

LIKE MINDED - NORTH WEST LONDON MENTAL HEALTH AND WELLBEING STRATEGY - CASE FOR CHANGE

Relevant Board Member(s)	Dr Ian Goodman
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Papers with report	Improving mental health and wellbeing in North West London Case for Change – a summary. APPENDIX: Summary mental health profile for Hillingdon.

1. HEADLINE INFORMATION

Summary	<p>This report introduces <i>Like Minded</i>, North West London's Programme for improving mental health and wellbeing, and seeks the Board's endorsement of its <i>Case for Change</i>.</p> <p>The Case for Change describes a shared understanding of the Mental Health and Wellbeing challenges across North West London, and articulates our ambitions for change. It is designed as a call to action - outlining the areas of work that should be developed in the next phase of the programme.</p>
Contribution to plans and strategies	The Case for Change is the first stage of the joint North West London Mental Health and Wellbeing Strategy. This will be developed by the North West London Strategy and Transformation Team, on behalf of all eight North West London CCGs
Financial Cost	There is an expectation of involvement and commitment by public, private and voluntary sector organisations across the Borough as the Strategy is developed and implemented. All CCGs have been required to invest approximately 8% more recurrently in mental health services in 2015/16 and this funding will support changes set out in the Like Minded Programme along with existing budgets.
Ward(s) affected	All.

2. RECOMMENDATIONS

That the Health and Wellbeing Board:

1. notes the work undertaken to date in development of the Like Minded programme, including the input and involvement from citizens, service users and clinicians in Hillingdon;
2. endorses the case for change; and

3. notes the proposals for developing the next phase of the Programme.

3. INFORMATION

Supporting Information

3.1 Background

In June 2014 the NWL Collaboration of CCGs agreed to build on the previous mental health strategy (called 'Shaping Healthier Lives', 2012-15) and initiate a North West London-wide mental health and wellbeing programme, called 'Like Minded' (2015-2020).

We are working across North West London because there are services where it makes sense to deliver change across a larger population. A good practical example is the recent work on Children's Mental health services:

- Hillingdon had already undertaken lots of local work defining current issues and how these could be addressed
- There were similar issues across North West London and it was agreed that a combined plan recognising shared challenges provided a powerful message on collaboration
- The combined plan described how each borough would address the shared priorities differently dependent on local needs
- In some areas we must work together – best practice dictates that the new Eating Disorder service is only viable for populations of 500,000 or greater.

The first phase of the Like Minded programme has focused on the development of a 'Case for Change'. This describes the eight major issues identified across NWL relating to mental health and wellbeing, and our vision and ambitions for the future (see section 4 below).

The Case for Change is built on a wide range of data, people's experiences, best practice and a structured approach to prioritising, which should enable local partners to target and accelerate improvements to mental health care and wellbeing in our communities. The mental health needs assessment and local consultation in Hillingdon have been critical sources of input – as has the input of the Hillingdon GP clinical lead and local commissioners. Our work included a detailed mapping of current service provision in Hillingdon, including wellbeing, prevention, care, support and treatment.

The governance of the programme is through the NWL Mental Health and Wellbeing Transformation Board. The Board has representation from CCGs, Local Authorities, both Mental Health Trusts, other stakeholders, service users and carers. It will manage the interdependencies with other related programmes and transformation work across the 8 boroughs as well as from service user and carer groups. It includes clinical and managerial and representation from Hillingdon, as well as service user representation from the Making A Difference Alliance, which includes service users from Hillingdon.

3.2 Priority Areas

The Case for Change identifies eight major issues that we currently face in NW London, and our ambitions for improvement by 2020:

1. Issue: Too many people face mental health needs alone

Ambition: We will ensure that mental health needs are better understood and more openly talked about, and we will improve the range of services for people with mental illness in NW

London.

- 2. Issue:** Not enough people know how to keep mentally well
Ambition: We will improve wellbeing and resilience, and prevent mental health needs where possible, by: supporting people in their workplace, giving children and young people the skills to cope with different situations, and reducing loneliness for older people.
- 3. Issue:** We need to improve the quality of care for those with serious and long term mental health needs
Ambition: For people with serious and long-term mental health needs we will: make their care journey simpler and easy to understand, develop new, high-quality services in the community and focus care on community based support rather than just inpatient care so people can stay closer to home.
- 4. Issue:** Too many people experience common mental illnesses, such as depression and anxiety, in silence
Ambition: For those people experiencing depression and anxiety we will: improve how quickly we identify, especially when people are not currently receiving other healthcare, and improve the quality and quantity of therapy that doesn't require medicines.
- 5. Issue:** 3 in 4 lifetime mental health disorders start before you are 18
Ambition: We will ensure that implementation of the national strategy for children and young people responds to our local needs.
- 6. Issue:** New mothers, those with learning disabilities, the homeless and people with dementia do not get the right mental health care when they need it
Ambition: We will improve the care for specific groups in our community and support available to those who don't always get the mental health care they need within existing services.
- 7. Issue:** Too many people with long term physical health conditions do not have their mental health taken into account...and vice versa
Ambition: We will make sure that physical health and mental health are supported for people with existing physical or mental long term conditions, learning from other work in NW London around the importance of joining up care.
- 8. Issue:** Our systems often get in the way of being able to provide high quality care
Ambition: Make sure that our systems help, rather than hinder, joined up care.

These are high level ambitions, which are applicable across North West London (and indeed more widely). A key task for our next phase of work will be developing and translating this vision into concrete – and tailored – proposals for action in each Borough. This has already been completed in some areas (for example Children and Young People's mental health).

In doing this, we will be mindful not only of our collective ambitions, but also of the specific mental health needs of Hillingdon residents and of the care they are currently receiving, including:

- 14.1% of the population are estimated to have a common mental health need such as anxiety and depression.
- The number of people reporting anxiety and depression in Hillingdon is the second lowest in NWL, and the number of people with depression as recorded by GPs (4.9% of people) is significantly lower than both the UK average (5.9%), and the best estimate of

overall prevalence (9.0%). This is possibly due to the stigma and discrimination surrounding mental illness coupled with a lack of trust and understanding of how statutory health services work. This may be more of an issue in Hillingdon than elsewhere in NWL.

- The proportion of patients with severe mental illness who have a recorded diagnosis, and the proportion who have a comprehensive care plan, are amongst the highest in England.
- There are an estimated 2,000 people aged 16-19 in Hillingdon with neurotic disorders.
- There are an estimated 480-620 children and young people who have both a Learning Disability and mental health problem.
- Suicide age standardised rates and self-harm rates in Hillingdon have been higher than London average. Un-diagnosed depression is one of the main risk factors for suicide.

3.3 Key Implications

Based on our Call to Action priorities, we have identified six work streams to ensure we deliver on our ambitions. These have been convened with partner involvement and with distributed leadership from across sectors:

1. **Wellbeing and Prevention:** Focussing on workplace wellbeing interventions and prevention of conduct disorder. The work stream will be led by public health.
2. **Serious and Long Term mental health needs:** Developing a new model of care, based on best practice and detailed engagement across all eight NWL Boroughs, which will focus on treating people in the least intensive appropriate setting. Modelling and analysis for the model is currently being worked up, building on local mental health whole systems work. We will then work with CCG leads and others to 'localise' the model, developing tailored service change proposals to meet with needs of people with serious mental illness in Hillingdon, and which take account of current service provision in the Borough.
3. **Common mental health needs:** Our thinking in this area is at an early stage, but is likely to take a holistic approach, focusing on undetected need, prevention as well as broadening out the treatment offer available. We aim to harness the resources and assets available across the community, not just from the NHS, and for the model to be locally led.
4. **Children and Young people:** In response to the Future in Mind report, the NWL Children and Young People's Mental Health and Wellbeing Transformation Plan has been submitted to NHS England. Hillingdon led the way in local engagement and joint working on their local plans, which are an integral part of the overarching NWL approach. Implementation is progressing within Hillingdon and joined up with the other CNWL commissioners.
5. **Existing mental health projects,** such as perinatal, dementia care pathway and learning disabilities, and report to the programme's Strategic Implementation & Evaluation Board.
6. **Enablers:** We will seek agreement to develop and address enablers (such as workforce, estates, finance) with other Strategy & Transformation programmes, in particular Whole Systems Integrated Care and Primary Care.

Financial Implications

One of the stated objectives of the programme is to develop improved outcomes – and ensure a financially sustainable system for at least the next 5 years. In working up detailed models with partners, the financial impact will be a key consideration.

It is too early to quantify the impact at this stage of the programme. There are therefore no financial implications identified yet for the Council. The cost of developing the models, and any financial implications within them, will be met by existing resources. This includes investment in new services by Hillingdon CCG in 15/16 including CAMHS, dementia, perinatal and urgent care, which equates to an 7.6% increase in overall allocation.

4. EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

The Board's endorsement will allow us to proceed to the next stage in developing the *Like Minded* Programme, as outlined at section 3.3 above.

This will allow us to begin designing the new services and service changes to allow us to meet our ambitions for mental health and wellbeing – in Hillingdon and across North West London.

The Case for Change has already been endorsed by the Hillingdon GGC Governing Body, the Governing Bodies of the other seven CCGs in North West London, and four other Health and Wellbeing Boards. It is scheduled for discussion at all other NWL HWBB's during November.

Consultation Carried Out or Required

In developing the Case for Change, the Like Minded programme has engaged with local residents across all 8 boroughs. We held a series of workshop events with specific groups, including children & young people, socially excluded groups, and mental ill health prevention. All of these workshops have had significant input from Hillingdon residents.

In addition to these workshop events, we have a number of links with Hillingdon citizens, service users and clinicians who provide on-going advice and input to the programme, including:

- A mental health focused community of interest whose members input to all work streams. This includes 4 Hillingdon representatives with lived experience of mental health problems, supported by the National Survivor User Network.
- We engage through existing forums in Hillingdon to provide updates and seek input. In developing the case for change these included attendance at Hillingdon Mental Health Transformation Board and Hillingdon Patient Public Involvement & Equality Committee. These links will be developed further in the next phase of the programme.
- The North West London Mental Health and Wellbeing Transformation Board, which oversees the Programme, includes Dr Stephen Vaughan-Smith (Hillingdon clinical lead), Rob Larkman as the (Accountable Officer for Hillingdon CCG), and Raj Grewal (Healthwatch Hillingdon).

Next Steps:

As we further develop the Programme, it is more important than ever that we talk to local groups – to hear how models that work across North West London can be improved and better adapted to local needs, and also how we can collaboratively support Hillingdon's local work on Mental health and improving outcomes.

Policy Overview Committee comments

None at this stage.

5. BACKGROUND PAPERS

Supporting documents can be found in the following web page:

<http://www.healthiernorthwestlondon.nhs.uk/mental-health>