

Adult Mental Health Strategy 2021

Supporting information

NHS Sunderland CCG
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Making mental health services work better in Sunderland

NHS Sunderland CCG aims to ensure **Better Health for Sunderland**, and that the local NHS improves health and wellbeing in the City, supports us to keep mentally and physically well, to get better when we are ill and, when we cannot fully recovery, to stay as well as we can to the end of our lives.

Mental wellbeing is fundamental to achieving a healthy, resilient and thriving population and in Sunderland; we would like to create a strategy for mental health in the City.

How mental health services currently look

Sunderland CCG commission a range of partners from various sectors including acute, community and voluntary to deliver mental health services to the residents of Sunderland.

Providers from the NHS and Voluntary, Community and Social Enterprise (VCSE) sector work in partnership to deliver a number of services across Sunderland which includes:

- Crisis services
- Psychiatric Liaison services with the Emergency Department
- Affective Disorders
- Counselling and Improving Access to Psychological Therapies (IAPT)
- Inpatient units and beds
- Learning Disabilities and Autism Services
- Memory Protection and Dementia services
- Adults with Serious Mental Illness
- Perinatal mental health
- Children and Young People's Mental Health Services (CYPS)
- Suicide reduction and bereavement
- Street Triage
- Early Interventional Psychosis
- Community Older People's Mental Health Services
- Rehabilitation services
- Autism diagnosis and inpatient services

Over time, mental health services have undergone significant transformation. In Sunderland, this transformation led by Cumbria, Northumberland and Tyne and Wear NHS Foundation Trust (CNTW) under the Principle Community Pathways transformation programme has seen a significant shift in care delivered through a series of pathways which do not distinguish between community and inpatient care.

Why do we need to change

As a City, we find ourselves at a point when we need to reflect on the national policy changes and determine our local priorities for mental health going forward, particularly with

the emergence of Primary Care Networks (PCNs), work with Sunderland City Council and wider partners through ATB and more recently the impact of COVID19 on our population.

Mental health and wellbeing is a key priority within the draft Sunderland Healthy City Plan. At a time when resources are limited, we need to ensure that we can meet the demands on our services and develop pathways which are sustainable and improve outcomes for patients, in-line with national guidance and priorities.

At a most opportune time and aligning with the development of our local mental health strategy, substantial national funding is to be made available to transform how community mental health services are delivered. This is an exciting and rare opportunity to significantly redesign models of care for adults and older people to ensure their needs are met.

We are aiming to:

- Understand what is important to citizen, patients/service users and their families about mental health and wellbeing to help inform future service and support.
- Understand from General Practice what is important to them in mental health services to help deliver improved outcomes for their populations.
- Ensure that services manage the transition of people through life stages, including the transition from childhood to adulthood and into old age.
- Achieve the national requirements set out in the Mental Health Five Year Forward View¹ whilst ensuring that we can shape services to meet local priorities at a more local level which is often termed as at 'Place'.
- Ensure that services have the capacity to deliver improved outcomes for service users in the face of increasing scale and complexity of need.
- Increase prevention, proactive intervention and build community resilience – helping citizens to improve their own wellbeing and that of their families/friends/neighbours
- Build on our approach of collaboration with our partners and communities to deliver improved outcomes
- Work alongside national policy direction to ensure that where we are able to influence, service designs to meet local need.

National policy – what can't we change

The nationally published NHS Mental Health Implementation Plan 2019/20 – 2023/24² provides guidance and direction around the provision of mental health services for both providers and commissioners. The plan indicates a range of key areas that commissioners must meet, and outlines whether there is a **fixed**, **flexible** or **targeted** approach to be taken to ensure delivery.

¹ <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>

² <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/07/nhs-mental-health-implementation-plan-2019-20-2023-24.pdf>

All **'fixed'** deliverables include national trajectories and targets which set a common delivery pace across the country, but does allow local systems the flexibility to tailor pathways, staffing mix etc. to meet the local needs. All **"flexible"** deliverables include those where we are able to alter the pace of delivery locally, taking into account system priorities and needs. **'Targeted'** deliverables only apply to services which are being established through targeted funding over the course of five years.

Service Provision	Delivery Approach
Specialist Community Perinatal Mental Health	Fixed/Flexible
Children and Young People's (CYP) Mental Health	Fixed/Flexible
Adult Common Mental Illnesses (IAPT)	Fixed
Adult Severe Mental Illnesses (SMI) Community Care	Fixed
Mental Health Crisis Care and Liaison	Fixed/Flexible/Targeted
Therapeutic Acute Mental Health Inpatient Care	Fixed/Flexible
Suicide Reduction and Bereavement Support	Targeted
Problem Gambling Mental Health Support	Targeted
Rough Sleepers	Targeted

It is the aim of the CCG to plan and deliver services as much as possible on a place based approach where we have the flexibilities outlined by the national team. In order to do so, involvement work with key stakeholders is vital to ensure we capture and reflect the requirements of our local population. In fact, this type of approach is promoted nationally and we are encouraged to engage and co-produce plans with local communities and people with lived experience of mental ill health and mental health services.

In 2015/16, NHS England introduced the Mental Health Investment Standard (MHIS) with the intention for commissioners to commit funding to improving and delivering high quality and timely mental health services going forward. Each CCG must ensure that their expenditure in mental health rises at a faster rate than their overall published programme funding to help address parity of esteem. In line with this, on an annual basis, commissioners are required to evidence how they have invested into services and met the standard, which is independently verified.

This increase in available resources provides the system with an opportunity to grow expenditure within mental health; however as the system is operating within limited resources in part it is hoped that this work will identify areas of reform, which can be used to improve value for money, create more sustainable services, and where possible release additional resource to reinvest in other services.

The categories in the MHIS reflect the areas outlined in the Mental Health Implementation Plan and describe the areas of focus within each category; these include:

- Children & Young People's Mental Health (excluding Learning Disabilities)
- Children & Young People's Eating Disorders
- Perinatal Mental Health
- Improved access to psychological therapies for people with common mental health problems (adult and older adult)
- A & E and Ward Liaison mental health services (adult and older adult)
- Early Intervention in Psychosis (EIP) team (ages 14 - 65)
- Adult community crisis (adult and older adult)
- Ambulance response services
- Community mental health, including new integrated models (adult and older adult, excluding dementia)
- SMI Physical
- Health Checks
- Mental Health Act 1983
- Suicide Prevention
- Acute Inpatient services (adult and older adult)
- Other adult and older adult - inpatient mental health (excluding dementia)
- Mental health prescribing
- Mental Health in continuing healthcare

Whilst we acknowledge the significant amount of national direction in place, where we have the flexibilities to do so, we are committed to ensuring that we deliver the most appropriate, high quality services which meet our local needs

As part of the North East and North Cumbria Integrated Care System, Sunderland CCG works in partnership with other NHS organisations, local councils and others, where we take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population we serve. The ICS work together to ensure that a joint approach is in place, where appropriate, to help our providers deliver the services we need at both a national and local directive.

Potential scope

Mental Health, Learning Disabilities and Autism services for adults and children have undergone significant change over the past 10 years. Within Sunderland, the Mental Health strategy provides the opportunity to understand from service users, citizens and stakeholders the key priorities for Sunderland.

Due to the breadth of services and a number of other key factors, the scope of the strategy needs to be considered to ensure that the strategy is effective in understanding the views of the Sunderland population and delivery of local and national requirements.

The suggested core scope of the strategy is:

- Adult mental health services (18 years onward, excluding children and adult Learning Disability and Autism services)
- Transition between children and young people into adult services
- Integration with Primary Care Networks and General Practice
- Community mental health services only (excluding inpatient units and bed-based services)
- Focus on major employers in the City
- Understanding from service users, carers, citizens, GP practices, and provider partners, what is important to them when it comes to mental health services in Sunderland

The strategy provides an opportunity to explore the importance of mental health and wellbeing in the city, in particular engagement with:

- Employers – do they recognise the importance of workforce wellbeing and what support is available
- Citizens and communities – what do they want from care and what do they want to do for themselves, and what support is available

The scope proposes to exclude children’s mental health services from the strategy as the City already has a comprehensive Children and Young People’s Mental Health and Wellbeing Plan³, developed by Together for Children (TfC). However, due to the importance of the transition of children and young people between services and adulthood, the **strategy will need to include the transition from CYPS to adult services to ensure minimal disruption to care.**

Inpatient units and bed based services are suggested as excluded from the strategy due to the commissioning arrangements, as too are LD and autism services. We do acknowledge however that all aspects of mental health care and support are intrinsically linked and due diligence will be given as needed to ensure that no cohorts of patients are disadvantaged in the development, implementation and monitoring of our mental health strategy.

³ https://www.sunderlandpartnership.org.uk/sites/default/files/files/page/cypp_final.pdf

Figure 1: Summary of potential scope for mental health strategy research

Included	Excluded
<ul style="list-style-type: none">• Adult mental health services• Transition between childrens and adults mental health services• Community mental health services• Integration between Primary Care and General Practice• Focus on major employers• Understand whats important to patients, public, and carers	<ul style="list-style-type: none">• Childrens mental health services• Learning disabilities and autism services• Inpatient units and bed based services

Engagement

Phase 1 – Thoughts on the scope

Although we had some initial thoughts about what the scope may be for this research, we wanted to make sure we listened to feedback from our colleagues and partner organisations.

Therefore, we held conversations with representatives from the following groups of people to work collaboratively to develop the scope:

- Clinical leaders
- All Together Better Programmes – P1, P2, P3, P4
- Together for Children
- Councillors
- Representatives from GP Practices
- STSDT
- Providers
- CAMHS Strategic Partnership
- Sunderland City Council

Phase 2 - Involving people

Interviews with key staff

Nine one-to-one interviews were held with a range of key staff, from the following organisations:

- Sunderland CCG Clinical Lead
- Providers – Sunderland Counselling Service
- Providers – Washington Mind
- Providers - CNTW
- Sunderland City Council – Adult Services
- Sunderland City Council – Public Health
- All Together Better
- Sunderland GP Alliance
- General Practice representatives

Questionnaires

- **Public survey** – this survey explored public perception of mental health services, including awareness of available services and access.
- **Service users and carers** – this survey explored experience of mental health services from a service-user and carer perspective.
- **Large employers** – a survey was circulated to large Sunderland employers to explore work-based mental health support.
- **Staff survey** – this survey explored the views from people who work with the service, to understand what works and what needs improving from a staff perspective.

Interviews and focus groups

A number of focus groups and interviews were held with Sunderland patients, residents, staff, and service users from VCSOs.

- Public focus group
- Male only focus group
- Interviews with service users
- Interviews with staff

VCSOs and Healthwatch were approached to run asset-based focus groups with their service users on our behalf. Two independent focus groups were also ran to engage with as many people as possible. The following focus provided feedback for the report:

- African Women Voices in Sunderland
- Age UK Sunderland – Essence Service
- Bangladeshi Centre (women’s BME)
- Becoming Visible
- Crest (BME)
- Healthwatch Volunteers
- HOPs Wellbeing service

- Pregnancy and maternity – independently ran
- Race and religion – independently ran
- Sunderland People First (Autism and Learning Disabilities)
- True Colours – LGBT Support group through Sunderland College

Stakeholder feedback

The public and partner organisations were invited to provide feedback via email, public meetings, social media, or other avenues.

Phase 3 – Sense checking research findings

In order to check the research captured, the draft report will be shared for comments and feedback. A final report will be produced after receiving this feedback. The draft report will be shared in a number of ways:

- **Sharing with stakeholders** - A draft report will be shared on the CCG website, and circulated to stakeholders, partner organisations, people who took part (if consented), and through social media. People will be invited to provide comments on the report.
- **Sharing at meetings** – A draft report will be shared with various groups, including the Clinical Leaders, All Together Better, Childrens Integrated Commissioning Group, Equality, Diversity, and Inclusion Network, Sunderland Involvement Partnership, and the Patient and Public Involvement Committee
- **Online feedback session** – An online session will be delivered presenting the draft results, allowing people to ask questions on the research and comment on findings.
- **Summary for Facebook** – A summary will be recorded and shared on the CCG website and through social media.

Glossary of terms

Emergency department (A&E)

The emergency department is a service available 24 hours a day, seven days a week where people receive treatment for medical and surgical emergencies that are likely to need admission to hospital. This includes severe pneumonia, diabetic coma, bleeding from the gut, complicated fractures that need surgery, and other serious illnesses.

Emergency care

Lifesaving treatments and care that is provided in an emergency department.

General Practitioner (GP)

Your local doctor, who can help you with a whole range of health problems and refer you for specialist care or assessments if you need it. GPs usually work in practices as part of a team that includes nurses and other healthcare professionals, such as pharmacists.

Healthcare professional

Someone that is qualified to diagnose, treat and prevent illness, injury and other physical and mental conditions. Doctors, nurses, physiotherapists, healthcare assistants and pharmacists are all known as healthcare professionals.

IAPT (Improving Access to Psychological Therapies)

IAPT is widely-recognised as the most ambitious programme of talking therapies in the world and in the past year alone more than one million people accessed IAPT services for help to overcome their depression and anxiety, and better manage their mental health.

GP Practice locality hub

Provides the opportunity to access a range of health care and community services – all in one place. This is a national requirement, although can be provided in hubs rather than each practice.

LD

Learning Disability

NHS England

NHS England leads the National Health Service (NHS) in England. They set the priorities and direction of the NHS and encourage and inform the national debate to improve health and care. They hold CCG organisations to account for spending this money effectively for patients and efficiently for the taxpayer.

PPG

Patient Participatory Group

Primary care

Care provided by GP practices, dental practices, pharmacies and high street optometrists. It is many people's first (primary) point of contact with the NHS. Around 90% of patient interaction is with primary care services.

Urgent Care

A sudden healthcare problem that needs an appointment within 24 hours with a healthcare professional but is not a life-threatening illness or injury'. This includes urgent care for both mental and physical health.

VCSO

Voluntary Community Sector Organisation

Glossary of organisations and groups

All Together Better

All Together Better (ATB) is made up of an alliance of provider and commissioning organisations working closely together to plan, deliver and improve health and care services in the community across Sunderland. <https://atbsunderland.org.uk/>

NHS Sunderland Clinical Commissioning Group

An organisation made up of local GP doctors, nurses, and other healthcare professionals. We are responsible for planning, developing and funding NHS healthcare and health services in order to improve health and reduce inequalities.

<https://www.sunderlandccg.nhs.uk/>

Governing Body

The Governing Body is a group consisting of the appointment members of the CCG. The governing body meets regularly to review decisions and approve health plans for Sunderland.

<https://www.sunderlandccg.nhs.uk/corporate/governing-body-meetings/governance/>

Equality, Diversity, and Inclusion Network

The EDI Network is a group of partners and people who have an interest in equality, diversity, and inclusion issues, and who are able to represent the views of different communities in Sunderland. The network provides a forum with which we can engage and communicate with voluntary and community sector organisations in Sunderland.

<https://www.sunderlandccg.nhs.uk/corporate/equality-and-diversity/equality-diversity-and-inclusion-network/>

P2

P2 is the programme board in All Together Better which focusses on Mental Health, Learning Disabilities and Autism. It has a Senior Responsible Clinician and a Senior Responsible Owner

Path to Excellence

The Path to Excellence is a five-year transformation of healthcare provision across South Tyneside and Sunderland. The aim is to improve patient experiences, address vulnerable service areas and deliver the highest possible quality and safety standards to improve our patient outcomes and deliver clinical excellence

<https://pathtoexcellence.org.uk/>

South Tyneside and Sunderland NHS Foundation Trust

South Tyneside and Sunderland have worked closely together for several years before creating a strategic alliance in 2016. On 1 April 2019, City Hospitals Sunderland NHS Foundation Trust and South Tyneside NHS Foundation Trust merged. Together the new Trust provides acute hospital and community based healthcare services to approximately

480,000 people in South Tyneside and Sunderland. The Trust have a dedicated team of over 8,000 staff who deliver outstanding care and work together to achieve the highest possible standard of quality for patients.

<https://www.stsft.nhs.uk/>

Sunderland Involvement Partnership

The Sunderland Involvement Partnership is a group of key partners from the city including (but not limited to) the Local Authority, health organisations and education. The group works in partnership to share examples of best practice, as well as resources, with the coordinated aim of bringing better health to Sunderland residents.

<https://www.sunderlandccg.nhs.uk/about-us/who-we-work-with/sunderland-involvement-partnership/>