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Agenda Item: 18

## **Integration Joint Board**

Date of Meeting: 28 November 2018.

Subject: Mental Health.

### **1. Summary**

1.1. NHS Orkney and relevant key stakeholders have undertaken work through various workshops over the past few years. This has proven to provide very good information about how we should be taking our services forward. However, to date an Orkney strategy in respect of mental health has not been developed. The services to support the mental health of the population of Orkney are included in the Integration Scheme. On this note and after liaison with NHS Orkney colleagues, a report was taken the Board of NHS Orkney on 25 October 2018 indicating the intention of taking this work forward.

### **2. Purpose**

2.1. The purpose of this report is to provide IJB members with information about how we will develop a framework that will underpin the development of mental health services in Orkney.

### **3. Recommendations**

The Integration Joint Board is invited to:

3.1. **Endorse** the proposed 'next steps' set out in this report at section 7.1

### **4. Background**

4.1. Previous reports to the Health Board were headed 'Community Mental Health Services – Framework Development'. Any future mental health development framework needs to cover all aspects of mental health service provision - community and inpatient.

4.2. The scope of provision in mental health services in Orkney ranges beyond the Community Mental Health Service. The Health Board purchases inpatient services from NHS Grampian as well as other specialist inpatient mental health services, located elsewhere in Scotland.

4.3. There was a previous report to the Health Board in February 2018. This report focussed on providing information on what it termed the outputs of the community consultation event which took place in November 2017.

4.4. The event was facilitated by Blide Trust. Since November 2017 a subsequent facilitated meeting was held on 31 July 2018. The focus of this facilitated meeting was to identify key actions and form of prioritisation going forward. There were 4 themes that shaped the discussion for the day, those being:

- Information.
- Person Centred.
- Training and Information Sharing.
- Building Resilience.

4.5. At the end of the workshop a list of recommendations was identified for each theme.

## **5. Current Situation**

5.1. NHS Orkney and Orkney Health and Care (OHAC) currently offer a range of mental health services which are community and hospital based. These services provide support to individuals to enable them to manage their mental health and wellbeing.

5.2. There are no Orkney based inpatient mental health beds or services to support and treat those who are acutely ill or distressed. The inpatient support is provided through a Service Level Agreement (SLA) with NHS Grampian which gives access to the services at the Royal Cornhill Hospital.

5.3. The current SLA with NHS Grampian commenced on 1 April 2010 and remains in place. An essential element of the developing mental health strategy going forward is a review of the provision of inpatient mental health services. The aim of the review is to ensure that the needs of our communities are met, and any agreement complies with agreed quality standards and value for money. One possible outcome is to establish an SLA which is based upon a model of actual "provision" rather than a "costing" model, as at present.

5.4. OHAC, NHS Orkney and its various stakeholders have invested time and energy in a variety of meetings and facilitated workshops over the past 4 years. This time has been spent considering how we develop our mental health services. The lack of progress following these events has led to feelings of fatigue and frustration. Orkney does not have the ability to rely on economies of scale like larger partnerships. This, together with the limited levers of change available to us, have been partially responsible for the lack of progress towards a more proactive approach to the development of mental health services.

5.5. It is important to recognise the quality of the work and commitment of our staff across Orkney despite some obvious challenges. The Community Mental Health Team (CMHT) provision in Orkney is quite possibly unique in its ability to respond effectively across the spectrum of care needs regarding age and pathology. The commitment to meet the needs of individuals by making best use of resources is evidenced by the level of innovation and passion to do the right thing in supporting our communities.

## 6. Strategy

6.1. There are several strategies, reports and mental health quality indicators available, that present challenges in alignment and integration.

6.2. In March 2017 the Scottish Government published a Mental Health Strategy 2017–2027, key themes of this strategy being around;

- Prevention and Early Intervention.
- Access to treatment and joined-up, accessible services.
- The physical wellbeing of people with mental health problems.
- Rights, information use and planning.
- Data and measurement.

6.3. An overarching aim of the 10-year strategy is to achieve parity between mental and physical health. However, the vision is a clear one regarding people being able to get the right help at the right time, expect recovery, and fully enjoy their rights, free from discrimination and stigma. The vision is not aspiration, it is a must.

6.4. This 10-year strategy provides a very positive direction and prioritisation for the provision of mental health services. However, the guidance is explicit in that it provides a series of principles which will require to be adapted to the Orkney context. Some of that context is set out in the Orkney Community Plan.

6.5. The overarching priorities of Orkney Community Plan 2018 to 2021 stated the strategic priorities as:

- Strong communities.
- Living well.
- Vibrant economy.

6.6. The OHAC Strategy Commissioning Strategy determines that services will be focussed on people, place and purpose:

- **People** – as well as wanting to see sufficient level of service, people also want those they meet to have ready access to their health and social care information, so they don't have to repeat themselves. They want services to be joined up and want to see as few people as possible.

- **Place** – services to be a local as possible. This will mean different things at different times. Sometimes it means having services being provided on Orkney instead of outwith Orkney: sometimes it means being able to access services within their own area or indeed, own home.
- **Purpose** – services that are tailored to local health and care needs rather than national models, that only work on large scale, or traditional distribution and types of services.

6.7. The key is in translating these principles into the development of our mental health strategy. To support this, we need to assure ourselves that we have good clean data on the number and types of referrals we have in Orkney, over an agreed period. Good data allows good strategic planning and only on getting these two elements right can we transform our local services in the long term.

6.8. Considering the principles, then ‘people’ - this is about an all age strategy. The strategy needs to be applicable across the age spectrum, our resources are finite and need to be used wisely and flexibly. This is about having the right service, at the right time and in the right ‘place’, a place that makes sense to the individual - that could be in the work place or educational facility. The ‘purpose’ of the support will be fundamentally about prevention, early intervention and recovery.

6.9. When we consider the issue of place, the work to date is clearly telling us that people who use services and their carers require multiple points of access to care. It must be community wide, with multiple points of both referral and access. We need all our services and those who work within them to understand and recognise signs of mental illness and/or poor wellbeing.

6.10. The strategy for mental health services will be shaped by the stated principles articulated within the OHAC Strategic Commissioning Plan. The intent is to utilise local expertise and resources as appropriate. This will include all stakeholders: NHS Orkney, OHAC, Orkney Islands Council (OIC), our Third Sector colleagues and those with lived experience. It is vital that these partnerships are developed in the best interests of our communities.

6.11. The pooling and integration of the capabilities of all stakeholders, will produce a system which has as its primary purpose the promotion of mental health, wellbeing and resilience - providing the appropriate interventions at the appropriate level by the appropriate people, at the appropriate time.

6.12. Audit Scotland, in their 2018 report on children and young people’s mental health, state:

“NHS Boards, councils, integration authorities and their partners, should work together to:

- Identify and address any gaps in services, in partnership with children and young people (CYP), their parents and carers.

- Deliver a clear and co-ordinated approach to delivering children and young people’s mental health services. This must be easy to navigate for all children and young people, including those who are most vulnerable, to better meet their needs.”

6.13. This includes: ensuring there is a clear and measurable process for accessing all levels of service, making sure the referrals criteria and guidance are as clear as possible working with GPs, schools and others who may refer a child or young person to mental health services, to make sure they understand how and when to refer someone making clear and accessible information available to children and young people and their parents and carers.

6.14. This multi-disciplinary approach must be implicit in all that we do. This is the “golden thread” which joins education, social work, clinical services and the third sector to produce a comprehensive approach to Children and Young People (CYP) Services. This will include making Action Point 21 of the Mental Health Strategy 2017-2027, which highlights the commitment to provide Transition Care Plans for all young people moving from CAMHS to Adult Services, a clear priority.

6.15. The purpose of this report however is not to touch on every area of work we might undertake – it is about how we will work to develop an all age, all community aspiration to how we do things here in Orkney. Whether this be perinatal mental health, supporting children and young people, adults or older people, our strategy will ensure our services are developed to demonstrate that here in Orkney you are valued as a member of our community.

6.16. These additional principles and outcomes should be integral to our ‘All Age’ Strategy and should have clear reference and integration of Scotland’s Public Health Priorities (<https://beta.gov.scot/publications/scotlands-public-health-priorities>).

## 7. Next Steps

7.1. To write a full project plan outlining:

- Process for engaging with the key stakeholders identified in the previous consultation. This will include those with lived experience, from a variety of setting/ service areas and should also include family members and carers including young carers.
- The development of an overarching ‘blue print’ which should be aspirational and will be recognised as generational in approach.
- Aligned to the national strategy, the development of a local implementation strategy which considers the Orkney context, priorities and current resources.

7.2. The ‘blue print’ and the local strategy will provide a series of linked strategies that will sit under the developing Orkney Strategic Plan.

7.3. For all locally based community services, the strategy will be fed into the Strategic Commissioning Implementation Plan and help inform both the medium and long term financial strategies.

7.4. The SLA with NHS Grampian for outwith Orkney, inpatient services to be reviewed, as stated in terms of compliance, quality and financial efficiency.

7.5. There are some specialist bed-based services which NHS Orkney purchase. These also need to be reviewed using the same approach as those services purchased from NHS Grampian.

## 8. Enabling Activities

8.1. The following enabling activities will be required to facilitate the strategy development and will be completed within the timings as indicated:

- **Mental Health Strategy 2017-2027** – Establish an engagement group to provide an understanding of the national strategy and to provide interpretation in context of the Orkney requirement. The engagement group will include the key stakeholders from statutory providers, voluntary organisations and those with lived experience of mental health issues. The aim is to set the conditions and establish the structures to develop a mental health strategy, which will draw together the main activity areas, set priorities and allocate responsibilities.
- **Grampian Mental Health SLA** – Engagement has begun with NHS Grampian to discuss these issues. In particular the level of psychiatrist support in Orkney, costs and more importantly investigating the ability to move from a costing model to one which is based on blocks of service provision and standards.
- **Co-ordination of current Work strands** – Action Point 15, Action Point 21 and Primary Care Improvement Plan (PCIP) are examples of ongoing activity. These are areas which sit within discreet work strands and need to be more closely integrated.

## 9. Contribution to quality

Please indicate which of the Council Plan 2018 to 2023 and 2020 vision/quality ambitions are supported in this report adding Yes or No to the relevant area(s):

<b>Promoting survival:</b> To support our communities.	Yes.
<b>Promoting sustainability:</b> To make sure economic, environmental and social factors are balanced.	No.
<b>Promoting equality:</b> To encourage services to provide equal opportunities for everyone.	Yes.
<b>Working together:</b> To overcome issues more effectively through partnership working.	Yes.
<b>Working with communities:</b> To involve community councils, community groups, voluntary groups and individuals in the process.	Yes.
<b>Working to provide better services:</b> To improve the planning and delivery of services.	Yes.
<b>Safe:</b> Avoiding injuries to patients from healthcare that is intended to help them.	Yes.

<b>Effective:</b> Providing services based on scientific knowledge.	Yes.
<b>Efficient:</b> Avoiding waste, including waste of equipment, supplies, ideas, and energy.	Yes.

## 10. Resource implications and identified source of funding

10.1. There are no financial implications directly arising because of this report.

## 11. Risk and Equality assessment

11.1. There are no risk or equality implications directly arising because of this report.

## 12. Direction Required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

## 13. Escalation Required

Please indicate if this report requires escalation to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

## 14. Author

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## 15. Contact details

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