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Report of: Health Improvement Principal - Mental Healthcare and Learning

Disabilities

Report to: Director of Adults and Health

Date: 22/4/20

Subject: Addressing the over representation of BAME communities detained via the Mental Health Act. A whole-systems approach

Are specific electoral wards affected?		☐ No
If yes, name(s) of ward(s):		
Wards with a higher population of Black Asian and Minority Ethnic Communities are more likely to be positively affected by this work.		
These include: Chapel Allerton, Gipton and Harehills, Roundhay, Beeston & Holbeck.		
However, the work programme is city wide.		
Has consultation been carried out?	⊠ Yes	□No
Are there implications for equality and diversity and cohesion and integration?	⊠ Yes	□No
Will the decision be open for call-in?	⊠ Yes	☐ No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number:	☐ Yes	⊠ No
Appendix number:		

Summary

1. Main issues

- Within Leeds, as elsewhere in the country, people from Black, Asian and other minority ethnic (BAME) communities are more likely to be detained under the Mental Health Act than White counterparts.
- Reducing the over-representation of BAME groups assessed and detained via the mental health act is a priority in the Leeds Mental Health Strategy (2020 – 2025) and a key performance measure in the Leeds Health and Care Plan
- Leeds City Council, Leeds & York Partnership Foundation Trust, Leeds Community Healthcare, and Forum Central are working with a national organisation (The Synergi Collaborative Centre: www.synergicollaborative.org.uk) to take a wholesystems approach to addressing the issue. 'Synergi' are funded by the Lankelly Chase Foundation to provide coaching, facilitation and subject expertise on this issue nationally. As such, Leeds is involved in a wider network with other urban areas including Manchester, Birmingham and London.

The research undertaken by the Synergi collaborative indicates that previous attempts to address this inequality have not been successful because they have not addressed the whole social, health and economic system, or involved - in a meaningful way - people with lived experience of serious mental illness. It is also suggested that fear of addressing racism leads to individual and system-level inertia.

To support a whole systems approach, and to develop innovative approaches, Leeds CCG have committed to transfer £100,000 on an annual basis to Leeds City Council. This money will be used to fund a post, hosted within Public Health, and to develop a local grants programme. The post holder will: work across the lifecourse (focus on 16 years and upwards initially), develop a Leeds network; engage providers and strategic partners; and manage and evaluate the grants programme. Partners who sit on the local Synergi partnership group have been consulted about this arrangement and agree that it is a positive approach for the city to take.

2. Best Council Plan Implications (click here for the latest version of the Best Council Plan)

- This work programme supports the priorities: 'Health and Wellbeing', 'Safe, Strong Communities' and 'Child Friendly City'
- The work explicitly focusses on addressing health inequalities and improving the health of the poorest the fastest the first action within 'Health and Wellbeing'
- It aims to do this by focussing on reducing the risk of severe mental illness in vulnerable groups. This aligns with the following actions in the Best Council Plan under **Safe, Strong Communities:**
- Being responsive to local needs, building thriving, resilient communities and Promoting community respect and resilience
- It also supports the Child Friendly City priority specifically through the grants, which will involve improving the social emotional health and wellbeing of young people

3. Resource Implications

The post is fully funded by the £100,000 CCG funding provision, this funding will be part of an S256 agreement with Leeds CCG.

Recommendations

The Director of Adults and Health is recommended to note the contents of this report and to approve the following:-

- a) That the committee/Director of Public Health note the partnership arrangements and transfer of funding from Leeds CCG to a value of £100,000 per annum on a recurrent basis.
- b) Approval to recruit to a PO4 post on a permanent contract

1. Purpose of this report

1.1 To seek approval for Public Health (Adults and Health) to receive £100,000 per annum on a recurrent basis from Leeds CCG.

- 1.2 To highlight how this money will be used
- 1.3 To seek broad support for the programme/partnership work
- 1.4 To seek approval to recruit to a PO4 post on a permanent contract

2. Background information

- 2.1 Within Leeds, as elsewhere in the country, people from Black, Asian and other minority ethnic communities are more likely to be detained under the Mental Health Act than White counterparts.
- 2.2 Reducing the over-representation of BAME groups assessed and detained via the mental health act is a priority in the Leeds mental health strategy and a key performance measure in the Leeds Health and Care Plan
- 2.3 Leeds City Council, Leeds & York Partnership Foundation Trust, Leeds Community Healthcare, and Forum Central are working with a national organisation (The Synergi Collaborative Centre) to take a whole-systems approach to addressing the issue. 'Synergi' are funded by the Lankelly Chase Foundation to provide coaching, facilitation and subject expertise on this issue nationally. As such, Leeds is involved in a wider network with other urban areas including Manchester, Birmingham and London.
- 2.4 To support a whole systems approach, Leeds CCG have committed to transfer £100,000 on a recurrent, annual basis to Leeds City Council. This money will be used to fund a post, hosted within Public Health, and to develop a local grants programme. The post holder will work across the lifecourse (focus on 16 years and upwards initially), will develop the Leeds network and manage and evaluate the grants programme. Partners who sit on the local Synergi partnership group have been consulted about this arrangement and agree that it is a positive approach for the city to take.

3. Main issues

- 3.1 Previous attempts to address inequalities in the risk and consequence of serious mental illness, as they relate to Black Asian and Minority Ethnic communities, have not been successful. It is suggested that this is because they have not addressed inequality across the whole social, health and economic system, or involved in a meaningful way people with lived experience. It is also suggested that fear of addressing race and racism leads to individual and system inertia, and that services are discriminatory.
- 3.2 The approach taken in Leeds, in partnership with Synergi focusses on inspiring change, working across the whole health and social care system and putting service user voices at the centre of new actions.

4. Corporate considerations

4.1 Consultation and engagement

4.1.1 The development of the work programme is based on over 2 years development work with the third sector, engagement with service users/carers and strategic partners

4.1.2 Consultation has also taken place with the Executive Member for Health, Wellbeing & Adults, and the Director of Public Health

4.2 Equality and diversity / cohesion and integration

- 4.2.1 This project explicitly focusses on addressing inequality and supporting minority ethnic communities in Leeds.
- 4.2.2 An equality, diversity cohesion and integration screening has been completed. A full assessment is not required as consideration of positive effects on equality and diversity have been considered throughout developing this work programme

4.3 Council policies and the Best Council Plan

- 4.3.1 This work programme supports the priorities: 'Health and Wellbeing', 'Safe, Strong Communities' and 'Child Friendly City'
- 4.3.2 The work explicitly focusses on addressing health inequalities and improving the health of the poorest the fastest the first action within 'Health and Wellbeing'
- 4.3.3 It aims to do this by focussing on reducing the risk of severe mental illness in vulnerable groups. This aligns with the following actions in the Best Council Plan under Safe, Strong Communities:
- 4.3.4 Being responsive to local needs, building thriving, resilient communities and Promoting community respect and resilience
- 4.3.5 It also supports the Child Friendly City priority specifically through the grants, which will involve improving the social emotional health and wellbeing of young people

Climate Emergency

- 4.3.6 The post holder will be primarily based at LCC/Merrion House where active travel is supported through provision of cycle storage and bus passes.
- 4.3.7 Consideration of climate issues will be included in the criteria for the community grants programme.

4.4 Resources, procurement and value for money

- 4.4.1 The broad work programme aims to move care out of acute services and into community settings. It also aims to reduce the risk of severe mental illness. Both of these outcomes will reduce spend overall, in the Leeds system
- 4.4.2 The funding provides significant value for money as it will co-ordinate and support development of new activity across the whole health and social care system.
- 4.4.3 The whole programme takes a lifecourse approach and the post holder will matrix work with Children and Families team/work programme in order to ensure national learning is communicated locally across both adult and children's services.

4.5 Legal implications, access to information, and call-in

- 4.5.1 As the value of this decision is expected to be £100,000 on a recurrent basis this decision is a key decision and is subject to call in. The decision commits the Council to an ongoing commitment in which case the value is assessed on an annual basis in accordance with Article 13 Decision Making process. There are no grounds for keeping the contents of this report confidential under the Access to Information Rules.
- 4.5.2 This post will be recruited to on a PO4 band following the Council's formal recruitment policy, this post is fully funded by the CCG it will be advertised to Leeds City Council staff along with NHS staff via NHS jobs to ensure equity, LCC shortlisting and selection processes will be followed

4.6 Risk management

4.6.1 If the CCG funding ceases there is a risk to the Council which may result in the post holder being eligible to enter the managing staffing reductions at the end of the contract, any potential redundancy costs will be covered by the £100,000 annual monies transferred from the CCG.

5. Conclusions

- 5.1 Addressing the over-representation of BAME groups admitted via the mental health act requires a whole-systems approach.
- 5.2 Having additional capacity and resources to underpin the strategic commitment to this priority (made as part of the Leeds Mental Health Strategy) will enable Leeds to go further-faster in addressing this inequality...

6. Recommendations

The Director of Adults and Health is recommended to note the contents of this report and to approve the following:-

- 6.1 That the committee/Director of Public Health note the partnership arrangements and transfer of funding from Leeds CCG to a value of £100,000 per annum on a recurrent basis.
- 6.2 Approval to recruit to a PO4 post on a permanent contract.

7. Background documents¹

None.

8. Appendices

¹ The background documents listed in this section are available to download from the council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

Appendix 1: Briefing Document Creative Spaces Event

Appendix 2: Programme – Organogram

Appendix 3: Equality, Diversity, Cohesion and Integration Impact Screening