mental Health Strategy signals that all organisations and sectors have a key role to play in achieving its vision and as such, Board Members were informed and assured of the high level of attention and governance surrounding the delivery of this Strategy (a brief overview of the role and remit of relevant boards, groups and partnerships linked to the governance and delivery of the Strategy is set out in Appendix 2).

Board Members welcomed the opportunity to engage with Senior Responsible Officers (SROs) linked to the eight strategy priorities and also those with an Implementation Lead role relating to the three additional workstreams. It was noted that the SROs had recently undertaken a reflective exercise looking at the factors associated with how and why activity has progressed, but also where activity has stalled and what the barriers or risks are that may prevent the realisation of success. Taking each of the three workstreams in turn, Board Members received a brief overview of the key findings arising from this reflective exercise.



Summary of Main Issues

Rising demand and system pressures

The Strategy now recognises that the effects of Covid-19 (both the virus itself and the impact of multiple lockdowns) have been significant and had a worsening effect on existing mental health inequalities. Groups who were already at risk of poor mental health are more likely to have struggled during the pandemic, and may take longer to recover. It was also acknowledged that there are new groups of people where the pandemic has also directly impacted their mental health, which include frontline health and social care workers, people hospitalised by Covid-19 and people living with long Covid. As well as the impact of Covid-19, Board Members noted that feedback from Third Sector partners and communities is showing that the cost of living crisis is also significantly affecting people's mental health.

National mental health forecasting tools suggest that there will be an increase in common mental health disorders (anxiety and depression) of around 15-20% and that the impact will be felt over the next three to five years. It was reported that the number of local people now seeking help via IAPT services (Improving Access to Psychological Therapies) is already 20% higher than it was before the pandemic and that antidepressant prescribing has also increased.

As well as long waiting lists for IAPT services, other pressures in the system relate to a lack of appropriate housing and supported living services as this has a 'knock on' effect in that it prevents people being discharged from mental health wards, meaning that new people being admitted may need to be treated in settings outside Leeds. Board Members acknowledged that these 'delayed transfers of care' and 'out of area placements' often affect people with the most serious and enduring mental health problems and that unless such pressures are addressed, this will also continue to put a strain on already stretched resources.

The value of investing in prevention

Particular importance was placed on health and social care systems scaling up prevention in order to reduce pressures on mental health services. Board Members were informed that many of the individuals that turn up at mental health crisis services would often be better served by community mental health services. The data reported within the Strategy document also showed that a third of people using crisis services in Leeds had not been known to mental health services. It was therefore recognised that by having a more scaled up preventative offer in place, this would help to reduce the number of crisis and emergency attendances while also alleviating the need for costly and disruptive out of area placements.

However, given that national funding for mental health has never equalled that of physical health, it was acknowledged that the ability to resource such preventative measures continues to be a major challenge. However, Board Members were informed that work is being undertaken through the Mental Health Partnership Board to explore opportunities to further maximise the use of existing resources.



Summary of Main Issues

Supporting the workforce

Board Members acknowledged that the Health and Social Care workforce - GPs, social workers, Third Sector workers and teachers, are often the first practitioners that people approach when they have a mental health problem. It was therefore recognised that having a mentally healthy and well-trained workforce is central to being able to achieve the vision of Leeds being a Mentally Healthy City for everyone. Importance was therefore placed on supporting them to maintain their own mental health and wellbeing, particularly given limited resources and increasing levels of need.

Improving access to information and referral processes

The need to scale up the prevention offer was also linked to improving access to information and referral processes. When people seek help for a mental health problem, it is important that they are able to access information and support quickly and not be kept on a waiting list. However, despite the significant level of work undertaken to improve local mental health provision, it was reported that many people do still struggle to find information about how to access mental health support and find the mental health system difficult to navigate.

Board Members were therefore pleased to note that the current Strategy is now very much focused on addressing this particular issue through the new workstream on 'Transforming Community Mental Health Services'.

Community Mental Health Transformation Programme

Board Members were informed that the Community Mental Health Transformation Programme seeks to create a radical new model of joined-up primary and community mental health services that respond to local people's needs. This model has been co-designed with all partners and people with lived experience and aims to remove barriers so that people can access care, treatment and support as early as possible and live as well as possible in their communities.

With the model now endorsed, Board Members were pleased to learn that work is now underway to mobilise new community mental health hubs to the first three early implementer areas, with a view to mobilising to the remaining Local Care Partnership areas by the end of 2023.

However, it was also noted that a particular factor that may hinder progress with this work is around the ability to share information across different organisations/clinical information systems to allow true integrated working. Another key factor is around a general lack of capacity to roll this out at the pace required and with the available workforce. In recognition of the significant benefits to potentially arise from this Programme, it was felt that a more focused piece of scrutiny work in the new municipal year would be warranted in terms of assisting with its successful delivery.

Summary of Leeds Mental Health Strategy 2020-2025

Our Vision:
Leeds will be a
Mentally Healthy
City for everyone

Workstreams

1. COVID-19 Recovery
2. Transforming Community Mental Health Services
3. Redesigning Crisis Services

3 Passions: areas for improvement

1. Reduce mental health inequalities
2. Improve children and young people's mental health
3. Improve flexibility, integration and compassionate response of services



8 Priorities: focusing our attention

1. Target mental health promotion and prevention within communities most at risk of poor mental health, suicide and self-harm
2. Reduce over-representation of people from Black, Asian and minority ethnic communities admitted in crisis
3. Ensure education, training and employment is more accessible to people with mental health problems
4. Improve transition support and develop new mental health services for 14-25 year olds
5. Ensure all services recognise the impact that trauma or psychological and social adversity has on mental health. This includes an understanding of how to respond to adverse childhood experiences and embedding a 'Think Family' approach in all service models
6. Improve timely access to mental health crisis services and support and ensure that people receive a compassionate response
7. Ensure older people are able to access information, support and appropriate treatment that meets their needs
8. Improve the physical health of people with serious mental illness



5 Outcomes: starting with people

1. People of all ages and communities will be comfortable talking about their mental health and wellbeing
2. People will be part of mentally healthy, safe and supportive families, workplaces and communities
3. People's quality of life will be improved by timely access to appropriate mental health information, support and services
4. People will be actively involved in their mental health and their care
5. People with long term mental health conditions will live longer and lead fulfilling, healthy lives

Role and Remit of the Boards, Groups and Partnerships



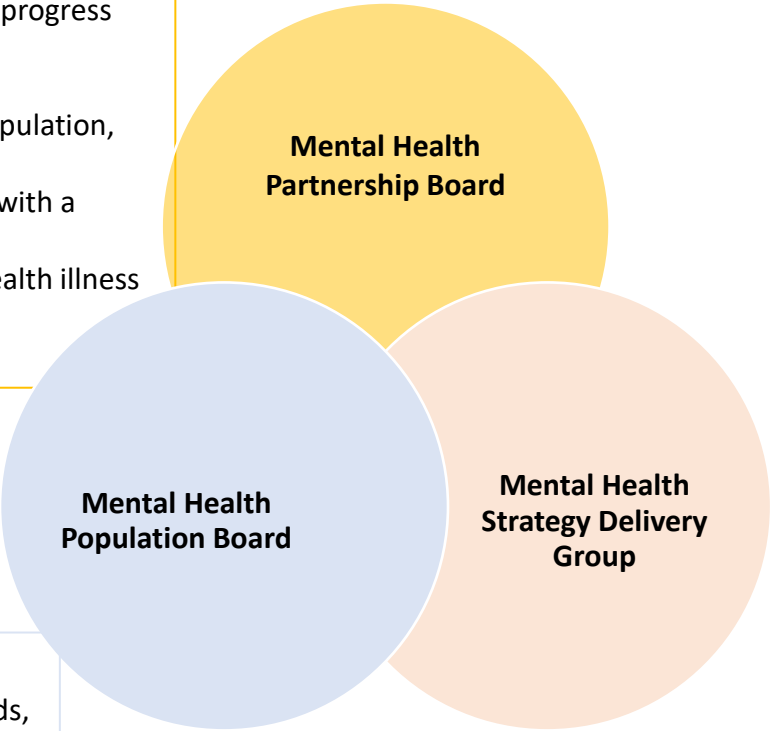
Mental Health Partnership Board Role

Governs the implementation of the All Age Mental Health Strategy receiving assurance and acting as a critical friend to the Strategy Delivery Group on progress against the 8 priorities.

Support the Population Boards in making decisions for their respective population, acting as 'critical friend'. This specifically includes, but not limited to:

- Mental Health Board – mental wellbeing for the population of Leeds with a specific focus on those with severe mental illness
- Healthy Adults Board – wider prevention agenda, low level mental health illness
- Maternity Board – perinatal mental Health
- Frailty Board - dementia

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Mental Health Population Board Role:

Improve the **outcomes, experience, and value of NHS spend** in Leeds, taking action to reduce health inequalities, for those with serious mental illness.

Acting as an 'expert reference group' supporting the other population boards in supporting people with mental health challenges in their population to stay mentally and physically healthy

Mental Health Strategy Delivery Group Role:

Enable the development of and provide assurance on the delivery of 8 priorities within the Leeds Mental Health Strategy, overseeing progress towards achieving the outcomes and measures.

Identifying where there may be resource requirements and pressures, identifying mitigating action and where appropriate escalating to Population Boards.

More information about Leeds City Council's Scrutiny Service, along with the activity and membership of individual Scrutiny Boards, can be found on the Council's committee webpages.

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