



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –
25 AUGUST 2021

REPORT ON: MENTAL HEALTH AND WELLBEING STRATEGIC UPDATE

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB41-2021

1.0 PURPOSE OF REPORT

1.1 To brief the Integration Joint Board about local and Tayside strategic mental health and wellbeing developments.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

2.1 Note the contents of this Report.

2.2 Remits to the Chief Officer to present a report outlining the outcome of the review of Dundee Mental Health and Wellbeing Strategic Plan in October 2021.

2.3 Approves a funding contribution of £180k per annum from delegated mental health funding as Dundee's contribution towards implementing Distress Brief Intervention as set out in section 4.13 of this report.

3.0 FINANCIAL IMPLICATIONS

3.1 The costs associated with the developments outlined in this report will be funded through a combination of a reconfiguration of existing budgets held by the IJB and other partners and through accessing additional funding where appropriate. The Finance teams across NHS Tayside and IJBs are working with Mental Health operational leads to develop high level strategic financial plans for MH services. These plans will be expected to provide a high level description of current financial resources in the system, describe current commitments and to map out further potential investment priorities identified to deliver the MH Strategy. The plans would be expected to describe any shift of resources within the system. They will also note financial deficits in the system and highlight the need to address as part of the MH strategy.

3.2 As detailed in section 4.13 of this report, a 2 year contract to deliver Distress Brief Intervention has been put out to tender to the value of approximately £1,100k. A commitment from Scottish Government to provide £200k financial support during the first 2 years has been received, with the remaining cost of £900k being apportioned between the 3 IJB's. The Dundee share of cost is anticipated to be around £180k per annum.

4.0 MAIN TEXT

- 4.1 Dundee Mental Health and Wellbeing Strategic Plan 2019-2024 (the Strategic Plan) was approved by the IJB at its meeting of 27 August 2019.
- 4.2 A progress report in relation to the Strategic Plan was noted by the IJB at its meeting of 23 June 2020.
- 4.3 Dundee Mental Health and Wellbeing Strategic and Commissioning Group (MHWSCG) is in the process of reviewing progress against the priorities set out within the Plan and considering whether the Strategic Plan requires to be refreshed in light of learning gained regarding the impact of the COVID-19 pandemic on citizens of Dundee.
- 4.4 In summer 2020, three surveys explored experiences over the early months of the pandemic including use of services. The total sample was 1535: Fairness Commission 452; Engage Dundee 892; Food Insecurity Network 192. Common themes related to the challenges of being locked down, mental health impacts, reduced access to services, social isolation and financial/job insecurity. For many, the issues were interconnected and for some the pandemic exacerbated what were already difficult life circumstances. Inequalities emerged for particular age groups, the unemployed and those on welfare benefits, the long term sick and disabled, carers and people who lived alone. The findings have been shared with a wide range of partners to raise awareness of the impact of the pandemic particularly for those who are most disenfranchised and find it hardest to be heard.
- 4.5 In reviewing its current plan, the MHWSCG identified additional actions for development to ensure it addressed issues arising from the evidence above. These were: improved linkages with other strategic plans; assessment of action to address the mental health impacts raised across relevant partnerships; identification of gaps; inclusion of action for vulnerable groups including gendered approaches and other targeted activity; strengthening work in communities; and consideration of workforce development. A working group, led by a member of the MHWSCG will ensure that these areas are incorporated within the refreshed Strategic Plan.
- 4.6 Report DIJB22-2021 “Mental Health Crisis Support in Dundee” was noted by the IJB on 21 April 2021 and it was remitted to the Chief Officer to present a progress report to the IJB in October 2021.
- 4.7 Since April 2021 there has been progress made towards the development of a Community Wellbeing Centre (CWC). The CWC, which will be “always open” (that is, operating 24/7) will provide an immediate, compassionate response to anyone who considers themselves to be in need of immediate support regardless of whether that need is arising from an acute deterioration in a recognised mental health problem or from high levels of emotional distress arising from problematic life events and circumstances.
- 4.8 Development of services for people experiencing emotional distress is a key priority. The immediate, compassionate response within the CWC will be followed by assistance to access community based resources and, importantly, access to Distress Brief interventions (see 4.13 below).
- 4.9 Those people identified as requiring immediate assessment, care or treatment for an acute deterioration in a mental health problem will be supported to access specialist mental health services. This will ensure that everyone requiring specialist mental health support has easy and immediate access to it. It is envisaged that the CWCs will be able to support people whilst the clinical assessment process is ongoing and, importantly, if specialist mental health care and treatment is not required, people will already be in the correct place to access the supports available for people experiencing distress. It is hoped that this seamless transition across pathways will ensure that people are directed to the right support at the right time and emphasise parity between people experiencing distress and those experiencing an acute mental health crisis.

- 4.10 It is recognised within the City that people who experience significant mental health problems and use substances (often referred to as 'dual-diagnosis') have particular needs with a Corra Foundation bid advancing a test of change for the provision of more integrated and intensive care and treatment approach to try and better meet those needs. This 'high intensity' care and treatment approach is very different from the support and services delivered from the CWC which are low intensity in nature. Whilst the CWC will seek to be inclusive from the perspective of age and whether people use substances or not, it is important that it is seen as a *conduit* to the most appropriate resource available for people; it will not seek to provide all of these services.
- 4.11 The always open CWCs will also have access to short-term accommodation with support. The location of these has been influenced, where possible, by intelligence from the Tayside Multi-agency Suicide Review Group in order to achieve the correct balance between providing support where it is geographically close to the people with greatest need whilst avoiding locations of greatest risk for suicide.
- 4.12 A suitable building for the CWC has been offered to the Health and Social Care Partnership and an initial specification has been presented to the voluntary organisation who own the building, to establish feasibility. Two sites have been identified with a view to accommodation with support.
- 4.13 A contract to deliver Distress Brief Intervention has been issued to tender and it is anticipated that a contract will be awarded to the successful voluntary organisation in September 2021. Representatives of Dundee Health and Social Care Partnership are leading the tender process on behalf of the 2 other Health and Social Care Partnerships in Tayside. The value of the contract across Tayside is anticipated to be around £1,100k over a 2 year period. Funding from the Scottish Government of £200k to support the establishment of Distress Brief Intervention in Tayside has been agreed over this initial 2 year period. The net cost to Dundee IJB over this period is anticipated to be around £180k per annum which will be funded from additional Scottish Government funding for mental health.
- 4.14 The joint initiative between Scottish Ambulance Service (SAS) and the Dundee Health and Social Care Partnership to establish a Paramedic Mental Health Response Vehicle (PMHRV) has also progressed. Recruitment for four part-time mental health nurses to work with two specialist SAS paramedics has advanced and, in advance of these nursing appointments, the PMHRV has operated on a number of weekends with paramedic only staffing to respond to 999 calls triaged as arising from issues with mental health problems or high levels of emotional distress. Early outcomes indicate that most people have been successfully helped in their own home environment without the need for more specialist mental health assistance or being taken to the Emergency Department.
- 4.15 Tayside Mental Health and Wellbeing Strategy "Living Life Well" (Article Ref XIV) was endorsed by the IJB at its meeting of 15th December 2020. It was remitted to the Chief Officer to submit an implementation plan and financial framework to the IJB once these had been produced collaboratively with neighbouring Health and Social Care Partnerships in Tayside and NHS Tayside, who have operational responsibility for Mental Health In-patient Services.
- 4.16 An Integrated Leadership Group with representation from the 4 organisations outlined in 4.15 is now well established and meets monthly. Following discussion between respective Chief Finance Officers in Tayside it has been agreed that Dundee's Chief Finance Officer and his deputy (Finance Manager for the Partnership) will join the Integrated Leadership Group and lead the development of a financial framework in conjunction with a range of finance/operational/ strategic colleagues across the 4 organisations. This will support a range of priority areas of development at pace and offer a transparent, collaborative model of strategic financial planning.

- 4.17 “Living Life Well” was produced in response to a specific recommendation of the Independent Inquiry Into Mental Health Services in Tayside. The original Independent Inquiry Report highlighted a need to rebuild trust and respect in relation to Mental Health Services in Tayside, both with the public and within the workforce, by focussing on 5 cross-cutting themes: Strategic Service Design, Governance and Leadership, Engaging with People, Learning Culture and Communication. The report also stated a need to collectively focus more on developing community mental health and wellbeing supports as opposed to a predominant continued focus on in-patient care by taking a collective, and more strategic, whole system approach.
- 4.18 At the time of publication, the then Minister for Mental Health asked that Dr David Strang undertake a review of progress in Tayside in early 2021. This was duly commenced in February 2021 and Dr Strang’s report “Independent Inquiry into Mental Health Services in Tayside Progress Report” (the Progress Report) was published in July 2021. The original Listen Learn Change Action Plan set out how the 51 Recommendations would be addressed.
- 4.19 The recent Progress Report (July 2021) highlights the importance of Tayside having realistic time scales with regard the “scale of the task ahead.” Work has already taken place (led by Dr Jane Bray in Public Health) to better prioritise the required developments. Dundee HSCP staff are well engaged with all key pieces of work and are leading on developments for the previously referenced Review of Crisis & Urgent Care, Neurodevelopmental Disorders and Learning Disability Services. At present, there is no explicit implementation plan with regard to Living Life Well but this is in the process of development.
- 4.20 The NHS Tayside led work-stream with regard to the provision of adult mental health in-patient care supported the provision of these specialist services from one Tayside site. There has yet to be formal agreement as to where this in-patient care will be sited.
- 4.21 Within Dundee Community Mental Health Services, there continues to be a reliance on Locums for our specialist Consultant Psychiatry staffing. However, this has been provided by a largely stable group of individuals who have remained in longer-term contracts ensuring continuity of care for patients. Specialist Pharmacist and Pharmacy Technician posts have been created to increase the availability of medicines prescribing and review, and there are currently two Advance Nurse Practitioners training within the service. Together, these developments will increase the available workforce and ensure that Consultant Psychiatrists are used only for the complex and higher level tasks that only they can provide.
- 4.22 To ensure appropriate links with action at a local level, the MHWSCG supported a refresh of local Health and Wellbeing Networks at its meeting in July 2021. Led by Dundee Health Inequalities Service, the networks provide a forum for service providers and local people/ those with lived experience to come together to agree, shape and implement local responses to health and wellbeing priorities, including mental health. The networks will improve communication and coordination, avoid duplication, and ensure clear lines of reporting including to Local Community Planning Partnerships and strategic partnerships.
- 4.23 The MHWSPG membership offered its support to the Health and Wellbeing Networks and agreed to provide staff and other resources to support the local structure and associated developments. In terms of additional Scottish Government funding, it was agreed that consideration will be given to the provision of financial resources for mental health recovery in communities and that the networks will be a useful forum for these discussions.
- 4.24 Good communication and liaison have been maintained with our Advocacy Partners; Dundee Independent Advocacy Support (DIAS), Partners in Advocacy and Advocating Together. Close working networks are in place which allows for collaborative and partner working at a local level. A forum for collective training and learning has been established with good links to the national advocacy context. Demand for independent advocacy support has increased over the last few months and we have agreed to invest additional funding to support this and ensure additional capacity is available.

4.25 In conclusion, mental health and wellbeing continues to be a high priority for a range of partners within the city. Plans for improvement, both locally and pan Tayside, are ambitious and are being escalated at an unprecedented scale and pace.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

6.0 RISK ASSESSMENT

Risk 1 Description	There is a level of interdependency between the two pathways (acute mental health crisis and people experiencing emotional distress) described above. Should either not be implemented as envisaged with closely aligned time-scales, there is a danger that we may not be able to deliver safe and effective person centred care to people in crisis
Risk Category	Operational
Inherent Risk Level	Likelihood (4) x Impact (4) = Risk Scoring (16)
Mitigating Actions (including timescales and resources)	Urgent/Crisis pathway work has already arrived at a single recommendation; Distress Brief Intervention (DBI) scheduled to be implemented by September 2021; accommodation with support scheduled for Autumn 2021. The Dundee Mental Health and Wellbeing Strategic and Commissioning Group has appointed a subgroup to drive forward developments and ensure coordination and 'best-fit' across wider community resources.
Residual Risk Level	Likelihood (3) x Impact (3) = Risk Scoring (9)
Planned Risk Level	Likelihood (1) x Impact (2) = Risk Scoring (2)
Approval recommendation	The risk should be accepted.

Risk 2 Description	Evidence demonstrates that the ability to predict completed suicide, even where assessment is undertaken by skilled professionals, is limited. There is a risk that the development of an "always open" Community Wellbeing Hub (CWH) does not result in a demonstrable reduction in the number of people engaging in serious or fatal self-harm
Risk Category	Reputational
Inherent Risk Level	Likelihood (3) x Impact (3) = Risk Scoring (9)
Mitigating Actions (including timescales and resources)	Models of best practice from elsewhere have been considered in developing the model of care; levels of care can be stepped up where necessary; the provision of brief interventions (or equivalent) should assist people in addressing some of the core psycho-social factors fueling their distress
Residual Risk Level	Likelihood (3) x Impact (1) = Risk Scoring (3)
Planned Risk Level	Likelihood (3) x Impact (1) = Risk Scoring (3)
Approval recommendation	The risk should be accepted.

Risk 3 Description	The Tayside prioritisation of work in addressing Listen, Learn, Change and Living Life Well may not align with local priorities and adversely impact on the speed of implementation of local service improvements
Risk Category	Operational
Inherent Risk Level	Likelihood (2) x Impact (4) = Risk Scoring (8)
Mitigating Actions (including timescales and resources)	Influence by Locality Manager & Clinical Lead at ILG; Influence by Chief Officer at ELG; increase Leadership capacity within MH & LD
Residual Risk Level	Likelihood (1) x Impact (3) = Risk Scoring (3)
Planned Risk Level	Likelihood (insert scoring) x Impact (insert scoring) = Risk Scoring (insert overall risk scoring)
Approval recommendation	This risk should be accepted

7.0 CONSULTATIONS

7.1 The Chief (Finance) Officer and the Clerk were consulted in the preparation of this report.

8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	X
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

9.1 None.

Vicky Irons
Chief Officer

DATE: 23 July 2021