

JSNA Mental Health Deep Dive Update

Summary of progress against findings and feedback arising from the JSNA mental health deep dive work

1. The following is a summary of progress made against the findings of the mental health JSNA deep dive work including the feedback received at the engagement event. The update is provided under themed headings.

a. Collaborative working

A discharge protocol has been agreed between housing options and the mental health provider to ensure safe and effective discharge planning occurs.

Housing, social care and mental health teams are working collaboratively in a task and finish group to create joint, sustainable and person-centred solutions for service users who have complex, housing support needs.

Partners worked closely with Healthwatch York on the development of the local support services directory which has been well received

b. Self harm

York Teaching Hospital NHS Foundation Trust undertook a clinical audit of children and young people who presented at the emergency department and this supports the developing work around mental health liaison. The wider prevention and awareness agenda of the Future in Minds programme involves working with school clusters and 'up skilling' workforce groups to recognise and signpost individuals in need. There is also an ongoing needs assessment on self harm being undertaken as part of the Joint Strategic Needs Assessment process.

c. Recovery

Excellent examples of recovery programmes from around the city and with the new mental health provider there is now a great opportunity to link these across a city and vale-wide 'recovery network'.

d. Crisis Care Concordat and crisis response

Multi-agency teams have worked well with the local health-based place of safety, street triage and psychiatric liaison functions demonstrably improving outcomes for service users.

e. Parity of esteem

This work is underpinning all new initiatives system-wide.

2. In more specific terms the following priorities are being taken forward:

a. Collaborative working

- The newly formed task and finish group for service users with complex, housing support needs will work with the emerging and evolving pathways of care from the new provider.
- The Pathways Together collaborative project is working with an identified group of service users with multiple needs and complex demands on a range of agencies to address their issues in a structured, person-centred manner. This project has also tackled some of the thorny issues relating to information-sharing.

b. Self harm

- The Future in Minds programme is working across the education sector in pilot clusters of schools and with children and young people to de-stigmatise mental health and to ensure the workforce can recognise, support and signpost children and young people with emerging needs; early intervention is key to the successful delivery of this programme and the pilot schemes will be evaluated.

- A multi-agency time limited steering group is working on a self harm 'deep dive' as part of the JSNA process.

c. Recovery

- The new, longer contract for mental health services allows for the development and longer term investment into services. One of the key aspects of the new contract was the requirement that the new provider will form partnerships with other from the very active voluntary and third sector in York to ensure that recovery is sustainable. This should be more evident over the next twelve months.

d. Crisis Care Concordat and crisis response

- The multi-agency group will now look to review and streamline the urgent crisis care pathways by engaging with service users, their carers' and other agencies. Nationally and locally there is a need to look at access to and availability of both AMHPs and Section 12 doctors.

e. Parity of esteem

- The work on psychiatric liaison functions needs to be followed by developing physical health checks in mental health services.

3. In addition to the above updates areas of work which require significant additional investment will of course be impacted given the pressures on the local health and care system where all resources are already committed. That said, the national drive towards more local integration of service delivery and the focus on parity of esteem for mental health requires even greater collaboration and partnership working.
4. Additionally, the local system was placed under even greater pressure when Bootham Park Hospital closed for both inpatient and outpatient services just prior to the commencement of the new mental health and learning disability services contract.

Despite the obvious impact that this closure has had the system responded swiftly and efficiently to address the needs of service users and carers’.

5. Without the closure some plans would have already commenced to make local system improvements. During 2016 Tees, Esk and Wear Valley NHS Foundation Trust will be sharing details of their plans for service development and opportunities for service user, carers’ and wider stakeholder engagement and input.
6. To ensure that the richness of the findings and needs identified from the work on the Joint Strategic Needs Assessment is not lost with all the changes, the Mental Health and Learning Disabilities Partnership Board will be overseeing the development of a mental health strategy and implementation plan for the City and Vale of York which will give clear objectives and timelines on delivery. Progress against the plan will then be regularly reported to the Health and Well-being Board.
7. Specifically it would be useful to highlight the following to the Health and Wellbeing Board:
 - a. **Collaborative working**
 - Support for imaginative and creative person-centred solutions from the task and finish group for housing support.
 - Continue to stimulate the rich resource of the local voluntary and third sector agencies to work in conjunction with and to augment local service delivery.
 - b. **Self harm**
 - Encourage a multi-agency collaborative approach to work to tackle self-harm at first presentation and work with groups to reduce the incidence and minimise the damage.
 - Build on de-stigmatising mental health to ensure that people have the opportunity to discuss their mood, thoughts and feelings with a view to being signposted to expert or peer group help and support.

c. Recovery

- Take the opportunity to look at areas where technology has led to innovation in models of both service delivery and recovery according to the needs of service users and/or their carers’.
- Further develop the work done to date and build a sustainable recovery college network with stakeholder organisations.

d. Crisis Care Concordat and crisis response

- Further embed the evolving functions of the crisis response and urgent care pathways for mental health across all partners.
- Continue to develop the collaborative partnership.

e. Parity of esteem

- The development of a multi-agency strategy for mental health and an implementation plan will help to maintain the focus on mental health and to ensure that consideration of mental health issues underpins everything local stakeholders do.

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