



Health and Wellbeing Board

5 May 2021

Report of the independent Chair of the Health and Wellbeing Board's Mental Health Partnership and the Accountable Officer; NHS Vale of York Clinical Commissioning Group

York Mental Health Summit

1. This report presents the Health and Wellbeing Board with information about the recent York mental health summit and how the outputs from the summit are being progressed.
2. Improving and supporting the emotional and mental wellbeing of York residents is a key priority for the Health and Wellbeing Board as set out in both the joint health and wellbeing strategy and the all age mental health strategy. To demonstrate one strand of work that has recently take place to address this the board are asked to receive this report.
3. The board are asked to note the report and ensure that adequate resources are made available within their individual organisations to progress these within the timescales identified within the action plan at **Annex A** to this report.
4. The independent Chair of the Health and Wellbeing Board's Mental Health Partnership and/or the Accountable Officer; NHS Vale of York Clinical Commissioning Group will be in attendance to present the report.

Background

5. Significant progress has been made in terms of the treatment and prevention of coronavirus but there is also a need to see an equally robust response in terms of the mental health of York residents of all ages. There have been detailed academic predications that the impact on the most vulnerable will be significant and services across the city are expecting to see large increases in demand for



both children's and adult mental health services. This is unprecedented and extraordinary and there is a need to act now to address what we should be doing differently.

6. The response to the pandemic has shown that there is a real willingness in the city to work together and plans are in place for considerable changes across community mental health services with some good innovation in specific areas. However, there is a need to do more in a coordinated manner across the public, private and voluntary sectors with leaders pledging to respond and encourage innovation. Neglecting to respond effectively to the mental health situation in the city will leave a future generation with significant challenges.
7. In light of this, the Accountable Officer at NHS Vale of York Clinical Commissioning Group and the Independent Chair of the York Health and Wellbeing Board's Mental Health Partnership agreed to hold a mental summit for senior leaders in York. The summit was a call to action to address the predicted surge in mental health need and the increased pressure on services across the city
8. This took place on 26th March 2021 and was well attended by senior representatives from key organisations across the city. Representatives were in attendance from NHS Vale of York Clinical Commissioning Group; City of York Council; Tees, Esk and Wear Valleys NHS Foundation Trust; York Teaching Hospital NHS Foundation Trust; North Yorkshire Police; Public Health England; York CVS; York MIND; York University, Humber, Coast and Vale and primary care. Also in attendance were the two York MPs.

Setting the scene

9. The summit started with a number of presentations which set the scene for ensuing discussions and an action planning session. To help inform their discussions attendees at the summit heard from;
 - A representative of Public Health England (Yorkshire and Humber region) who spoke about the impact of the pandemic on people's mental health from a public health perspective;



- A representative from Tees, Esk and Wear Valleys NHS Foundation Trust in relation to the predictions for a post lockdown increase in demand for mental health services across system partners;
 - The Police, Fire and Crime Commissioner for North Yorkshire who spoke about complexity of dealing with mental ill health in the criminal justice system; particularly in relation to young people;
 - A representative from Tees, Esk and Wear Valleys NHS Foundation Trust in relation to the ongoing community mental health services transformation programme
 - A representative from the York Mental Health Partnership in relation to the Northern Quarter Project and the vision for 'connecting out city' and developing a community approach to mental health
 - The Programme Coordinator for the York Multiple Complex Needs Network who spoke about the ongoing work the network is doing
 - The Chief Executive at York CVS who spoke about loneliness, which is one of the common issues that CVS hear about on a daily basis; the challenges the VCS faces and what we can do differently together to meet the challenges of the whole system.
10. Following this attendees at the summit split into three separate groups to discuss what might need to happen across three distinct time spans:
- Group 1 – What can we do this summer (6 months) short term
 - Group 2 – What need to happens in the next 18 months (medium term)
 - Group 3 – What needs to happen by 3 years (longer term)



11. A number of priorities and actions were identified as a result of the group discussions and these have been formulated into a draft action plan which is at **Annex A** to this report.
12. A small group of leaders have since met and have been tasked with driving this forward at pace to ensure that we are in a position to effectively manage the surge in the need for mental health services in the city.

Consultation

13. There was no formal consultation undertaken prior to holding the mental health summit. The summit was held in response to the predicted surge in the need for mental health services. There may be a need to consult and engage on individual actions as work progresses but this will be managed by the individual action leads.

Options

14. There are no specific options for the Health and Wellbeing Board but they are asked to:
 - Note the report
 - Ensure that adequate resources are made available within their individual organisations to progress the actions within the timescales identified in the action plan at **Annex A** to this report.

Implications

15. Mental illness and poor mental health is common, mental health problems are persistent and costly and a leading cause of sickness absence. The Cost to the UK economy is up to £100 billion per year and has wide ranging impacts on life chances. There is a significant treatment gap where 75% of those with a mental health need receive no treatment at all. People with severe mental health issues are subject to a premature mortality gap. In addition Suicide is one of the leading causes of death for people between the ages of 10 and 34.



Impact of Covid – 19:

16. Almost 20% of the population will need either new or additional mental health support as a direct consequence of the crisis. More than 1 in 10 of those with support needs will be aged under 18 and about two-thirds of people who will need support already have existing mental health needs.
17. The population groups that appear to be disproportionately affected include (for adults):
 - young adults and women
 - adults with pre-existing mental health conditions
 - adults who were not in employment before or since the lockdown
 - with low household income or socioeconomic position
 - with long term physical health problems
 - living in urban areas
 - living with children
 - who have had coronavirus related symptoms
18. The proportion of children experiencing a probable mental disorder has increased over the past three years, from one in nine in 2017 to one in six in July 2020
 - Children and young people with a pre-existing mental health condition
 - Children and young people in low-income families
 - Children with Special Educational Needs and Disabilities
 - Young carers
 - Children and young people Not in Education, Employment or Training
 - Young females
 - Students



What did TEWV find in May 2020?

- An expected increase in prevalence of mental illness / reduced mental wellbeing
- An additional 10% of CYP population having mental health issues each year for 5 years, 4.6% of adult population (18-64) and 4.3% of older people (65+)
- For TEWV secondary care services the potential impact was a 60% increase in CAMHS referrals, 40% for Adults and 20% for older people

What is happening now?

- The MH Surge is happening, mainly impacting on:
 - Primary care
 - Voluntary sector
 - Eating disorder services (CYP and Adults)
 - Crisis / inpatients (especially people not previously on caseloads)
- The Volume increase is less than forecast (for now) but complexity / acuity of referrals has increased so secondary care clinical staff under a lot of pressure

New research and Intelligence from TEWV and partners

- Revised (reduced) unemployment expectations
- Now expect secondary care share of the surge to be lower than in the pre-C19 world due to investment in VCS, Long Covid clinics, NHS Resilience Hubs etc.
- We have not finished our reforecasts but we expect the forecast increase to be lower than in May.
- Adult increases possibly around 20% of pre C19 demand, not 40%. CAMHS and older people not completed yet.
- We still expect the impact to go on for another 4 years.



Recommendations

19. The Health and Wellbeing Board are asked to
- i. Note the report
 - ii. Ensure that adequate resources are made available within their individual organisations to progress the actions within the timescales identified in the action plan at **Annex A** to this report.

Reason: To give the Health and Wellbeing Board oversight of the outputs from the recent mental health summit

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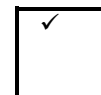
Report
Approved



Date 22.04.2021

Specialist Implications Officer(s): None

All



Wards Affected:

Background Papers: None

Annexes

Annex A: Draft action plan