MHPB Draft Improvement Programme

Last update: 18/05/2021

Theme	Recommendations	Immediate next steps	Priority	Resources		Start date	Due date
				Lead	**Support**		

Priority Enablers of Improvement

Theme	Recommendations	Immediate next steps	Priority	Lead	Support	Start date	Due date
Commitment by all agencies	1.Focus on: a more preventative and early help approach. That every person and organisation in Surrey's emotional wellbeing and mental health system adopts a 'prevention and early help first' approach, engaging local businesses, District and Borough Councils, housing providers and communities in prevention and building resilience in communities.	1. Report to HWB 2 June to include securing ongoing commitment. 2. The work of the MHPB and the Improvement Programme to be widely circulated across the system, with specific call to action around prioritising prevention and early help.	1	HWB Board	MHPB	Jun-21	Oct-21
Shared Vision	2.Focus on: a shared, co-produced vision for emotional wellbeing and mental health. That a system-wide collective vision for in Surrey, is co-produced, using the following as a basis for discussion and determination: "Positive emotional and mental wellbeing for everyone in Surrey is maintained and no one who requires support for their mental health is turned away without an appropriate and safe relevant offer of help and the 'bridging' support required to access it."	1. Discussion of draft vision at 21st May MHPB meeting and HWB on 2 June 2. Consult with people with lived experience via the mental health independent health network 3.Surrey's mental health partners commit to the delivery and achievement of the vision, with co-design, co-production, issues of diversity and inclusion, customised approaches and the fundamental importance of human relationships as foundational elements.	1	SABP	MHPB People with lived experience.	Jun-21	Sep-21
Access to, mapping and navigation of services	3.Focus on: resilience, early support and helping people understand and access it. That the 'Community Connections' and GPiMHS services be developed across Surrey, remodelled and expanded to create a universal service that offers both immediate help and brokers access to appropriate support, and that this is complemented with a co-designed, co-produced easily accessible single 'map' of voluntary and community support and mental health services, exploiting the full potential of the web-based Healthy Surrey platform to provide an interrogatable service catalogue (with complete and up to date information).	1. Extend, accelerate and link GPiMHS model and Community Connectors across Surrey. 2. Review Healthy Surrey website and its support for navigating services and keep this updated 3. Map services in each borough and district and highlight any material differences	1	SABP	All agencies	Jun-21	Dec-21
Relational Diagnostics	4.Focus on: - improving relationships at every level of the system. That every person and organisation in Surrey's emotional wellbeing and mental health system works to improve relationships between individuals and organisations across the system, with a focus on effective communication at every level within and between organisations. Use the relational diagnostic tool to monitor this and identify trends and any targeted timely remedial action.	1. Improve individual and organisational working relationships through more joint training and development, OD activity, improved communication and collaborative working in localities. 2. Undertake a follow-up relational diagnostic audit in one year's time.	2	MHPB	SABP (audit)	Jun-21	Mar-22
System Model	5.Focus on: better joined-up work at the local community level. Align Community Mental Health Recovery Teams with Primary Care Networks, GPs and other local NHS and local authority housing and community services, enabling closer and more effective working, information sharing and earlier and better co-	1. Work to better align Community Mental Health Recovery Teams with Primary Care Networks, GPs and other local NHS and local authority housing and community services	2	SABP	ICP, D&B, SCC, System leads	Jul-21	Dec-21
Consistent data and outcomes	6.Focus on: good data and using it to good effect. Creating a system-wide team and resource to agree what information is needed to understand need, monitor demand, identify priorities, assess and improve performance and outcomes, and make better informed decisions for the mental health system as a whole. This team should execute a mapping exercise to establish and redress the capacities and approaches necessary to ensure all partners can collect, house, share, and analyse the data necessary in such a way as to deliver the information and insight identified by this team as essential.	1. Establish system-wide team/resource to determine what data best enables the system to understand need, monitor demand, identify priorities, assess and improve performance and outcomes, and make better informed decisions for the mental health system as a whole. 2. Undertake a mapping exercise to establish and redress the capacities and approaches necessary to ensure all partners can collect, house, share, and analyse the data necessary in such a way as to deliver the information and insight identified by this team as essential. agreement on what services we want to redesign and what outcomes need to be achieved by that redesign. 3. Ensure a focus on user voice, qualitative and data metrics to understand what good outcomes actually look like and how we will know if they're achieved. 4. Isolate system data that is not useful – if it must be collected/reported for other reasons, it should be kept as separate as possible to avoid clouding the process of turning data into system insight 5. Identify where in the system the data that is required is being collected or could be collected, and therefore where the gaps of data collection (or capacity to collect) are and how they can be filled (or capacity built). 6. Address behavioural and cultural issues that are limiting the capture, collation, sharing and effective use of data to secure better outcomes, experiences and services	2	SABP	Public Health	Jun-21	Dec-21
Funding	7.Focus on: the resource and capacity needed to deliver. Commission specialist health economists to analyse and better understand the funding and resourcing of emotional wellbeing and mental health services in Surrey, including the voluntary and community sector, with the purpose of creating an evidence base to be used to either secure greater funding to match need or to redistribute funding across the system to achieve greater effectiveness and efficiency.	1. Commission a specialist health economist to undertake a review of financing/funding and resourcing of mental health services, with a focus on adequacy and distribution across the system	2	ICS	SABP	Jun-21	Oct-21
Engagement	8.Focus on: engaging and supporting schools. Fully engage all schools in the new CAMHS service model and jointly monitor its impact, while continuing to support schools to embed a whole school approach to emotional wellbeing and mental health, ensuring they have rapid access to timely external information, interventions and help when needed.	1. Information campaign to schools and agencies regarding new CAMHS service model 2. Public engagement campaign and awareness raising around emotional wellbeing and positive mental health and preventative and early help support, across all agencies	2	SCC Comms	SABP Commissioners of Services	Jun-21	Oct-21

Additional enablers of improvement

Theme	Recommendations	Immediate next steps	Priority	Lead	Support	Start date	Due date
System Governance	9. Simplify and streamline mental health governance arrangements to ensure a genuine system-wide remit, using relevant data to provide evidence to hold partners to account for delivery, services standards, outcomes and users' experiences	1. MHPB to propose refreshed governance arrangements, to include oversight by HWB Board, ICS, SOAG with co-ordination and execution led by the Mental Health Delivery Board. 2. HWB, SOAG and SCC Scrutiny support system accountability 3. Ensure that residents / carers who are using services are part of the governance	2	MHPB	ICS/SABP	Jun-21	Oct-21
Technology	10. Develop and exploit the full capability of digital technologies (e.g. online consultations, emotional wellbeing apps, Health Tech Lab) in supporting emotional wellbeing and mental health outcomes and preventing ill-health, especially capitalising on the positive applications that have been introduced during the Covid-19 pandemic.	1. All agencies to positively consider and adopt technology solutions, apps and devices where beneficial and viable 2. Utilise Health Tech Lab developments and align to new system model 3. Align to information sharing recommendation - consider a single system portal	3	All	Digital teams	Jun-21	Jan-22
Covid -19 Focus	11. Ensure emotional wellbeing and mental health provision are oriented towards the needs and demands that either come from the pandemic (eg PTSD, bereavement, Long Covid, youth unemployment, unequal impacts on the BAME community) or that have been suppressed by it (people not seeking help coming forward later).	1. To engage IAPT in the psychological support i.e.. bereavement, PTSD, physical effects of long covid. 2. To engage with Surrey Minority Ethnic Forum in their work on emotional wellbeing and mental health amongst BAME communities	3	SABP	IAPT services	Sep-21	Dec-21
Training and awareness	12. Develop and roll out emotional wellbeing and mental health awareness, literacy, education and training (e.g. NHSE Mental Health First Aid, trauma informed care) for all employees and volunteers who are working across the system.	1. Develop a training and awareness collaborative to agree training priorities, design literature and monitor effectiveness.	2	SABP and Training leads	Public Health	Jun-21	Dec-21
Communication, Resilience & Preventative Strategy	13. Building on the work to date, refresh and expand a Surrey-wide communication campaign around the priority afforded to emotional wellbeing and mental health, the positive preventative steps that individuals can take and the support, services and help on offer.	1. Develop a campaign strategy to ensure that residents of Surrey are aware of resilience, educated regarding emotional wellbeing and services to support and prevent poor mental health.	2	SABP Comms	IAPT services	Jun-21	Oct-21

Priority improvements to services

Theme	Recommendations	Immediate next steps	Priority	Lead	Support	Start date	Due date
Preventing Gaps in Service & Improving Transition for People	14. Referrals both within organisations (e.g. SABP, GPs, etc.) and between clinicians across organisations must be subject to a 'no bouncing' rule, so that a referral is and cannot be deemed closed by referring the patient to another service.	1. Initiate a presumption across all agencies against multiple referrals, whereby users are 'bounced' between services/clinicians and agencies 2. Establish a methodology for capturing, tracking and auditing a representatie number of cases across the system in order to monitor performance and progress against this objective.	1	SABP	Service users and third sector	Jun-21	Sep-21
Information & Data Sharing Arrangements	15. Improve awareness and understanding at all levels of data sharing issues, arrangements, protocols, and agreements (e.g. the Surrey 'Multi Agency Information Sharing Protocol') to ensure the appropriate and necessary free flow of data across the system to benefit outcomes	1. Share more widely and deeply across all agencies the Surrey Multi-agency Information Sharing Protocol (MAISP) to support the freer flow of shareable data and information in the interests of improved outcomes, experiences and services.	2	SODA	Information Sharing Group	Jun-21	Aug-21
Engage with and improve access, reduce barriers to groups that do not engage with traditional services.	16. Establish a pilot methodology of deep engagement with target groups currently identified as being underserved in order to better understand the challenges they face, the response required, starting with those with multiple needs and conditions, people with eating disorders and a 16 to 25 years old cohort.	1. Identify groups and survey them using engagement methodology to understand the barriers to engagement 2. Once barriers have been identified, develop strategies for existing services to address the barriers and make service more accessible for when people need them	2	Public Health	SABP	Jul-21	Dec-21
Review Capacity of Mental Health Crisis and Inpatient Services	17. In parallel with a shift to more preventative approaches, undertake a review of capacity for crisis and inpatient care, including alternatives to beds and support for people coming out of hospital, to ensure capacity is better aligned with need and demand.	1. Review national guidance and current demand upon crisis and inpatient services and the adequacy of services to prevent or post discharge against national recommendations and benchmarked good practice provision.	2	CCG MH Commissioner	SABP SCC	Jun-21	Nov-21
s136 health based place of safety & follow up	18. Review of the adequacy of s136 ('place of safety') provision against the national benchmark and address any shortfall in provision for those who don't require hospital admission	1. Review national guidance and current capacity of s136 and adequacy of services post discharge against national recommendations and benchmarked good practice provision.	2	CCG MH Commissioner	SABP Police	Jun-21	Sep-21
Improving Access to Psychological Therapies	19. Review the funding, commissioning, and provision of the six IAPT services, to enhance the offer and extend capacity, following the precedent of reorganising CAMHS, in view of the importance of and priority afforded to talking therapies in treating mental ill-health.	1. IAPT providers and commissioner to develop plans to improve awareness, access and outcomes for service users whilst aligning to the new model of services across Surrey.	2	CCG MH Commissioner	IAPT services	Jul-21	Nov-21

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