

## Appendix A



*Like Minded*

WORKING TOGETHER FOR MENTAL  
HEALTH AND WELLBEING IN NW LONDON



# Like Minded –the Mental Health and Wellbeing Strategy for North West- What does this mean for Hillingdon

15<sup>th</sup> June 2016

Update and discussion on progress and next steps with Hillingdon  
External Service Scrutiny Committee



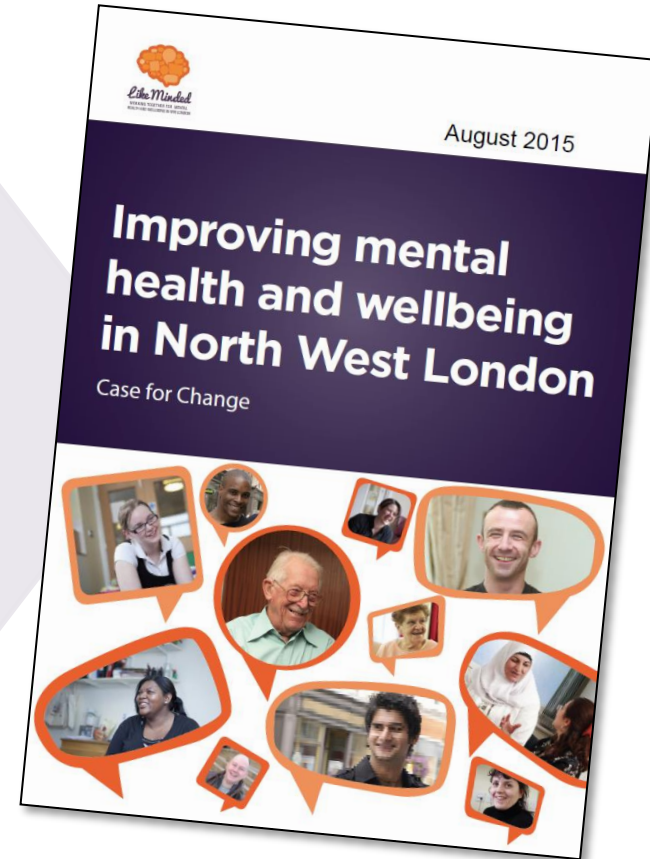
## Like Minded Overview: What is it? What will it achieve?



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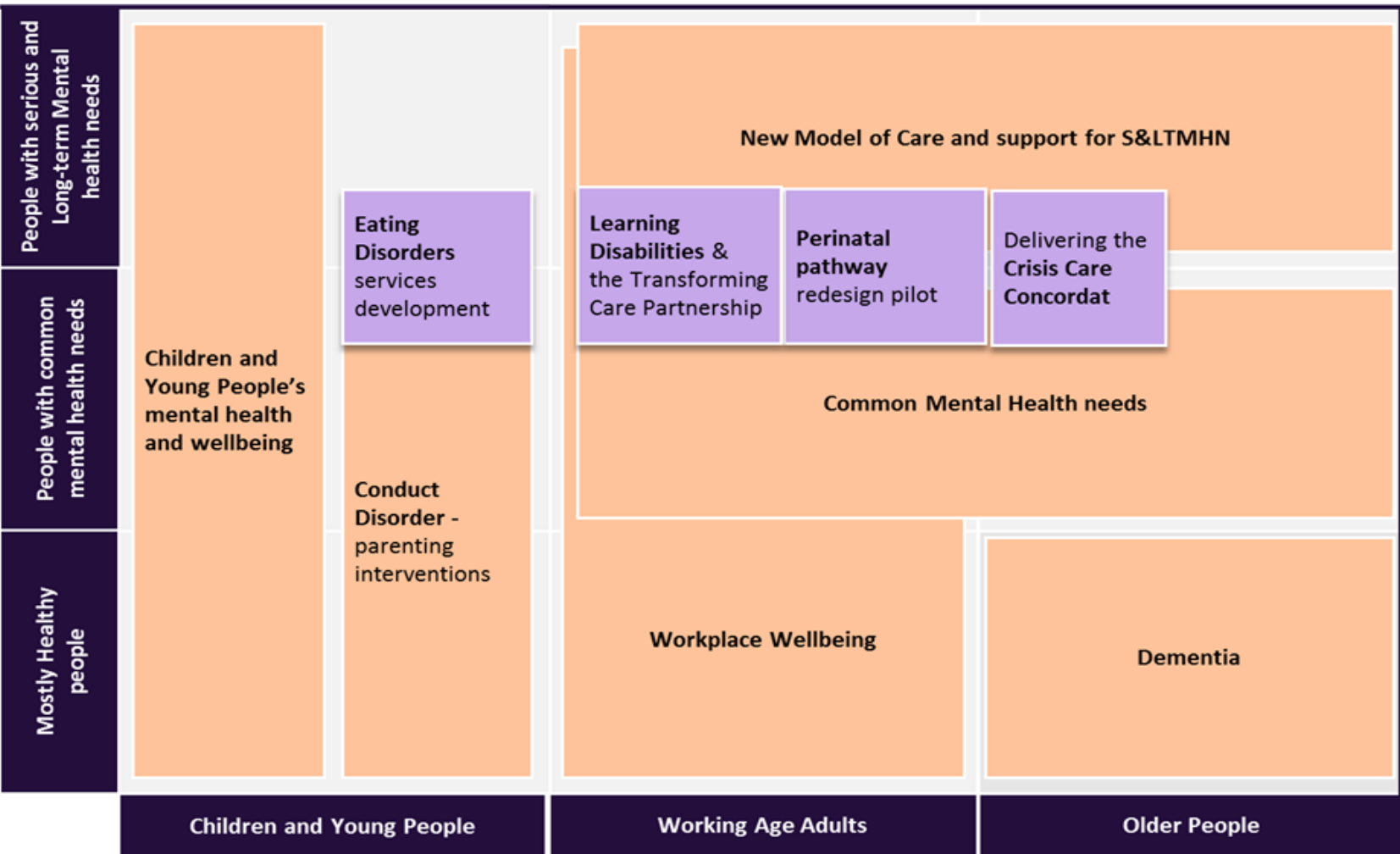
*Like Minded* is the strategy for establishing joined up care that leads to excellent mental health and wellbeing outcomes for people in North West London.

- Development is led by the NW London Collaboration of CCGs.
- Co-produced with service users, carers, health & care professionals, third sector & user-led organisations and other experts.
- Both Mental Health Trusts in NW London actively involved in developing the strategy.
- Case for Change published August 2015 – describing a shared picture of the issues and our shared ambitions.
- We are now working towards realising this vision.



***Like Minded* works across North West London – building on the local transformation and co-production work within each Borough, and on work led by our mental health providers**

# Like Minded addresses mental health needs for people of all ages and levels of need



# Like Minded addresses needs and issues through transformation workstreams



## Serious and Long Term Mental Health Needs

Ensuring we address physical and mental health needs simultaneously and reduce use of A&E/acute hospitals

## Common Mental Health Needs

Work with frail elderly and on Long Term Conditions needs to reflect depression and anxiety



## Children & Young People

Specialist Eating Disorder services now provided across NW London, & CAMHS redesign underway - paediatric pathways link to CAMHS

## Perinatal

Specialist assessment, treatment and support for women in Ealing, Hounslow and Hammersmith & Fulham



## Learning Disabilities

Improving the care and support available for people with a learning disability and/or autism who also have, or are at risk of developing, a mental health condition

## Crisis Care

Single Point of Access 24/7/365 for people needing crisis advice or referral and setting up Early Intervention Psychosis pathways



## Wellbeing and Prevention

Improving wellbeing at work through the London Healthy Charter programme for employers

## Enablers for Mental Health

Workforce and Outcomes link through all our workstreams



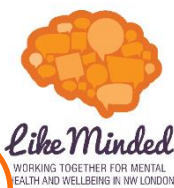
## Social Isolation

Links to Sustainability Transformation Plan. Scoping programme through co-production with partners and users

Around 2,450 people in Hillingdon have been diagnosed with Mental Ill Health including schizophrenia, bipolar and/or psychosis, which is double the national average. Around 60% of these people are supported in the community.

- **Like Minded works in partnership with:**
  - Central and North West London Mental Health Trust,
  - the Hillingdon Clinical Commissioning Group
  - The London Borough of Hillingdon,
  - Local Voluntary Sector and service users and carers.
- **Hillingdon is part of the NWL Mental Health and Transformation Board**
  - Serious and Long Term Model of Care & Support was endorsed at the Mental Health & Wellbeing Transformation Board in October 2015, where Hillingdon was represented by the CCG clinical lead Dr Stephen Vaughan-Smith.
  - Like Minded Strategy was then endorsed by Hillingdon CCG Governing Body and Hillingdon Health and Well Being Board in November 2015 .
- Like Minded workstreams are transforming mental health services for Hillingdon's population.

# The Like Minded programme and workstream updates



## Crisis Care

- 24/7/265 Single Point of Access (SPA) & rapid response now live across NW London. In April, CNWL received 4668 calls, the majority (67%) of referrals from GPs.
- CNWL implemented a new Early Intervention in Psychosis pathway and is working towards full compliance with new access and treatment standards.
- Perinatal specialist clinical pathway to be developed.



## Perinatal

- WL & CL clinical pathway in development - 3rd workshop taking place 1<sup>st</sup> June 2016.
- Perinatal Innovation & Design Group - questionnaire on the future of group now closed, preferred option for future of group is to hold a quarterly networking event.



## Social Isolation

- Scoping work is underway; there is an increased focus due to the inclusion of Social Isolation in the Sustainability Transformation Plan.
- Carolyn Regan has agreed to chair a group, and a co-produced event is being planned for autumn 2016.

- ## Common Mental Health Needs
- Imperial College Health Partners have provided a paper on economic case for different interventions including the proposed Long Term Conditions focus.
  - A pan-London Digital mental wellbeing project is being supported during 'discovery' phase.



- ## Learning Disabilities: Transforming Care Partnership
- The North West London TCP sets out the vision for improving the care and support available for people with a learning disability and/or autism who also have, or are at risk of developing, a mental health condition or behaviours described as challenging.



- ## Mental Health chapter -NHSE
- Like Minded team involved in regular stocktakes. specialised commissioning, demand & capacity

- ## Wellbeing & Prevention
- We are working with Trust champions, CCG Organisation Development teams and other leads across Councils to promote and encourage sign up to the London Healthier Workplace Charter.





## Children and Young People (CYP)

- **Specialist Community Eating Disorder services** for Children and Young People (aged 17 and under) went live in April 2016. Accepts referrals via Self, GPs, Schools/Colleges and other professionals - Brent, Harrow, **Hillingdon**, Kensington & Chelsea and Westminster Telephone: 020 3315 2711.
  - CNWL (5 CCGs) have dealt with 12 cases and 2 home visits as of 12th May - estimated demand in Year 1 is 120 cases.
  - The next steps include a communications plan/official launch; planning GP training to enable meeting of national guidelines for support; evaluation planning.
- **CAMHS Out of Hours (OOH) service in CNWL** area went live in January. This includes specialist mental health face-to-face on-call consultation, assessment, review and intervention services to sites, during evenings Monday to Friday and at weekends and bank holidays.
  - The total number of assessment and review sessions by CNWL CAMHS OOH staff in February was 40 and for March was 32. In February 40% of cases were not admitted, 40% were admitted, and in 20% of cases the young person was already admitted when reviewed by the CAMHS team. For March, 68% were not admitted, 12% were admitted, and 20% were already admitted when reviewed by the CAMHS team.
  - Planning for evaluation is underway with evaluation reports expected in July.
  - These work streams are aligned with the Hillingdon Local CAMHS Transformation Plan

# Like Minded new services in 2016



- **Single Point of Access:** A first point of contact for people needing crisis advice or referral.
- **Rapid Response Home Treatment Team** aims to provide **24/7/365** emergency mental health care with the same urgency that people expect from the NHS in a physical health emergency.
- Over 2,250 calls were received and dealt with in the first 3 weeks of service.
- **220 calls were received from Hillingdon in April : 145 (66%) were given advice and 26 (12%) were referred to the service.**
- Brent, Harrow, Hillingdon, Kensington & Chelsea and Westminster  
**Telephone: 0800 0234 650**  
**Email: [cnw-tr.spa@nhs.net](mailto:cnw-tr.spa@nhs.net)**
- Ealing, Hounslow,

- **Specialist assessment, treatment and support for women in Ealing, Hounslow and Hammersmith & Fulham** with current or previous moderate to severe mental illness who are pregnant or have given birth with the past year.
- Accepts referrals from any professional including mental health professionals, midwives, obstetricians & GPs, and offers telephone advice to professionals if they have concerns about a woman's mental health.
- Around 50 referrals as of 7th April
- **Website:**  
[www.wlmht.nhs.uk/service/perinatal-mental-health-service](http://www.wlmht.nhs.uk/service/perinatal-mental-health-service)

- **Specialist Community Eating Disorder services for Children and Young People (aged 17 and under).**
- Accepts referrals via Self, GPs, Schools/Colleges and other professionals.
- Brent, Harrow, Hillingdon, Kensington & Chelsea and Westminster  
**Telephone: 020 3315 2711**
- Ealing, Hounslow, Hammersmith & Fulham  
**Telephone: 020 8354 8160 (CAMHS reception)**

Crisis Response



Perinatal mental health service



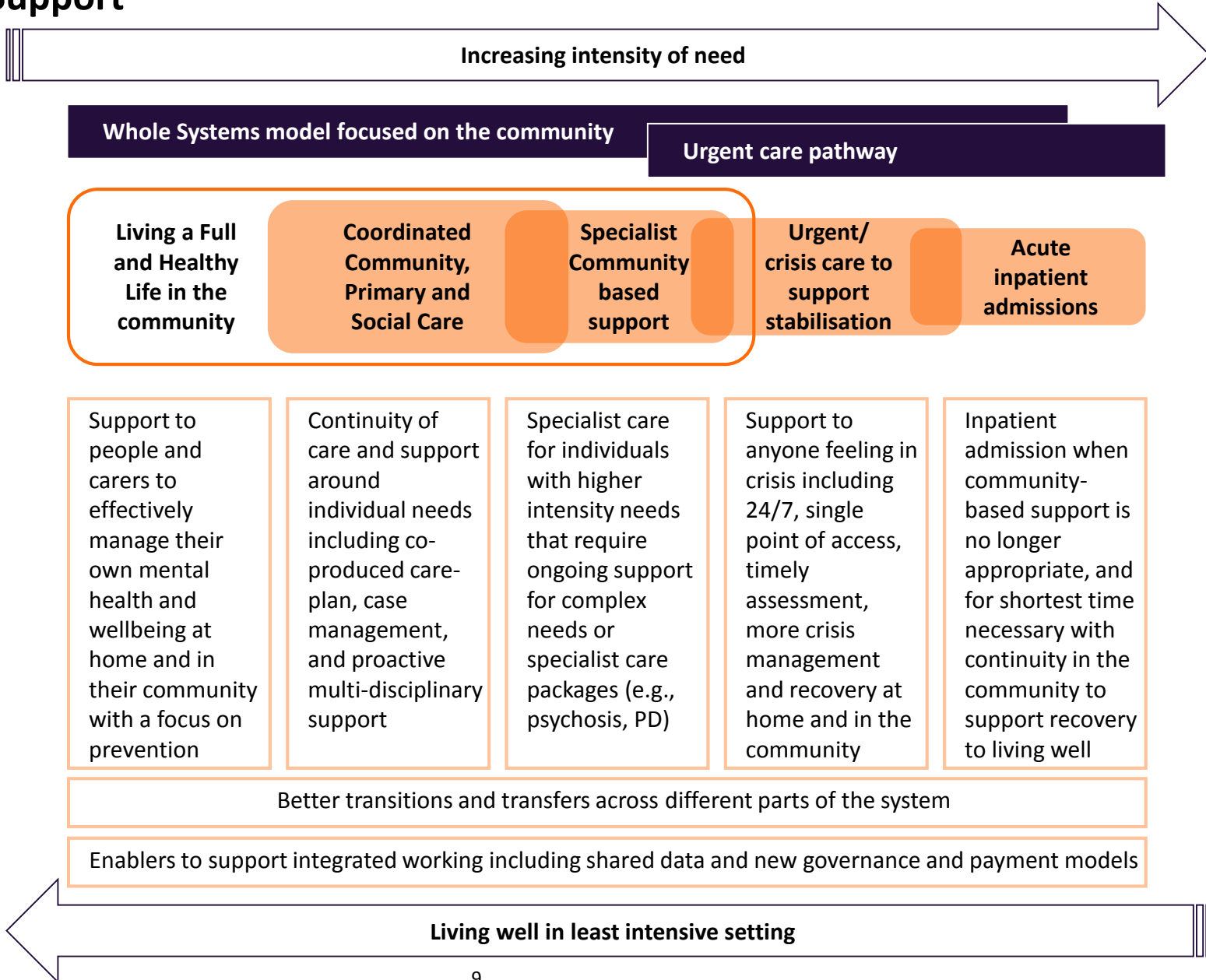
Children with Eating Disorders







# Serious and Long Term Mental Health Needs (SLTMHN) Model of Care and Support



## Principles

- Care and support should be safely provided in the least intensive setting necessary
- As risk of relapse increases, additional support should be rapidly available
- Individuals will have needs that simultaneously exist across the system
- People can seamlessly transition between boxes not just those adjacent (i.e., not a tiered system)

# What the Model of Care means for Hillingdon



Settings of Care	Model of Care Aspiration	...what this means for Hillingdon	
Whole systems community based model	<p><b>Living a full and healthy life in the community</b></p>	<p>Mental Health Navigators providing <b>navigation services</b> to mental health service users in the borough, with the aid of an integrated <b>online service directory and mapping tool</b></p>	<ul style="list-style-type: none"> <li>▪ <b>Mental Health Navigators</b> – already in place and embedded within the PCMH Team</li> <li>▪ <b>Mapping tool</b> – integration of existing directories (e.g. ‘Connect-to-Support Hillingdon’) into a single platform</li> </ul>
	<p><b>Coordinated community, primary and social care (WSIC)</b></p>	<p>Centred around patients, their carers and GPs, The Primary Care Mental Health Team will operate as a fully <b>multi-disciplinary team, case managing</b> a caseload of people in the community, ensuring individuals receive the whole systems wrap around support they need to stay well</p>	<ul style="list-style-type: none"> <li>▪ <b>Primary Care Mental Health Team: developing</b> primary care mental health team. Addition of further clinical and non-clinical roles to form a truly <b>multi-disciplinary team</b>, to cover all GP networks in the borough is being developed</li> </ul>
	<p><b>Specialist community based support</b></p>	<p>Specialist care in the community is delivered through evidence based pathways of care in particular for <b>Psychosis, CAD/T, Personality Disorder and Rehabilitation</b>, with a cross pathway dual diagnosis capability. Harnessing <b>Technological Advancement</b> will also ensure clinical staff can spend more of their time providing meaningful care.</p>	<ul style="list-style-type: none"> <li>▪ <b>Specialist community pathways:</b> further investment in specialist teams in secondary care to resource the specialist pathways (<i>clinical design work ongoing with the support of CNWL Mental Health Trust</i>)</li> <li>▪ <b>Technology</b> – pinpointed technological solution rolled out across the borough (<i>options development currently underway</i>)</li> </ul>
Urgent care pathway to living well	<p><b>Urgent/crisis care in the community</b></p>	<p>Further investment in urgent/crisis care in the community will expand current capacity to keep pace with increasing demand, to ensure that individuals receive the care they need in a timely manner and are only admitted to hospital if it is appropriate for them.</p>	<ul style="list-style-type: none"> <li>▪ <b>Home Treatment and Rapid Response Team:</b> investment in extra resource for this team by HCCG to further develop urgent and crisis care</li> </ul>
	<p><b>Inpatient admissions</b></p>	<p>Developing <b>discharge planning and follow up</b> capability will ensure individuals spend only the time that is necessary in acute settings of care, and an expansion of <b>alternatives to an inpatient bed</b> will ensure there are suitable places available for patients that do not need to be hospital but need a level of additional support to stay well</p>	<ul style="list-style-type: none"> <li>▪ <b>Non crisis alternative accommodation:</b> Investment over time for approximately 10 places in supported living accommodation or equivalent to meet predicted increased prevalence (<i>work ongoing to define most suitable accommodation profile</i>)</li> <li>▪ <b>Discharge planning:</b> further investment in discharge planning resources</li> </ul>

# Where are we up to?



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- North West London-level model of care and business case framework developed:
  - Model defines shift in activity away from in-patient beds and alternative forms of community-based support to be developed in Hillingdon
  - 24/7 Single Point of Access element of the model already live for Hillingdon population
- Now working with Hillingdon CCG to develop a local business case for approval (September) for service changes from April 2017
- Working in parallel with Hillingdon Council to quantify the impacts for the Council and ensure the model address these impacts with Hillingdon Ambition to achieve endorsement of the model as *'the right thing to do'* Council in parallel

## Example questions to address .

Which service users will benefit from the additional supported accommodation?

What sort of additional supported accommodation (or equivalent) will be needed (e.g. crisis avoidance, step-down)?

Which service users will benefit from increased/enhanced community-based support?

How does community-based support in the model 'fit' from a Local Authority perspective? Are there any gaps?

What ways of working together will be important a) during design and implementation b) delivering the service

What other changes will be needed to achieve the shifts in activity in the model? (e.g. improved processes for admission avoidance, discharge, delayed transfers of care, trusted assessment, joint multi-disciplinary team working?)

What other questions should we be asking?

What else will be important to explain or demonstrate to members ?

# Next Steps

1

Resolve outstanding areas of the Model and their specific implementation in Hillingdon

2

Co-produce Business Case with Hillingdon CCG

Work side by side with Hillingdon Council to secure the Council's endorsement of the Model of Care as the right thing to do

3

Move into implementation of the new Model of Care in Hillingdon by April 2017