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| <b>Item No.</b><br>8.              | <b>Classification:</b><br>Open | <b>Date:</b><br>16 September 2014   | <b>Meeting Name:</b><br>Cabinet |
| <b>Report title:</b>               |                                | Response to Recommendations From the Review of Prevalence of Psychosis and Access to Mental Health Services for the BAME Community in Southwark |                                 |
| <b>Ward(s) or groups affected:</b> |                                | All   |                                 |
| <b>Cabinet Member:</b>             |                                | Councillor Dora Dixon-Fyle, Adult Care, Arts and Culture  |                                 |

## **FOREWORD – COUNCILLOR DORA DIXON-FYLE, CABINET MEMBER FOR ADULT CARE, ARTS AND CULTURE**

Promoting mental wellbeing and resilience and reducing health inequalities are priorities of the Southwark Health and Wellbeing Strategy 2013 – 2014 and emerging themes in the development of the impending Joint Mental Health Strategy. Partners across health, the local authority and the voluntary sector are working hard to promote mental wellbeing and to reduce the prevalence of mental ill-health in the borough by addressing the wider determinants of health, wellbeing and inequality alongside commissioning and delivery of responsive, high quality, equitable mental health and social care services. The aim is to offer services that intervene early, are responsive to individual needs which promote recovery and staying well. However, we know that there are more people with mental health issues (especially severe mental illness) in Southwark compared with the national and London average. Poor mental wellbeing and mental ill health is strongly associated with poverty and socioeconomic deprivation, including joblessness and poor educational attainment, so this is likely to contribute to high levels of mental distress in Southwark; especially in the centre of the borough where deprivation is higher and employment is lower. In addition to socioeconomic inequalities, there are other systemic inequalities for some population groups including ethnic minorities. For instance whilst the causes are not easy to disentangle it is known that psychiatric admissions are over three times higher for the black populations in Southwark compared to the rest of the population.

All stakeholders welcome the timely review undertaken by the Health, Adult Social Care, Communities and Citizenship Scrutiny Sub-Committee into the prevalence of psychosis in BAME Communities which supports the work taking place locally across the partnership to understand and address the inequality that exists in the system.

I am delighted to see a real energy from all our partners to respond to the 10 recommendations received in the report, several of which I am pleased to see are already being responded to across the system. For example the new Adult Mental Health transformation programme across mental health services places a real focus on increased capacity and stronger community based services to reduce the need for urgent and inpatient care, and the Lambeth and Southwark Urgent Care Mental Health Sub Group are already implementing plans for a more safe and secure approach in A&E for people in crisis. The psychological therapy services are also currently being developed and retendered with a significant emphasis on better access to talking therapies for black, Asian and minority ethnic (BAME) communities offering outreach services within churches and community settings.

In addition the proposal to undertake a large community conversation, mirroring the success of a similar exercise in our neighbouring borough to strengthen where the system is working and developing where it is not, is a fantastic opportunity that will really make a difference to how some of our most marginalised groups are engaged and supported across mental health services. The bottom up, co-produced approach will ensure that we really understand the needs of our different communities, and that our infrastructure is as fit for purpose as possible.

I am therefore pleased to present the response to the recommendations received from Overview and Scrutiny. I look forward to continuing to support the work of all partners to ensure full equality of access and sufficiency of services that appropriately respond to the needs of BAME communities and marginalised groups in the borough.

## **RECOMMENDATION**

1. That cabinet agree the proposed response to the health, adult social care, communities and citizenship scrutiny sub-committee's review Prevalence of Psychosis and Access to Mental Health Services for the BAME Community in Southwark

## **BACKGROUND INFORMATION**

2. The health, adult social care, communities and citizenship scrutiny sub-committee undertook an investigation into psychosis<sup>1</sup> particularly within the BAME community. A report of the sub-committee's findings was welcomed by overview and scrutiny committee on the 31 March 2014.
3. The recommendations of the review were presented to cabinet on the 22 July 2014 with a request for the relevant cabinet member to bring back a report to respond to the recommendations provided.
4. The report therefore provides a proposed response to the recommendations to be approved by cabinet.

## **KEY ISSUES FOR CONSIDERATION**

### **Recommendations from Health, Adult Social Care, Communities and Citizenship Scrutiny Sub-Committee and proposed Cabinet response**

#### **Recommendation 1**

5. At this time, the sub-committee has carried out some initial evidence and we strongly recommend that the next iteration of the Health Scrutiny Sub-Committee carries out a more in-depth look at access to mental health services by all service users, with a specific focus within the report on BAME community access.

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<sup>1</sup>Psychotic disorders include schizophrenia and bipolar disorder which are characterised by severe disturbances in thinking and perception such that perception of reality is distorted. This may result in different types of delusions about the self, others and the environment and may include hearing voices.

## **Response**

6. Cabinet support the recommendation for the sub-committee to undertake a more in-depth look at access to mental health services with a focus on BAME communities and would encourage an interface with the proposed consultation to review mental health services for BAME and Minority groups being led by the local authority supported by the CCG, Public Health and Mind user council. The review aims to embed more equitable access and support across the borough with a focus on BAME and marginalised groups.

## **Recommendation 2**

7. The sub-committee notes with concern that there are a large range of factors given for the increase prevalence of mental health conditions in the BAME community. We recommend that Public Health carry out further work to understand the key drivers behind this increased prevalence, using Southwark specific data where possible to look at the borough's BAME communities in more detail.

## **Response**

8. Lambeth & Southwark Public Health team lead on the health needs assessment, which is a key part of the Southwark Mental Health Strategy. Identifying inequality is an important part of this work. Subject to data availability, the Public Health team will provide in depth analysis of Southwark data which will be triangulated with stakeholder engagement to provide a robust understanding of the key drivers of poor mental health in BAME and minority groups.

## **Recommendation 3**

9. The sub-committee recommends that Healthwatch Southwark should collect more information of real life cases through a number of means including Kindred Minds- a Southwark black and minority ethnic (BAME) user-led mental health project and other relevant sources and organisations in Southwark.

## **Response**

10. Cabinet acknowledge the engagement of Southwark Mind's User Council in the review and consultation on mental health services for BAME and other minority groups which includes developing pen pictures, case studies and service user journey maps to further understand the barriers to accessing services and the challenges faced by minority communities.

## **Recommendation 4**

11. The sub-committee notes that there is minimal understanding of the ways in which members of the BAME community present with mental health conditions, other than from research. We recommend that Public Health undertake further work to understand the pathways which Southwark residents take to access mental health services. Where relevant, this should be undertaken jointly with SLaM and the Hospital Trusts.

## **Response**

12. As above, as part of the proposed review and consultation on mental health services for BAME and minority groups, Southwark Mind User Council will be undertaking a

specific piece of work to understand service user journeys into and through mental health services. In addition stakeholder consultation will also provide further in-depth knowledge in to the presentation and access to services from BAME and minority groups.

#### **Recommendation 5**

13. We welcome the decision by SLAM to collate information on classifications of presentations to Emergency Departments and would recommend that this information is shared as part of the Joint Mental Health Strategy that is being developed.

#### **Response**

14. Ethnicity data forms part of the Mental Health Needs Assessment which directly influences the strategic objectives and commissioning intentions laid out in the Joint Mental Health Strategy. Subject to the data being available the Public Health team will incorporate this information into the needs assessment work as part of the Southwark Mental Health Strategy.

#### **Recommendation 6**

15. We recommend that Kings College Hospital and Guys and St Thomas' place the provision of safe, secure spaces for the treatment of patients presenting with mental health conditions as a key priority in their work plans for 2014.

#### **Response**

16. As part of the work of the Urgent Care Mental Health Sub Group both Kings College Hospital and Guys and St Thomas' have committed to identifying safe and secure spaces for the treatment of patients presenting at A&E in acute distress during 2014/15. To date GSTT have identified a safe place within A&E and King's have recently identified two specific treatment rooms to be used as a safe space for people attending A&E in crisis. Further work will continue to reorganise how people in crisis are supported in A&E departments with a focus on redirecting people in crisis away from A&E to the Home Treatment Teams, ensuring that existing service users have up to date crisis plans that are followed, and exploration of alternative crisis centres in the borough. The dedicated project group will continue to develop and lead plans for a more responsive crisis response in the borough.
17. SLAM are conducting a 3 month audit into the high volume of patients known to the system who present frequently to A&E at both King's and St Thomas's. Part of the analysis will include recording of ethnic origin alongside other relevant data to understand the holistic needs of the cohort in detail. This is covered in the action plan of The Urgent Care Mental Health Sub Group and will be a headline agenda item at the next meeting which is scheduled to take place on 1<sup>st</sup> September 2014. The outcome of which will influence the work of the aforementioned project group.

#### **Recommendation 7**

18. We recommend that the Mental Health sub-group of the Lambeth and Southwark Emergency Care Network presents its final Action Plan to the sub-committee for further comment. We recommend that the final draft of the Joint Mental Health Strategy is presented to the sub-committee ahead of publication for further scrutiny.

## **Response**

19. As part of the governance for the approval of the Joint Mental Health Strategy, the draft document will be presented to the Healthy Communities Sub-Committee on 11 November 2014. In addition, in response to the recommendation for the Lambeth and Southwark Emergency Care Network presents its final Action Plan to the sub-committee, the Action Plan will also be presented as part of the recommendations feedback to scrutiny on the 11 November 2014.

## **Recommendation 8**

20. The sub-committee welcomes the services that are currently provided by SLaM to support those people with mental health conditions in Southwark. We recommend that priority is placed by SLaM on supporting people with mental health in the community, and intervening ahead of any admissions to A&E wards.

## **Response**

21. Intervening early to prevent escalation of need is an essential aspect of delivering more responsive mental health care in the borough. Southwark CCG will ensure as part of the developing Mental Health Strategy and the transformation programme across SLaM, there is easier and more equitable access to effective, community based specialist mental health services. The reconfigured crisis care pathway will also reduce reliance on urgent care services and the CCG and its partners will continue to consider the resource and capacity implications of increased support in primary care for people with mental health issues as part of the Primary and Community Care Strategy.

## **Recommendation 9**

22. Given the success of the Black Majority Churches Pilot, the sub-committee recommends that Southwark CCG and Southwark Council jointly consider commissioning a bespoke pastoral mental health awareness training programme across established BMCs in Southwark adapting SLaM's faith and mental health model.

## **Response**

23. In 2014-15 SLaM are commissioned by Southwark CCG to deliver one Spirituality in Pastoral Care course in Southwark as well as some community development work such as mental health awareness training. Commitment to extend this work and fund a two year programme for training and development to raise capacity and awareness within faith and minority groups to identify and appropriately responds to mental health issues in minority groups has been provided by the CCG. The work will be led by the Equality and Human Rights Manager in the CCG and will build on the existing good practice and work in this area. A specific element of the programme will be focused on Pastoral training across a range of different faith groups.

## **Recommendation 10**

24. The sub-committee further suggests that Southwark CCG and Southwark Council jointly consider commissioning further Mental Health First Aid training specifically aimed at established BMCs across Southwark.

## Response

25. Mental Health First Aid Training is currently offered to Southwark and is targeted at the voluntary and community sector as well as faith communities. It is free at the point of access for these individuals. In addition, Southwark Council make Mental Health Awareness training available through the internal training programme on My Learning Source for staff, many of whom are also Southwark residents. Consideration to the interface and availability of the programme as part of the training and development programme for BAME, faith and minority groups (see response to recommendation 9) will take place to ensure the training is appropriately targeted, delivered and accessible for church and faith groups.

## Policy implications

26. There are no policy implications

## Community impact statement

27. The proposed work will provide further insight into ensuring equality of opportunity to mental health services, in line with the Equality Duty, at section 149 of the Equality Act. In particular the work will focus on ensuring compliance and sufficiency for the following Protected Characteristics:
- Race
  - Religion and belief
  - Sexual orientation

## Resource implications

28. Wherever possible the proposed response and work will be carried out within existing resources, however there may be a need for additional Public Health Resource to undertake in depth statistical analysis. Any additional resource required will be funded within existing budget arrangements.

## Legal implications

29. There are no legal implications for the report.

## BACKGROUND DOCUMENTS

| Background Papers   | Held At  | Contact   |
|---|--|---|
| Scrutiny report considered by Cabinet 22 July 2014  | Constitutional Team,<br>Southwark Council, 160<br>Tooley Street, London SE1<br>2QH | Paula Thornton<br><a href="mailto:paula.thornton@southwark.gov.uk">paula.thornton@southwark.gov.uk</a><br>020 7525 7055 |
| <b>Link:</b><br><a href="http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CIId=302&amp;MIId=4861&amp;Ver=4">http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CIId=302&amp;MIId=4861&amp;Ver=4</a> |  |   |

## APPENDICES

| No.  | Title |
|------|-------|
| None |       |

## AUDIT TRAIL

|   |   |                          |
|---|---|--------------------------|
| <b>Cabinet Member</b>   | Councillor Dora Dixon-Fyle, Adult Care, Arts and Culture      |                          |
| <b>Lead Officer</b>   | Paul Jenkins, Interim Director of Integrated Commissioning    |                          |
| <b>Report Author</b>  | Jodie Adkin, Senior Mental Health Commissioner, Southwark CCG |                          |
| <b>Version</b>  | Final   |                          |
| <b>Dated</b>  | 5 September 2014  |                          |
| <b>Key Decision?</b>  | No  |                          |
| <b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER</b> |   |                          |
| <b>Officer Title</b>  | <b>Comments sought</b>  | <b>Comments included</b> |
| Director of Legal Services  | No  | No                       |
| Strategic Director of Finance and Corporate Services                    | No  | No                       |
| <b>Cabinet Member</b>   | Yes   | Yes                      |
| <b>Date final report sent to Constitutional Team</b>                    | 5 September 2014  |                          |