

Annex 3: Public Value Review of adult mental health services in Surrey

After extensive engagement throughout, the final recommendations from the adult mental health services public value review (PVR) are co-produced. The recommendations are about re-focusing the whole of adult mental health services, connecting and driving forward work across Surrey, and setting a strategic direction for future developments.

Inclusion and access to services, people with mental health and other needs and support for carers are recommendations in their own right. However, in all the recommendations they should be considered as integral to the recommendation. Our vision is to have early intervention and preventative support services which promote positive mental health for all people in Surrey.

These recommendations are underpinned by a communications strategy and clear implementation plan. We are establishing governance arrangements for adult mental health in Surrey which will oversee the implementation of the PVR: an overarching Board and local accountability groups.

Summary of recommendations

1. Establish a clear commissioning framework for mental health services, to ensure clear and measurable outcomes and expectations for providers of adult mental health services
2. Strategic shift to early intervention and prevention: investing more resources into the voluntary sector to keep people well in their communities
3. Embedding personalisation: creating independence, not dependence
4. Improving knowledge and awareness of mental health, and addressing stigma and discrimination: making sure mental health is everyone's business
5. A focus on the improving the mental health and well-being of Surrey County Council's workforce
6. Ensuring high quality services: making sure people who use services and carers are involved in developing and delivering the services
7. Think family: work in partnership to have a whole family approach
8. Support for carers: valuing and supporting carers
9. Improving the pathway through mental health services: making sure people don't fall between the gaps in services

10. Meeting social care outcomes: exploring how we can do this better
11. Support for people with mental health and other needs: making links with other specialist areas of work
12. Housing and support: work in partnership to enable people to find and maintain appropriate housing
13. Young people and transition: help young people to access the services they need
14. Information, inclusion and reducing inequalities: better access to services and information

Recommendation 1: Establish a clear commissioning framework for mental health services

'(We need) services that demonstrate outcomes'.

- Develop clear and measurable outcomes and expectations for adult mental health services commissioned and provided by Surrey County Council
- Put in place a clear commissioning arrangement with Surrey and Borders NHS Partnership Trust
- Put in place clear commissioning arrangements with voluntary sector providers of services
- Develop outcomes monitoring tools to track progress of commissioned services
- Establish local groups to monitor performance of providers

Recommendation 2: Strategic shift to early intervention and prevention: keeping people well

'Need to prevent people using secondary care services, as this is stigmatising'.

- Further investment in voluntary sector, supporting the focus on keeping people well, social inclusion and a whole family approach
- Revise the way we fund services so that it is based more on local need. Work in partnership to specify the desired outcomes and outputs for services. Offer 3 year grant agreements to services that can deliver these outcomes and outputs
- Normalise mental health by supporting people to access resources in the community and use community resources in support of good mental health e.g. by having community mental health champions, increasing provision of local community connections services that are accessible to all people who may need mental health support
- Work in partnership with local districts and boroughs, adult and children's health and social care providers and commissioners, the voluntary, community, faith and independent sectors to focus on prevention and early

<p>intervention, including earlier information on mental health conditions so people can recognise the signs and carers are supported earlier</p> <ul style="list-style-type: none">• Working with multi-agency suicide prevention group to implement action to prevent suicide• Joint working with children, schools and family services on strategic shift to early intervention and prevention, for example by exploring technologies to engage with young people about mental health, non-stigmatising emotional literacy support for children and young people and support to prevent post-natal depression in 'at risk' groups
<p>Recommendation 3: Embedding personalisation</p> <p><i>'Creating independence, not dependence'</i></p>
<ul style="list-style-type: none">• Extend the personalisation model to primary care and the voluntary sector• Work in partnership to implement all 4 quadrants of personalisation: early intervention and prevention; promoting social capital; access to universal services and enabling choice and control• Continue roll-out of personalisation training for staff on planned schedule and implement and measure impact of self-directed support (SDS)• Simplify the SDS process and utilise advocacy and brokerage services to enable people to have more choice and control• Develop clear pathways and processes for personalisation in Enabling Independence Service, integrated mental health teams (18-64yrs), substance misuse and prison services. Review all individuals and carers currently in receipt of social care funding or support by March 2013• Ensure potential of personalisation to improve support for carers is fully realised through the carers pathway• Explore resource allocation system and supported self-assessment suitability for people with mental health problems
<p>Recommendation 4: Improving knowledge and awareness of mental health, and addressing stigma and discrimination</p> <p><i>'(I am) concerned about people being labelled and then being stuck with that label'</i></p>
<ul style="list-style-type: none">• Work in partnership with public health and link with existing campaigns to improve public understanding of mental health, including needs of whole family by developing public interactive campaigns• Work with service providers and people with mental health needs to deliver mental health awareness training for GPs, primary care and the wider public sector, including risk factors for mental health such as autism, learning disability, physical and sensory impairments, domestic abuse and substance misuse• Mental health services to be delivered, wherever possible, in the community to mainstream and de-stigmatise mental health• Make sure mental health is on the agenda of key groups such as the Health and Well-being Board and Healthwatch, to ensure there's 'no health without

<p>mental health'</p> <ul style="list-style-type: none">• Work with partners to have continued commitment to enabling people with mental health problems to maintain or gain voluntary or paid employment• Link in with existing anti-stigma campaigns locally and nationally• Promote use of existing resources, such as Mind mental health activity pack and First Steps website• Engaging with other agencies such as police, prison and ambulance services to increase awareness of mental health• Enabling the voluntary, community and faith sector to access public health expertise, to develop strategic thinking based on population needs assessment and contribute to service development
<p>Recommendation 5: A focus on the improving the mental health and well-being of Surrey County Council's workforce</p> <p><i>'We have good systems in place to support the mental health of our workforce, we need to promote uptake of these'</i></p>
<ul style="list-style-type: none">• Focus on workforce mental health, 'A mindful employer', valuing diversity in the workforce• Work with Unison and GMB unions to roll out health checks in Surrey County Council• Pull together existing work and resources that contribute to promoting mental well-being in the workforce
<p>Recommendation 6: Ensuring high quality services</p> <p><i>'We need an established way to involve service users and carers; nothing about us without us'</i></p>
<ul style="list-style-type: none">• Monitor services provided or commissioned using a robust framework which focuses on outcomes and outputs that people have told us are important to them, such as agencies working in partnership, dealing with the 'whole person' and are accessible to all those with mental health needs• Mandate person-centred, self-defined outcomes approach to recovery planning and well-being for each person• Develop the mental health workforce on a district and borough basis• Develop joint adult social care and health 'dashboard' to monitor whole systems working, standards and outcomes• Continue to support and develop appropriate and meaningful ways to involve people in delivering and developing services• Joint planning and aligning commissioning of services across different sectors• Implement local and Surrey-wide governance arrangements for mental health• Equality of access to services (see recommendation 14)
<p>Recommendation 7: Think family</p> <p><i>'Keeping parents well in the community equals keeping children and young people</i></p>

well in the community'

- Implement family support programme of work ('troubled families') and develop mental health indicators to measure impact of work on the mental health and resilience of families
- Work in partnership across agencies to have a whole family approach to keeping people well and supporting families and networks of carers
- Work across the health and social care boundaries of provision for children, young people, adults and older adults to develop joint projects to promote 'think family'
- Link in with existing good practice and projects to support the think family agenda

Recommendation 8: Support for carers

'Carers' liaison workers are currently only in secondary care. When a user doesn't get a service, where does this leave the carer? They are still doing the same job, if not more'

- Carers' liaison workers currently operate within integrated secondary mental health teams; this means that carers who care for someone who does not meet the threshold for these services may find it harder to access carers assessments and support. Further exploration required and response to be developed
- Promoting personalisation for carers and use of carers pathway to develop a holistic approach to support the emotional health and well-being of carers
- Improve identification and response to young carers
- Continue to commission specialist mental health carers support and ensure appropriate links with generic carers support services, including those for young carers
- Ensure mental health specific carers services are embedded in carers care pathway and improve interface between different carers support organisations to make best use of different qualities to maximise services
- Promote use of 'Partners in recovery' guidance to enable providers of support to interact appropriately with carers
- Supporting carers' mental health by including carers in early intervention and prevention approaches, by partnership working with Carers' commissioning group

Recommendation 9: Improving the pathway through mental health services

'We need a whole system for mentally healthy communities'

- In partnership, develop and implement joined up care pathway, from early intervention and prevention through to services for people with severe and enduring mental health problems and ensure clear linkages to other relevant pathways e.g. physical health and long term conditions, young people and older people's services, learning disability/autism, substance misuse, domestic violence; recovery at heart of all services

- Inform, support and utilise the carers pathway
- Develop ,draw a picture of, and implement a joined up, 'whole systems' approach to adult mental health: voluntary/community sector; primary care; districts and boroughs, local social care teams; secondary mental health services and acute care; children, schools and families service and older adult mental health services
- Statutory agencies and voluntary sector to be held accountable for whole systems working through local mental health multi-agency groups
- Make available a range of referral routes to services: self-referral, from voluntary sector and GP referral
- Empower people to have more control over their care and support pathway e.g. by embedding the recovery star tool in mental health service delivery, by enabling self-referral to universal services, access to medical records, peer support and self-management courses
- Promote local communication, knowledge and relationships by: supporting existing mental health stakeholder groups; facilitating local social inclusion groups and promoting face-to-face networking opportunities to share information across all sectors
- Work with partners to ensure more effective sharing of information between the person, carer and different providers to enable proper handover and suitable onward referral e.g. with the person, develop a staying well plan that they own and take with them
- Statutory services, including public health, to address the physical health needs of people with mental health problems, for example by implementing physical health checks and monitoring progress
- Work with local voluntary sector groups to scope demand for therapeutic and well-being groups (a perceived gap)
- Work in partnership to address how people access support in a crisis
- Address existing geographical gaps in services and work with partners to ensure people can access services that are close to home, even if this is in a different local authority area

Recommendation 10: Meeting social care outcomes

'Clear guidance as to role (of social care) and a strengthening rather than dilution of skills that social care workers bring to teams would benefit staff and users alike'

- Explore options to strengthen the role of social care for people with mental health problems and their carers/families (currently delivered within integrated secondary mental health services such as community mental health recovery services) and deliver social care outcomes in a more effective way. Assess impact of any proposed changes and conduct options appraisal on the following future options:
 1. Continue to deliver social care through integrated teams with Surrey and Borders Partnership Mental Health Foundation Trust, with defined social care partnership arrangements and clear social care outcomes monitoring
 2. New partnership and integration options with GP practices
 3. Deliver mental health social care within generic adult social care locality

teams

4. Mixed model: Adult Social Care ownership of mental health social care agenda and deploy staff flexibly in different settings: voluntary sector, primary care (with GP practices), local social care teams, secondary care settings (with Surrey and Borders)

5. Develop a social enterprise model to deliver mental health social care

The outcome from this recommendation will be considered alongside current development of integrated working in Older People's mental health teams.

- The timescales and how this project will be developed is in the implementation plan.

Recommendation 11: Support for people with mental health and other needs

'Need staff to be multi-skilled to support people with dual diagnosis'

- Substance misuse: Scope services and work with partners to address any gaps for people with a mental health need and substance misuse problem
- Military and veteran mental health: Ensure mental health on military health agenda through existing forums
- People with learning disabilities and/or autism: work in partnership to deliver universal offer for people with autism; mainstream mental health services are accessible to people with a learning disability (learning disability services provide support to enable a person with a learning disability to access mental health services)
- Domestic abuse: link in with domestic abuse county wide work to keep mental health on the agenda
- People with long term health conditions: link pathways of care
- People in prison: personalisation and raising mental health awareness
- Joined up approach to carers' mental health through carers pathway

Recommendation 12: Housing and support

'The ability to maintain housing may be compromised due to the person's mental health condition'

- In partnership with districts and boroughs, identify different levels of supported housing (low need through to high/complex need such as people with a history of arson or ex-offenders) and commissioning of services to meet local need, to address current inequity in provision across Surrey
- Support people to maintain housing, through interventions such as budgeting skills and daily living skills
- Explore new ways of supporting people e.g. a buddy system of volunteers who provide peer support in the accommodation setting, utilising existing money advice services in the voluntary sector
- Further development of Shared Lives scheme
- Proactive review of residential and nursing placements, including out of area placements, with the aim of reducing these and aligning with Health

<p>commissioning</p> <ul style="list-style-type: none">• Develop a 'real time' online directory of potential housing resources which describes the services, vacancies, referral procedures and cost• In partnership with districts and boroughs, maintain/develop special needs housing panels in all districts and boroughs and hold regular local networking sessions to facilitate good working relationships• Involvement of housing departments and housing providers in care plans and hospital discharge so that adequate planning can be made to ensure the person is properly supported during what can be a destabilising and difficult time• Enable people to use personalised budgets to enhance the range of accommodation with support options
<p>Recommendation 13: Young people and transition</p> <p><i>'Transition can be problematic'</i></p>
<ul style="list-style-type: none">• Develop more affordable accommodation with support options to meet local need for young people with emotional and behavioural difficulties• Adult Social Care to be a stakeholder in re-commissioning of children's emotional well-being services, to ensure shared vision towards early intervention, prevention and 'think family', including consideration of carers' needs• Work across departments to scope 'vulnerable adults' services• Use evidence from young people's rapid improvement event to shape future services
<p>Recommendation 14: Information, inclusion and reducing inequalities</p> <p><i>'Practitioners to work holistically and make mental health services information more accessible'</i></p>
<ul style="list-style-type: none">• Link in with mainstream information and welfare benefits advice commissioning to address impact of welfare reforms, user led hubs, carers commissioning and transport planning to make sure people with mental health needs and their families are on the agenda• Continue to widely promote Surrey Information Point as a single trusted source of information and encourage providers to upload their details• Raise awareness of advocacy support that is available• Clear signposting so people with different communication needs not excluded from services• Reach out to those who may not engage with services, such as gypsies and travellers, through outreach workers, support brokers and community connections services• Information and explanations about services to be accessible in different formats and people able to find out about and access services by appropriate means e.g. by telephone, text message, email• Monitor services on equalities outcomes to make sure there is equality of

access to services

- Mental health services to make reasonable adjustments to ensure equality of access for people with different communication needs e.g. staff awareness of autism, honest and accurate information about services, seeing the same staff wherever possible, information in different formats, ways to enable people with communication needs to engage with services
- Clear communications about new community connections services
- Work with health commissioners to advance the goal of parity of mental health and physical health services
- Rights of people with mental health problems: advancing knowledge

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