



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 27 OCTOBER 2021

REPORT ON: MENTAL HEALTH AND WELLBEING PLANNING IN LIGHT OF THE IMPACT OF COVID-19 ON CITIZENS OF DUNDEE

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB50-2021

1.0 PURPOSE OF REPORT

1.1 To provide the Integration Joint Board with an overview of current strategic mental health and wellbeing planning as a result of learning gained about the impact of the Covid-19 pandemic on citizens of Dundee.

2.0 RECOMMENDATIONS

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

- 2.1 Note the contents of this report.
- 2.2 Remit to the Chief Officer to submit further progress reports to future IJB meetings.

3.0 FINANCIAL IMPLICATIONS

3.1 There are no additional financial implications associated with the contents of this report. Mental health and wellbeing developments will continue to be progressed within the financial resources available to the Dundee Health and Social Care Partnership.

4.0 MAIN TEXT

- 4.1 Report DIJB41-2021 “Mental Health and Wellbeing Strategic Update”, which provided a briefing on local and Tayside wide mental health and wellbeing developments, was noted by IJB members in August 2021 and it was remitted to the Chief Officer to present a further report outlining the review of Dundee Mental Health and Wellbeing Strategic Plan.
- 4.2 The Dundee Mental Health and Wellbeing Strategic Plan 2019-2024 (the Strategic Plan) was approved by the IJB at its meeting of 27 August 2019.
- 4.3 Over recent months the Strategic Plan has been subject to review in terms of progress to date against key priorities and consideration given as to whether it requires to be refreshed in light of learning gained about the impact of the Covid-19 pandemic on citizens of Dundee.
- 4.4 At its meeting in March 2021, the Mental Health and Wellbeing Strategic and Commissioning Group (MHWSCG) discussed findings from three resident surveys undertaken in the early months of the pandemic. The total sample was 1535 and key themes that emerged were:
 - reduced access to services and support,
 - the day to day challenges of being in lock down,

- uncertainty and concerns about the ongoing nature of the pandemic,
 - social isolation and loneliness,
 - mental health more broadly, and
 - financial/ job insecurity and effects on life circumstances.
- 4.5 An inequalities analysis evidenced differential effects on particular groups of people, in particular the long-term sick and disabled, specific age groups, carers, unemployed and/or on welfare benefits, and those that lived alone. This included significant and profound inequalities in mental health and wellbeing.
- 4.6 The survey findings helped the MHWSCG and other strategic groups to understand more fully the impact of the pandemic. It influenced efforts to mitigate effects for those in most need whilst also building resilience for individuals and communities to provide responses themselves.
- 4.7 Focused discussions took place between the Chair of the MHWSCG and the Community Health Inequalities Manager, who is the lead DHSCP officer for the surveys. It was agreed that a sub group would be formed to discuss the results in more detail and consider implications for future planning and commissioning of support for people.
- 4.8 The sub group met in May 2021 and agreed a range of short-term actions including linking Public Health with planned follow-up surveys and leading on a “Mental Health in All Policies” approach, ensuring appropriate links with the Carers Wellbeing workstream, consideration of recommendations on mental health and employability from the Fairness Commission, and mapping survey findings against existing mental wellbeing actions.
- 4.9 In June 2021, the MHWSCG Chair and the Community Health Inequalities Manager mapped the existing Strategic Plan against survey results. In doing so, the plan was agreed to be a good fit in terms of the current priority areas of
- reducing health inequalities
 - prevention/ early intervention
 - right support at the right time, and
 - recovery.
- However, further consideration was required to assess how emerging issues would be addressed to reflect the changing strategic and operational landscape arising from the pandemic.
- 4.10 It was agreed that the existing plan should be refreshed to include an update on progress towards existing actions, reference to survey findings, links across a range of strategic plans including Living Life Well and Listen. Learn. Change., identify gaps and target groups, enhancement of work in communities, and consideration of workforce development required to achieve desired change.
- 4.11 At its meeting on July 7th 2021 the MHWSCG discussed a proposal to refresh local Health and Wellbeing Networks. Led by the DHSCP Health Inequalities Service, the networks provide a platform for services to come together to share information on health and wellbeing developments, plan and implement community engagement, facilitate partnership working, and create innovative and sustainable tests of change. Local people/ service users form a central element of the networks and will be provided with appropriate support.
- 4.12 Three networks cover the six wards containing Community Regeneration Areas with alignment to Local Community Planning Partnerships. Strategic developments such as the next phase of Dundee Drugs Commission, the Community Wellbeing Centre, support for unpaid carers, and service recovery and remobilisation increase the relevance of the networks in strengthening locally-led responses. A range of funding sources to address priorities is available, some of which have been allocated directly to communities.
- 4.13 The MHWSCG supported the proposal for refreshed networks, which would
- support locally-led actions that contribute to strategic priorities,
 - share information, enhance partnership working and avoid duplication of effort,
 - facilitate efficient use of local staff and other resources,

- ensure effective linkages to local interventions with a specific focus,
 - support LCPPs to monitor and implement health and wellbeing priorities, and
 - enable reciprocal communication between strategic groups and local communities.
- 4.14 Complementing these developments is the production of a new Community Learning and Development Plan (CLD Plan) for the city, which is a statutory requirement under section 2 of the Education (Scotland) Act 1980. All education authorities must secure adequate and efficient CLD provision and publish plans every three years that recognise CLD approaches within the local authority, schools, colleges, third sector and other community planning partners. This requires a collaborative approach to co-ordination and delivery, and must be developed in consultation with stakeholders with a particular emphasis on people who are marginalised.
- 4.15 An important component of the CLD Plan for Dundee is the section on addressing health inequalities. Responses to health inequalities and their social determinants is undertaken at a local, service and strategic level in the city including direct provision and a drive to ensure an inequalities perspective in practice and plans. As such, action to address inequalities and improve health is threaded through the CLD Plan in addition to direct areas of work which reflect the four DHSCP strategic priorities. The overarching aim is to create more positive and equitable health and wellbeing in Dundee's communities.
- 4.16 At its meeting on September 1st 2021, the MHWSCG discussed progress with the local health and wellbeing networks, the draft health inequalities section of the CLD plan, and the proposed refresh of its strategic and commissioning plan as noted in 4.7 of this report.
- 4.17 The MHWSCG agreed the formation of a new Communities and Inequalities workstream with the following remit:
- strengthen the focus on mental health inequalities, determinants, and early intervention/prevention within Dundee's Mental Health and Wellbeing Strategic Plan,
 - identify gaps relevant to the findings of local surveys,
 - link to local developments and structures such as health and wellbeing networks, LCPPS, and new Local Community Plans,
 - strengthen and build on local relationships and infrastructure,
 - develop proposals for appropriate targeted actions in conjunction with communities,
 - ensure effective mapping to other strategic areas that impact on mental health and wellbeing, and
 - consider workforce development to support achievement of the above aims.
- 4.18 The workstream will be co-chaired by the Community Health Inequalities Manager, DHSCP/ Neighbourhood Services, and the Consultant in Public Mental Health, NHS Tayside. The inaugural meeting will take place on the October 5th 2021 when the workstream will discuss membership and a Terms of Reference. It will report to the MHWSCG and contribute to the production of future progress reports for submission to the Strategic Planning Advisory Group and IJB.

5.0 POLICY IMPLICATIONS

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	That the planned approach outlined in the report does not progress at pace and Dundee citizens are not fully engaged in planning and/ or do not receive adequate mental health and wellbeing support
Risk Category	Operational
Inherent Risk Level	Likelihood (4) x Impact (4) = Risk Scoring (16)
Mitigating Actions (including timescales and resources)	Group identified to progress work, first meeting arranged with a view to terms of reference/ timescales being agreed. Strong multi-disciplinary strategic group in place to support the work, engagement with people with lived experience locally can be built upon
Residual Risk Level	Likelihood (2) x Impact (2) = Risk Scoring (4)
Planned Risk Level	Likelihood (2) x Impact (2) = Risk Scoring (4)
Approval recommendation	It is recommended that the IJB accept this risk

7.0 CONSULTATIONS

The Chief Officer and the Clerk were consulted in the preparation of this report.

8.0 DIRECTIONS

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

None

Vicky Irons
Chief Officer
Dundee HSCP

DATE: 01 October 2021