

STP Mental Health Programme Board

Summary

East Surrey and Sussex Sustainability and Transformation Partnership (STP) has set up a Mental Health Programme Board. The overall aim of the Board is to help work out how the voluntary sector, local authorities and NHS can work better together to meet the needs of the patients, carers, families and local communities we serve. If we get this right, the work will help us deliver on plans to improve services for our local population through making best use of the combined resources we have available. The briefing provides the background to the Board being established, what has happened so far and what happens next.

Context

As an STP, we want to provide the best possible care and treatment to the people who use our services. That means getting help to people at the earliest opportunity, providing specialist advice and support to them on all aspects of their life which affect their mental health and wellbeing, and helping people stay well and out of hospital wherever possible. Individual organisations are already doing a lot to make this happen. By combining our expertise and resources, we can build on this, try new things and put ambitious ideas into practice that might not be possible if we continued to work in isolation.

Bringing physical and mental health more closely together, to improve patient care, is a particular priority for our STP. Too often people get 'bounced around' different parts of the system between different health and social care organisations. This isn't good for patients or families, and doesn't help us make the best use of public money. At the same time, mental health services are under sustained operational and financial pressure, meaning we simply cannot continue providing services in the way we currently do.

To address these issues, we need to think about what's in the best interests of the people who use our services rather than the best interests of individual organisations. We need to fit services around the needs of patients rather than expecting them to fit in with how we work.

Aims

The specific aims of the STP Mental Health programme are to

- harness the opportunity that the STP provides - by bringing 24 health and social care organisations together in partnership - to look at how mental health services are planned, commissioned and provided, and how this can be improved;
- identify new ways of working together across the STP to improve services and outcomes for people who use mental health services and their families; and
- provide assurance to NHS England that our STP is meeting the requirements of the 5 Year Forward View for Mental Health (the national strategy to improve mental health services).

The story so far

As a first step, our STP Executive commissioned a strategic review of mental health. This involved looking at local data, knowledge and examples of positive practice. It also involved workshops with people from across the health and social care system, including clinicians and people with lived experience.

In Autumn 2017, we published the outcome of the strategic review and the case for change. This highlighted that:

- On average, men in contact with mental health services in our area have a life expectancy 20.6 years less than the general population. This is higher than the national gap for males (19 years in England).
- Women in contact with mental health services live, on average, 15.7 years less. This is similar to the national gap.
- This inequality gap widens as people age: people aged 65 are likely to have around 50-60% of the remaining life expectancy of the population not in contact with mental health services.
- Mental health service users are around 2-4 times more likely to die of cancer, circulatory or respiratory disease than the rest of the population.
- Approximately 20% of all A&E attendances and emergency admission can be attributed to mental health service users – who make up only 7% of the overall population.
- A recurrent investment of £7.3m in mental health will improve services for patients, at the same time as providing a gross saving of £17.5m and net savings of £10.2m for local Clinical Commissioning Groups.

The strategic review and case for change identified specific areas for action which can be grouped into four key themes:

1. **Promotion and prevention**, which is about getting help to people earlier and working with the wider community to understand and address mental health need
2. **More integrated, joined up care** such as by providing a single point of access into services (to avoid people being 'bounced around' the system) and working to address the reduced life expectancy experienced by people who use mental health services.
3. **Better, more integrated urgent care** to make it easier for people to get help when they need it.
4. **More effective partnerships** such as by building on the success of our Recovery College model in helping people better manage and maintain their own mental health and wellbeing, reducing reliance on traditional services where possible.

At the same time, work was started on a detailed appraisal of how resources are currently allocated across the voluntary sector, social care and NHS for the provision of mental health services. This will inform decisions about how resources are allocated to mental health (though this is not about reducing mental health expenditure). This may lead to specific proposals to change services. It could also identify where there are particular issues and services which need attention.

A delivery plan was developed to determine how we could address the areas for action identified within the strategic review. This has been reviewed and extended to include children and young people's mental health services.

What is happening now

The STP Mental Health Programme Board met for the first time on 28 June 2018. Having undertaken, published and considered the strategic review, we now need to move into delivery mode with emphasis on what we will do as an STP to improve mental health care, how we will do it and by when.

The Programme Board will oversee a fortnightly Delivery Group which has identified initial areas for action:

- 24/7 urgent care for adults and children
- how patients move between different parts of the health and social care system and how this could be improved (referred to as 'patient flow')
- rehabilitation, particularly in relation to how we can keep people well out of hospital
- suicide prevention
- expanding our recovery / discovery college model to help people become experts in managing their own mental health and wellbeing (through courses which are co-designed and co-delivered by people with lived experience and clinicians)
- improving healthcare for people with both physical and mental health conditions, including dementia

Plans are being developed in each of these areas. Work streams have also been set up in key areas that will help us make progress: finance, workforce and clinical intelligence. We are also working on how we make sure there is clinical and service user involvement in every aspect of the mental health programme.

Conclusion

This work is complex and difficult. We are undertaking it at the same time as having to manage significant, sustained operational and financial pressure. That said, this is the first time we have got the 24 health and social care organisations across East Surrey and Sussex working together in this way (rather than in isolation). Our ambition is bold and won't be easy to achieve. But we have made a collective commitment to work together to achieve it, in order to improve care, treatment and support for the patients, families and local communities we serve.

Where to find out more

<http://www.seshealthandcare.org.uk/priority/mental-health/>