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Title	Progress on delivery of the mental health priority in the Buckinghamshire Health and Wellbeing Strategy.
Date	7 th December 2017
Report of:	Jane O'Grady, Director of Public Health
Lead contacts:	Becky Hitch, Public Health, BCC April Brett, Public Health, BCC Caroline Hart, CCG

1 Purpose of this report:

This report provides a six monthly update on progress towards delivery of the mental health actions in the Buckinghamshire Health and Wellbeing Strategy. The performance metrics from the Health and Wellbeing Board Performance Dashboard related to this priority have also been added as an appendix to this report for reference.

2 Summary of main issues:

- 2.1 There are key areas of focus for mental health and wellbeing in the Buckinghamshire Health and Wellbeing Strategy. These are:
 - Give Every Child the Best Start in Life (Mental Health)
 - Promoting good mental health and wellbeing for everyone:
- 2.2 A comprehensive overview of progress is provided in Appendix 1. Work is progressing well and includes activity on:
 - Promoting good maternal and paternal health
 - Whole school approaches to emotional wellbeing
 - Workplace mental wellbeing
 - Improving the physical health of people with mental illness
 - Approaches to dual diagnosis (people with both mental health and substance misuse problems)
 - Reducing the risk of suicide and self harm
- 2.3 Areas of work which are at an earlier stage or need further development are:
 - There is no forum for HR workplace health leads to link together or to link with business sector partners who are delivering mental health work within their own workplaces. A lead agency to facilitate these needs to be identified.
 - Work on improving the physical health of people with mental illness will be an ambition within the work of the Accountable Care System.
 - Work has commenced to explore the options for meeting the specific needs of people bereaved by suicide
 - Work has commenced on understanding the level of need for basic mental health awareness training and suicide prevention training.

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- 2.2 The Health and Wellbeing Board has agreed to support an application for Buckinghamshire to be an organic hub in the national Time to Change programme. The goals of this programme are to:
 - Improve public attitudes and behaviour towards people with mental health problems.
 - Reduce the amount of discrimination that people with mental health problems report in their personal relationships, their social lives and at work.
 - Make sure even more people with mental health problems can take action to challenge stigma and discrimination in their communities, in workplaces, in schools and online

Achieving organic hub status will enable Buckinghamshire to access a menu or support and resources in relation to work with:

Local communities Schools Local employers Blue Light services Marketing and communications Setting up a peer support network Evaluation

3 Recommendation

The Health and Wellbeing Board is asked to:

• Note the activity on the mental health actions and comment on progress at the meeting .

4. Appendix

Appendix 1: Health and Wellbeing Board Performance Dashboard – Promote Good Mental Health for everyone priority indicators for reference.

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Appendix 1 A summary of progress on the actions to deliver the two themes:

1. Give Every Child the Best Start in Life (Mental Health)

1.1 Ensuring good support for maternal and paternal mental health.

- The Buckinghamshire perinatal mental health pathway has been developed and has been widely disseminated. This is commissioned by the CCG and delivered by Oxford Health and Buckinghamshire Healthcare Trust.
- 1.2 Through the school years, we will support the physical, emotional and social wellbeing of children and young people by promoting a whole school approach to health and wellbeing and ensuring emotional resilience of young people is supported and developed.
- BCC Public Health and Schools Liaison Teams have circulated regular briefings and updates to schools and produced a termly newsletter.
- An information resource for schools within Buckinghamshire is being produced using the Public Health England Whole School Approach to promoting mental health and emotional wellbeing. This will provide links to national and local resources. This is being produced by BCC Public Health in collaboration with the Children and Young People's Emotional Wellbeing Group (EWB Group) and BCC Children and Young People leads.
- A Buckinghamshire specific information resource for schools settings is being developed in line with national guidance to support schools in the event of a suicide. This led by BCC Public Health in conjunction with the EWB Group.
- The Public Health in Schools webpages are a coordinated and concise health information resource which have been developed to support school health activities.
- The fifth annual Emotional Wellbeing in Schools Networking and Skills conference was held on 15 November 2017 at the Clare Charity Centre in Saunderton, over 100 delegates attended from across Bucks schools, School Nursing Service, Buckinghamshire County Council and its partners as well as the 3rd sector. It was organised by the Public Health Team to enhance the knowledge and skills required to support children in young people in partnership with colleagues from various groups and organisations.
- The evidence based Penn Resilience programme, which is delivered in schools and aims to build emotional resilience by promoting realistic thinking, adaptive coping skills and social problem-solving, is promoted by Public Health with training support to secondary school staff. This is commissioned by BCC Public Health in conjunction with the EWB Group.
- Child and Adolescent Mental Health Services (CAMHS) provides training support for a range of frontline agencies including school based staff which includes key aspects of emotional resilience and a whole school approach.
- Buckinghamshire Mind has developed and launched an adult mental health directory of services and have been commissioned through CAMHS to repeat this process for services for children.

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- A one year fixed term PSHE project manager post has been developed. This will promote and develop PSHE within schools in Buckinghamshire. This has been developed by Public Health in liaison with BCC Education.
- The Children's Strategic Partnership Board has also been refreshed and will have an oversight of children's mental health and responsibility for escalating issues of concern to the Health and Wellbeing Board.

2. Promoting good mental health and wellbeing for everyone:

2.1 Improving maternal mental health by building effective screening for mental health issues in pregnancy and maternity pathways and ensuring rapid access to effective intervention for all women who require it.

- The perinatal mental health pathway focuses on this area.
- The Health Visiting Team, which is within the Buckinghamshire Healthcare Trust Public Health Nursing Contract have standard procedures across the teams and are working to improve consistency of practice and recording. Maternal mood is assessed at 6-8weeks and prevalence of ante-natal depression, as defined by the Edinburgh Post Natal Depressions Scale (EDPS) is monitored. This team is commissioned by BCC Public Health.
- The Buckinghamshire Healthcare Trust health visiting team have worked with Oxford Health Healthy Minds to develop and implement postnatal wellbeing groups. These also include fathers for some sessions.

2.2 Improving infant, children and young people's mental health and emotional wellbeing, through targeted support and by ensuring access to Child and Adolescent Mental Health Services (CAMHS) and early intervention services.

As part of its Transformation Plan CAMHS are delivering the following:

- Developing resources and skills in universal services to enable improved early support and advice for children and young people with mental health concerns. This includes Psychological Perspectives in Education and Primary Care training, toolkits. Website and online resources.
- "Refresh" training on self-harm and self-injurious behaviour for those who work with children including schools based staff
- Ensuring children and young people in crisis have access to timely support to prevent/minimise escalation to more complex needs. This includes pathway work with adult mental health services, the age inclusive eating disorders pathway, work with BCC for children and young people excluded from school or at risk of exclusion.
- Continuing to embed whole system working to ensure services delivering to children and young people work together to meet the mental health needs of this group. This includes Partnership working to be further explored through the ACS

Additional activity by partners is as follows:

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- A Parent Advisory Group has been established to provide feedback on the local services and to provide guidance on areas for development.
- Time to Talk provides counselling services to secondary schools in Bucks.

2.3 Promoting adult wellbeing and resilience in all partner workplaces as part of wider workplace health initiatives

• BCC Organisational Development are currently leading on a 'Health and Wellbeing Ambition' to create a healthy, positive and engaged workforce this is still work in progress.

The current offer to staff includes

- E-learning, online courses to assist with personal resilience and stress awareness
- Mindtools: offers 70 free online courses around managing stress including coping strategies, happiness, wellbeing and relaxation and sleep.
- PAM Assist EAP (Employee Assistance Programme) has been in place for several years so promoting this service more over December and January

The new Head of OD and Learning and Development is working with PAM our occupational health provider to produce a Well Being Action Plan for Jan to Sept 2018.

- Wycombe District Council has taken the Time to Change employers pledge and developed its action plan. BCC Human Resources is intending to propose this to the BCC Corporate Management Team.
- AVDC provides free counselling for employees. It has recently offered bitesize mindfulness sessions to all employees and offers e-learning and face to face training on resilience.
- The CCG have a health and wellbeing policy in place, a staff partnership forum and are committed to the aims of the Mindful Employer charter.
- Chiltern and South Bucks District Council have four Mental Health First Aiders and have developed a section on their website with detail of local mental health support and in house health and wellbeing initiatives.
- Two Mental Health Champions have been recruited from BCC.
- Partners from Oxford Health, Community Impact Bucks, Buckinghamshire Mind and BCC Public Health are developing a multi-agency approach to coordination and promotion of the full range of mental health training for staff working with adults from 'how to look after your own mental wellbeing', through mental health crisis and suicide prevention. Links with the training approach for staff working with children will be developed when a plan is in place.
- The BCC Family Resilience service is part of the Public Health England 'Connect Five training pilot'. Connect Five teaches frontline staff how to have effective conversations about mental health and wellbeing with the public/clients. It is delivering nine sessions to Family Resilience staff and then will roll out to any frontline staff identified as appropriate.

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2.4 Promoting good mental health and emotional wellbeing by working with partners to identify and work with groups who are vulnerable to poor mental health.

This is integrated across the other priorities within this report thread throughout all the other sections of work discussed in this report.

2.5 Working with partners to improve the physical health of people with mental illness and/or learning disability.

- Commissioning of a psychiatric in-reach liaison service into the acute physical health setting in Bucks. From 4/9/17 this service is on-site 24 hours a day 365 days per year and since 2016 have also been seeing young people of 16 18 years
- Improving access to psychological therapies is delivering psychological services to more people with physical health conditions in line with the national Integrated IAPT programme where evidence has shown that psychological interventions for people with long term conditions can reduce reliance on primary and secondary health services. Over 400 people with long term conditions in BUCKS received at least 1 psychological appointment during Q1, with some early indications of reduction in the use secondary physical and primary care.
- The acute mental health wards at the Whiteleaf Centre have appointed a registered general nurse to lead on the monitoring and management of patients with physical health needs
- Work has been undertaken to standardise the physical health checks in line with medication which has been formalised across the CCG and OHFT.

2.6 Reviewing existing services for people with mental health and substance misuse problems to improve their outcomes.

This partnership work is delivered by Oxford Health, One Recovery Buckinghamshire (the new adult substance misuse service) and Addaction, with input from the CCG, and facilitated by Public Health. It is also an action in the Buckinghamshire suicide prevention action plan. The group is working towards compliance with NICE guideline NG58 on coexisting mental health and substance misuse issues. The group is:

- Ensuring risk assessments for co-existing conditions are conducted for all people accessing services
- Cross referencing between services of high risk groups with co-existing conditions
- Reducing barriers to accessing services through the provision of a single point of access for all services
- Developing a joint working protocol for co-existing mental health and substance misuse issues in children and young people with plans for a protocol for adults with co-existing conditions
- Developing plans for improvements in continuity of care on discharge from acute care to community services

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- Planning work to assess current services against NICE guidelines using the baseline assessment tool
- Developing training opportunities to upskill the workforce in the identification, management and referral of patients with co-existing conditions
- Improving care coordination through attendance at complex case review meetings of substance misuse and mental health service providers
- Improving referrals between services to provide coordinated care through training and case review

2.7 Implementing plans to reduce the risk of suicide and minimise self-harm.

Work to reduce the risk of suicide is delivered via the multi-agency Buckinghamshire Suicide Prevention Group. In addition, suicide prevention is now a workstream in the Mental Health Accountable Care System work plan, led by Oxford Health to deliver the Mental Health Five Year Forward View.

- The new Buckinghamshire Suicide Prevention Action Plan has been developed and approved by partners.
- The CCG is delivering mental health workshops for GPs including suicide prevention. Buckinghamshire Mind and Oxford Health are developing a joint localised suicide prevention training offer.
- A discussion group with people bereaved by suicide took place in October. This will inform the Buckinghamshire approach to supporting those bereaved. A young people's bereavement support discussion group is to be arranged.
- Buckinghamshire Mind has developed and launched an adult mental health directory of services
- Oxford Health is developing improved pathways for people with complex presentations including personality disorders and improving transition from CAMHS to adult services.
- Partnership communications work took place on World Mental Health Day (October) and World Suicide Prevention Day (September) led by BCC/CCG communications team.
- Guidance on social media and suicide is now part of Buckinghamshire Children's Safeguarding Board guidance, and Royal Colleges Consensus Statement on Information Sharing also agreed to be included and publicised.
- Schools based suicide prevention work is discussed in section 1.2, and substance misuse work which supports suicide prevention is discussed in section 2.6
- Suicide prevention work in prisons includes: health screening on arrival; medial reviews/alerts if the transfer of a person who has previously self-harmed takes place between prisons; first night observations following the Assessment, Care in Custody and Teamwork process; self-harm groups in Aylesbury YOI; Suicide and Self-Harm training for staff is mandatory; constant watch and safer cells are utilised as needed.

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- Oxford Health has established a group to explore actions to support staff after suicide. It is developing guidance for managers supporting staff who have expressed suicidal thoughts. A psychological debriefing service has also been established.
- The evidence based Collaborative Assessment and Management (CAM) model is a tool for clinicians which is being introduced via a phased approach across Oxford Health. Service users who present with suicidality and are motivated to engage with their clinician in a collaborative and structured process, work jointly with their clinician to understand and manage their suicidal drivers and risk.
- Oxford Health has developed safety planning guidance for clinicians. This is to help them support service users to develop safety plans which are owned by the service user. They will be embedded within electronic notes to ensure fast access.



Appendix 1: Health and Wellbeing Board Performance Dashboard – Promote Good Mental Health for Everyone priority indicators for reference.

Indicator			Nationally benchmarked data											More recent Bucks data - benchmarking unavailable			
		Previou	s Bucks	Latest	Latest Bucks		England	South	CIPFA peers								
No.	lo. Name		Value		Count	Value	Value	Value	Mean excluding Bucks	Rank 65 are best 12-16 are worst	Time series	Latest available data	Count	Value			
Priorit	Priority 3. Promote good mental health and wellbeing for everyone																
40	Maternal mood prevalence at 6 to 8 weeks (%)PLACEHOLDER		-	2016/17	444	7.3	-	-		-	•						
41	41 School pupils with social, emotional and mental health needs (%)		1.3	2016	1,266	1.5	2.3	2.4	2.2	2	-						
42	Hospital admissions as a result of self-harm (10-24 years) (per 100,000)		364.8	2015/16	340	385.8	430.5	469.4	491.5	4							
43	Average difficulties score for all looked after children aged 5-16 who have been in care for at least 12 months (average score)	-	13.9	2015/16	-	13.7	14.0	14.4	14.5	-	$ \ \ \ \ \ \ \ \ \ \ \ \ \ $						
44	Persistent absentees - Secondary school (%)		14.5	2015/16	4,406	14.8	13.1	13.2	12.4	16	-						
45	Primary school fixed period exclusions: % of pupils	413	1.0	2015/16	595	1.3	1.2	1.4	1.4	8							
46	Secondary school fixed period exclusions: % of school pupils	1,691	4.6	2015/16	1,847	5.0	8.5	7.3	6.6	1	\langle						
47	Self-reported wellbeing - People with a low happiness score (%)	-	7.7	2015/16	-	6.1	8.8	8.0	8.0	1							
48	Adults (aged 18-69) in contact with secondary mental health services who live in stable and appropriate accommodation (%)	-	40.7	2016/17		38.0	54.0	45.0	54.7	11		Q2 2017/18	-	82.0			
49	Excess under 75 mortality rate in adults with serious mental illness (in directly standardised ratio)	-	302.6	2014/15	-	351.1	370.0	347.5	353.3	9	\downarrow						
50	Suicide rate (per 100,000)	123	9.3	2013-15	113	8.5	10.1	10.2	9.8	2							

The Health and Wellbeing Board have agreed to look at analysis reports for each priority area in detail and these are being scheduled in the HWB work programme for 2018/19. The HWB is due to look at 'Give Every Child the Best Start in Life' priority at the January 2018 meeting. An in-depth look at the mental health priority indicators will be scheduled for 2018.