

Item No. 9.	Classification: Open	Date: 13 December 2016	Meeting Name: Cabinet
Report title:		Response to Scrutiny Sub-Committees' report on the Development of a Southwark Joint Mental Health Strategy	
Group affected:		All	
Cabinet Members:		Councillor Richard Livingstone, Adult Care and Financial Inclusion and Councillor Victoria Mills, Children and Schools	

FOREWORD - COUNCILLOR RICHARD LIVINGSTONE, CABINET MEMBER FOR ADULT CARE AND FINANCIAL INCLUSION AND COUNCILLOR VICTORIA MILLS, CABINET MEMBER FOR CHILDREN AND SCHOOLS

In July, Cabinet received a joint report from the Children's and Education Scrutiny Sub-committee and the Healthy Communities Sub-Committee that set out recommendations for our mental health strategy. We agreed to look carefully at those recommendations and incorporate them into our strategy.

Specialist mental health services play a vital role during times of personal and family crisis. But these services are at risk of being overwhelmed by demand if they do not work in concert with a wider range of resources, including schools, housing, primary care and other community resources. This is especially important during an era of reducing NHS and council budgets set by national government. The Joint Strategy, commissioned by Southwark Council and NHS Southwark Clinical Commissioning Group (CCG) is intended to engage with the community of Southwark to understand the key priorities across all ages and during the life-course and across our diverse community. A draft of this Joint Strategy will be delivered in January 2017.

Mental health is more than the absence of mental illness. There is increasing evidence identifying protective psychological and environment factors. Psychological protective factors include the development of resilience in the face of stressful life events, including the stress experienced during key transitional points. Positive protective factors include the development of a positive or optimistic outlook; a perception of a level of control over one's social environment; the belief that one has purpose in life; and the fostering of autonomy and self-acceptance. Positive environmental factors include economic wellbeing, access to education, training and employment, stability in accommodation and positive family and peer relationships.

We need to challenge stigma, discrimination and prejudice along the lines already established in the national 'Time to Change' programme (www.time-to-change.org.uk). Other forms of discrimination, including racism and discrimination on the basis of sexual identity have a detrimental impact on emotional wellbeing and mental health and we must reach out to groups subject to discrimination to better understand how we can effectively intervene.

For these reasons, the recommendations of the Scrutiny Committees have been very helpful in helping to shape our development of our joint strategy with Southwark CCG. This report provides information on our current progress and future intentions.

RECOMMENDATIONS

1. That cabinet note the current actions that are being taken to address the key recommendations made by the Scrutiny Sub-Committees in their report on the development of a Southwark Joint Mental Health Strategy with NHS Southwark Clinical Commissioning Group (CCG).
2. That cabinet note additional actions to be taken to address a number of the key recommendations.

BACKGROUND INFORMATION

3. This report responds to the recommendations made by the Education & Children's Scrutiny Sub-Committee and the Healthy Communities Sub-Committee in their joint report that was received by cabinet in July.
4. Councillor Helen Dennis was appointed as Deputy Cabinet Member for Mental Health.
5. On 8 December 2015, Cabinet approved the drafting, engagement and delivery of a Joint Southwark Mental Health Strategy with NHS Southwark CCG.
6. The Education Children's and Scrutiny Sub-Committee met in February 2016 to consider the work undertaken on the Southwark Children and Young People's Mental Health and Well-Being Transformation Plan 2015-2020. A joint meeting held on 2 March 2016 of the Children's and Education Scrutiny Sub-Committee and the Healthy Communities Sub-Committee to inform its joint inquiry in preparation for the joint mental health strategy.
7. The council and CCG jointly commissioned Contract Consulting (Oxford) Ltd to undertake consultation and drafting of Joint MH Strategy. Work began in September 2016. It is anticipated that a full draft joint strategy will be delivered in January 2017.

KEY ISSUES FOR CONSIDERATION

8. Each of the Scrutiny Sub-Committees' key recommendations is set out below in italics, followed by the lead cabinet member's response:

Children and Education Scrutiny Sub-Committee and the Healthy Communities Sub-Committee recommendations

Recommendation 1: *Both the Children and Education Scrutiny Committee and the Healthy Communities Committee would recommend that the best practice guidance developed by the Centre for Mental Health forms the cornerstone for the approach taken to developing the Joint Mental Health Strategy for Southwark.*

The Centre for Mental Health publications on best practice in mental health will be used as key reference points to inform the recommendations of the

Southwark Joint Mental Health Strategy.

Recommendation 2: *Both the Children and Education Scrutiny and the Healthy Communities Scrutiny Sub-Committees would request that the final report is presented to scrutiny when finalised.*

The final draft version of the joint mental health strategy report will be presented to both Scrutiny Sub-Committees.

Education and Children's Services Scrutiny Sub-Committee recommendations

Recommendation 3: *The committee recommends that the council and CCG detail the global CAMHS spend now and once the Transformation Plan is implemented and funds drawn down, year by year, with a budget for each service.*

Information on the level of financial investment in Southwark children and young people mental health services is set out in the original Southwark Children and Young People's Mental Health and Well-being Transformation Plan. Additional funding is shown in the tables setting out priority service areas in section 8. An updated, 'refreshed report' (October 2016) will be submitted to NHS England for assurance. Funding will be tracked in future years. The Transformation Plan is posted on the NHS Southwark CCG website, with a link through from the Southwark Council website.

Recommendation 4: *The committee recommends that the council and CCG provide more detail on Early Help investment, now and in the future.*

Southwark Families Matter is the broad offer that supports children, young people and families in need. Families Matters is not limited to children's and young people's mental health and wellbeing, but much of the information, advice and support provided is intended to have a beneficial impact in promoting wellbeing. The Early Help offer has been extended through the Transformation Plan, by providing additional resources into several key areas, including developing further information through the Family Information Service and locating CAMHS clinicians within Southwark Social care teams. It is also intended to locate a CAMHS specialist clinician within the Youth Offending Service (YOS).

Forging better working between schools and CAMHS services has been supported through funding 19 Southwark school projects, to build emotional wellbeing and mental health capacity in schools. Projects focus on developing the school workforce, the development of mentoring, and mindfulness programmes.

Recommendation 5: *The committee recommends that the council and the CCG consult with the Headteachers' Executive on the link arrangements with CAMHS and the Early Help provision, the pilot project, to ensure the proposed Children and Young People's Emotional Wellbeing Strategy will deliver better communication and integration between schools with mental health practitioners and social care, including housing.*

The Director of Education and the Director of Children and Families meet regularly with headteachers. The Headteachers' Executive will have an

opportunity to contribute their experience and views to the Southwark Joint Mental Health Strategy consultation and development, including how communication and integration can be improved with CAMHS services.

Recommendation 6: *The committee recommends that the adoption of a whole school approach to mental health and emotional wellbeing in the Children and Young People's Emotional Wellbeing Strategy is well promoted and a plan is developed for its implementation in partnership with the Headteachers' Executive and local schools. Case studies from Bacons College and schools with positive practice in this area should be promoted around Southwark schools.*

The whole school approach is recommended in 'Future in Mind' (2014) and by Public Health England in its guidance 'Promoting children and young people's emotional health and wellbeing - a whole school and college approach' (2015). This is being supported in Southwark schools through the additional investment provided by the Transformation Plan. Representation of Southwark Headteachers as members of the Southwark Health and Wellbeing Board will help champion a whole school approach. Nationally endorsed studies show that the use of peer support, mentoring and resilience training at a school level support the development of good mental health. We will take account of evidence from Bacons College in the development of the Transformation Plan and Joint Strategy.

Recommendation 7: *The committee recommends that a schools representative on the Health and Wellbeing Board is appointed. This could be done through the Southwark Headteachers' Executive.*

A Headteacher has now joined the Health and Wellbeing Board.

Recommendation 8: *The sub-committee recommends that the council and the CCG set out more clearly how the Transformation Plan will tackle:*

- *Cyber bullying*
- *Gangs and work with schools on this*
- *Promote effective anti-bullying work in schools, particularly peer support*
- *Recognise the LGBT students are at particular risk of being bullied and need particular support e.g. anti-discrimination work and LGBT peer support.*

Often mental health services treat the outcome and not the root of the problem causing mental ill-health. By working with schools and colleges, the youth offending service and other youth services, we believe that skills and resources can be brought to bear to intervene earlier in the course of mental distress.

There is evidence of a link between depression and being bullied in young people that continues to have an impact into adult life. However, many victims of bullying will not tell anyone about it. Some evidence also suggests that disclosure to a trusted adult of the young person's choice is more effective than referral to specialist services.

The increased use of social media by young people opens up a risk of cyber-bullying. This and other negative impacts of social media have been discussed at Southwark Children's Safeguarding Board, following work conducted by Southwark's Family Information Service on e-safety in May 2016. Southwark's Family Information Service found useful guidance for parents and young people

on staying safe while using social media and this is available on its resource pages. We will continue to work with Change Makers and other young people groups to understand what will support young people to stay safe - and how to communicate this effectively using social media.

We will continue to work through the Transformation Plan to place a CAMHS specialist practitioner with the Youth Offending Service, as we believe this will make a constructive contribution to tackling work on the impact of gangs.

We will seek to work with LGBT youth to foster peer support and other anti-discrimination work to protect mental health and wellbeing.

Recommendation 9: *The committee recommends that the council and the CCG differentiate more clearly gender specific data and services that address specific risks, for example: evidence that rising mental health needs are particularly affecting girls; anecdotal evidence that boys find it more difficult to speak about emotional problems; data that boys are less likely to access services but are more at risk of suicide completion or involvement in offending.*

We will review the evidence on the differential impact of gender in relation to mental health and wellbeing and approaches that support effective interventions during the development of the Joint Mental Health Strategy.

Recommendation 10: *The committee recommends that the council and CCG support outreach work with communities to break down taboos (e.g. Black Majority Churches Project).*

There are *already* good local examples of the impact of focusing mental health prevention programmes to specific community groups. We will review this during the development of the Joint Mental Health Strategy.

Recommendation 11: *The committee recommends that the council and CCG should ensure that mental health services meet the cultural needs of diverse communities and take steps to tackle institutional discrimination, particularly those most at risk e.g. girls from FGM practicing communities, black & Asian communities from psychosis & schizophrenia.*

We will review with providers their approach and effectiveness in taking into account cultural needs during our engagement on the Joint Mental Health Strategy. The Transformation Plan has combined with Lewisham, Lambeth and Bromley to commission NSPCC to better understand how to improve mental health service response to sexual assaults, sexual exploitation and female genital mutilation. This will be used to shape a more effective response.

Recommendation 12: *The committee recommends that the council and the CCG involve service users from a wide ethnic demographic in developing the Transformation Plan and getting the user voice, bearing in mind that disadvantaged groups are generally more at risk of mental health problems.*

The approach to be *taken* in engaging stakeholders during the development and consultation of the Joint Mental Health Strategy are intended to be inclusive and open. The consultants undertaking this have a good track-record in holding open engagement events.

Recommendation 13: *The committee recommends that the council and its partners should make every effort to ensure that the education of vulnerable children or young people is not disrupted through housing placements.*

We will review this specific matter with housing colleagues as part of Joint Mental Health Strategy, taking into account the evidence previously provided to the Education and Children's Scrutiny Sub-committee.

Recommendation 14: *The committee recommends that there needs to be a much more integrated approach to working between all partners for children and young people with mental health issues including the housing department.*

Recent examples of a better, more integrated approach between the Children's and Adults Directorate and the housing department has been in the work of reviewing 16+ accommodation for care leavers with the housing department. Involvement and support of senior housing officers in the implementation of the Mental Health Social Care Review implementation has been productive. We hope this can be built upon further.

Recommendation 15: *The Committee recommends that a housing representative is included on the Health and Wellbeing Board.*

This is a *matter* for consideration by the Health and Wellbeing Board.

Recommendation 16: *The Committee recommends that SLaM, Kings and GSST work with mental health users to assess the adequacy of the paediatric A & E and Place of Safety and report back in six months' time on both user experience and patient wait times for admission when in crisis.*

Since March *there* has been significant progress in engagement through the work of Southwark Healthwatch and other neighbouring borough Healthwatch organisations, working with South London & Maudsley Mental Health NHS Foundation Trust (SLaM), in engaging with users with direct experience of being subject to mental health formal detention in the development of the Single Place of Safety at the Maudsley Hospital. It is hoped that a similar approach and level of engagement can be used in reviewing the approach at other key points of access at times of crisis into the system.

Recommendation 17: *The committee recommends that health and social care service managers in children's and adults' services must work together in an integrated way to ensure a smooth and gradual transition for young people. Good practice should involve, for example, developing a joint mission statement or vision for transition, jointly agreed and shared transition protocols, information sharing protocols and approaches to practice.*

This *continues* to be a key area of attention both for mental health as well as for young people with disabilities. A programme of work has been commissioned with the Institute of Public Care (IPC) at Oxford Brookes University, to provide an

option appraisal for the development of a 0-25 years pathway for children and young people with disabilities.

Recommendation 18: *The Committee also recommends that the council and CCG provide an update on the practical steps that will be taken to address Transition.*

The 0-25 years pathway was recently reviewed at the Children & Young People Commissioning Development Group. Further work will need to be undertaken to fully understand the impact of changing the current configuration of Southwark children and adults' social care and NHS provided services.

Recommendation 19: *The Committee recommends that the council and CCG develop a mental health service for young people that spans the ages of 12-25, during the years of highest mental health prevalence, so that young people do not have to transition at 18, during the peak of symptoms.*

The 0-25 years pathway development has the potential to assist in addressing the issue of the 'burden of disease' issue for young people experiencing significant mental health problems during this period of the life-course. However it has significant implications for service configuration across children and adult social care, education and health. These are being considered by IPC currently.

Recommendation 20: *The Committee recommends that the council and CCG add Permanently Placed children, LGBT young people, and children and young people experiencing economic and social deprivation to the cohorts of 'at risk' young people.*

The Transitional Plan has targeted extra resources to improve health outcomes and increase the stability of placements for looked-after children.

Recent work by Dr Sarah Teague in Southwark has looked at Young People's health, with a focus on risky behaviour. This has been helpful in identifying key areas of need, service gaps and the scope for local innovation to address needs and close gaps.

Service gaps include:

- Clear and widely known pathways for young people who need psychological support who do not meet CAMHS referral thresholds and to help those on CAMHS waiting lists;
- Improved transition between child and adult mental health services;
- Sexual health outreach to vulnerable groups, such as those in hostels and the youth offending service.

The proposal is to start to consider key risky behaviours in young people aged 10-25 years, consisting of self-harm; substance misuse; gang violence and sexual health. This is a dynamic approach to considering behaviour, rather than defining static 'at risk' groups warrants greater analysis. It opens up the possibility of combining services that are currently defined and delivered separately by health service type (e.g. CAMHS, substance misuse, sexual health).

Recommendation 21: *The Committee recommends that Southwark’s strategic partnership must ensure that responsive services are in place to provide therapeutic support from Child and Adolescent Mental Health Services (CAMHS) to young people who were at risk of, or who had suffered, child sexual exploitation.*

A commissioning framework, building on the work carried out by NSPCC, will be developed to improve the mental health service response to child sexual assault, exploitation and female genital mutilation.

Recommendation 22: *The Committee recommends that there are good communication, training and awareness sessions across all of the partnerships required to bring the mental health strategy to life.*

Recommendation 23: *The Committee recommends a multi-layered communication campaign that can raise awareness amongst the partners and signal a need for a significant culture change to transform mental health from a ‘Cinderella service’ to one that places service users at the centre of an integrated service designed to improve outcomes of its most vulnerable residents.*

We recognise the importance of effective communication and raising awareness around mental health issues across partner and stakeholder groups, to bring the joint mental health strategy to *life* in Southwark. There are already examples that have already been deployed that will help this to be designed into implementing strategy:

- The work currently being undertaken on engagement around the development of the Joint Mental Health strategy includes the use of a dedicated twitter account (#Southwarkwellbeing) and two large-scale ‘Open Space’ workshop events that took place during November, as well as interviews and other sessions with partners, stakeholders, users and carers to raise awareness and seek involvement;
- similar open communication methods were used by Healthwatch Southwark in its recent work on mental health, and published as “Young voices on mental health” (November 2016) as well as in planning for the implementation of the Southwark Mental Health Social Care Review. There is already good experience in providing mental health and wellbeing information through our ‘Local Offer’ work and the new Southwark Schools website (schools.southwark.gov.uk).

We would expect the Joint Mental Health Strategy to have a communication plan as part of its implementation. In terms of staff training and mental health awareness, we will look to lessons learnt from the implementation of Making Every Contact Count (Local Government Association 2014) and locally from staff Dementia Awareness training.

Healthy Communities Scrutiny Sub-Committee Recommendations

Recommendation 24: *The Committee recommends that the council looks to form partnerships with housing associations and credit unions, amongst others to be identified, in order to better identify people who would benefit from support with their mental health and improve the holistic support those with mental health issues receive.*

There has already been some work with housing associations currently providing support who are identified with mental health issues who require support to maintain or move onto further independence. The *Joint Mental Health Strategy* will consider how debt has a bearing on poor mental health and how credit unions may also assist.

Recommendation 25: *The Committee further recommends that the work of programmes such as the faith communities' project continues to be funded to help combat stigma around mental health and their work to date is reflected in the Joint Mental Health Strategy. This should include rolling out similar programmes to other ethnical minority groups including Irish, Asian and Latin American communities.*

This will be considered as part of the Joint Mental Health Strategy.

Recommendation 26: *This Committee believes that as part of the Joint Mental Health Strategy, the housing teams, reablement teams and community support teams should be trained to identify mental health issues to further help support those older members of our community with whom they regularly interact with.*

Recommendation 27: *Furthermore, the Committee notes that the voluntary sector is taking an innovative approach to supporting the older population who have mental health needs and would task the council with considering similar approaches.*

We will look to consider the further applicability of 'Every Contact Counts', developed by MIND and Public Health England to Southwark. COPSINS (The Consortium of Older People's Services in Southwark) has recently produced an operating framework proposal that will be considered as part of the implementation of the Southwark Voluntary and Community Sector Strategy. This could make a significant contribution to the local further development of a Dementia Pathway and help secure Southwark's position as an 'age-friendly' borough.

Recommendation 28: *The Committee would recommend that the council and the CCG seek to understand the links between mental health and dementia and establishes a programme for supporting older residents who present with symptoms of either condition to ensure a correct diagnosis.*

This is envisaged in the local development of our local Dementia Pathway.

Recommendation 29: *The Committee recommends that the council seek to ensure that the Joint Mental Health Strategy dovetails with other relevant strategies, to ensure that every approach is taken to identify and treat mental health at the earliest opportunity.*

The commissioning of the development of the Joint Mental Health Strategy included this in its terms. The specific strategies we wish to see a strong connection to include:

- Southwark Five Year Forward View of Health and Social Care;
- Southwark's tri-partite Voluntary and Community Sector Strategy: 'Common Purpose, Common Cause';
- All-Age Autism Strategy;

- 0-25 years Pathway for children and young people with disabilities;
- - Southwark Housing Strategy;
- Families Matter.

Recommendation 30: *The Committee recommends that as part of the Joint Mental Health Strategy, there is a focus on encouraging GPs to consider mental health concerns as part of their diagnosis of seemingly unexplained symptoms, and continue to assess for it as part of the management of long-term conditions.*

Recommendation 31: *The Committee recommends that the CCG works with GP surgeries throughout Southwark to provide signposting to voluntary and charitable organisations who can offer support to those with mental health concerns and would ask that this is built into the Joint Mental Health Strategy.*

The Mental Health Commissioning Development Group recently considered and supported the approaches *available* for the further development of Primary Mental Health Care and for the co-ordination of an approach that incorporates elements of shared care, navigation/signposting and self-management. The navigation approach does include signposting to voluntary sector.

Recommendation 32: *The Committee recommends that the Joint Mental Health Strategy take into account the findings of the Joint Health Scrutiny into SLaM Places of Safety and incorporate these into their strategy as appropriate.*

The Joint Health Overview Scrutiny Committee met on 6 October to review proposals for the establishment of a Single Place of Safety at Maudsley Hospital. Subject to agreement upon operational matters between the four boroughs, the Single Place of Safety will open shortly. The lessons learnt from *this* process will be incorporated into the Joint Mental Health Strategy, including the meaningful involvement of mental health service users in the design and delivery of services and the involvement of Southwark Healthwatch. The Joint Health Overview Scrutiny Committee will review progress after six months of operation.

Recommendation 33: *The Committee commends the MindBody programme and the work it is doing to up-skill the workforce. We would recommend that the Joint Mental Health Strategy evaluates the MindBody programme and incorporates the relevant elements of the programme into the plans for training for our workforce in Southwark.*

This will be reviewed, alongside Every *Contact* Counts and other workforce initiatives, as part of the work towards establishing our local Joint Mental Health Strategy. We will also work with our Organisational Development (OD) team colleagues on this matter.

Policy implications

9. In making this response, the following policies have been taken into account:
 - Southwark Council's Fairer Future Vision, specifically "*Working with everyone to realise their potential*"
 - Together we can deliver a better quality of life in Southwark: Our Vision for Adult Social Care (see Background Information for link).

- The duties of the council in relation to The Care Act 2014.

Community impact statement

10. This report provides a response to the Scrutiny Sub-Committees' submission to Cabinet on the development of a Southwark Joint Mental Health Strategy and has taken account of the community at large and also people identified as possessing "protected characteristics" in our community, as outlined in the Equality Act 2010 and the council's approach, in formulating the recommendations of this report. No specific equality implications were identified that pertain to this report.

Resource implications

11. This response to the Joint Scrutiny Sub-committees' response is made within the council's budgetary framework.

Legal/financial implications

12. There are no specific legal implications in relation to this response to the development of the Joint Mental Health Strategy provided by the Joint Scrutiny Sub-Committees report submission.

Consultation

13. Joint Scrutiny Sub-Committees report sets out the consultation that was undertaken in regard to the response made to Cabinet.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Southwark Mental Health Social Care Review. August 2015		
Link: http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=5568		
Southwark Children and Young People's Mental Health and Wellbeing Transformation Plan 2015-2020		
Link: (copy and paste into browser) http://www.southwarkccg.nhs.uk/news-and-publications/publications/policies-strategies-registers/Documents/Children%20and%20young%20people's%20mental%20health%20and%20wellbeing%20transformation%20plan.pdf		
Southwark Five Year Forward View of Health and Social Care. April 2016		
Link: (copy and paste into browser) http://www.southwarkccg.nhs.uk/news-and-publications/publications/policies-strategies-registers/Documents/Southwark%20Five%20Year%20Forward%20View%20summary.pdf		
Commissioning for Young People in Southwark: Children and Young People's Wellbeing Strategic Framework – Young People's Health (10-25 years) with a focus on risky behavior. Dr Sarah Teague. October 2016		
Link: http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&MId=5376&Ver=4		

APPENDICES

No.	Title
None	

AUDIT TRAIL

Cabinet Member	Councilor Richard Livingstone, Adult Care and Financial Inclusion and Councillor Victoria Mills, Children and Schools	
Lead Officer	David Quirke-Thornton, Strategic Director of Children's and Adults' Services	
Report Author	Dick Frak, Interim Director of Commissioning	
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Dated	1 December 2016	
Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments sought	Comments included
Director of Law and Democracy	No	No
Strategic Director of Finance and Corporate Governance	No	No
Director of Adult Social Care	Yes	Yes
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