

Health and Wellbeing Board (HWB) Paper

1. Reference Information

Paper tracking information	
Title:	Update on the Mental Health Improvement Plan
HWBS Priority - 1, 2 and/or 3:	Priority 2
Outcome(s)/System Capability:	Outcomes: All outcomes under Priority 2 System capabilities: particularly Clear Governance and Programme Management
Priority populations:	All, particularly People with serious mental illness
Civic level, service based and/or community led interventions:	The overall programme will look to use interventions across the Population Intervention Triangle
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Board Sponsor(s):	<ul style="list-style-type: none"> Professor Helen Rostill, Deputy Chief Executive and Director of Therapies, Surrey and Borders Partnership / Director for Mental Health, Surrey Heartlands ICS and SRO for Mental Health, Frimley ICS (Priority 2 Co-Sponsor) Kate Barker and Liz Williams - Joint Strategic Commissioning Conveners, Surrey County Council and Surrey Heartlands (Priority 2 Co-sponsors)
HWB meeting date:	28 September 2022
Related HWB papers:	N/A
Annexes/Appendices:	Appendix 1 – Summary of governance arrangements Appendix 2 – Mental Health System Delivery Board draft terms of reference Appendix 3 – Phasing workplan

2. Executive summary

The Mental Health Improvement Plan (MHIP) is our response to the 19 recommendations of the May 2021 report “*Emotional wellbeing and mental health in Surrey: A review of outcomes, experiences and services*”. The 19 recommendations describe how we can improve the services and support which we provide to our residents and promote their mental health and emotional wellbeing.

In recent months the MHIP, and mental health improvement and transformation work more broadly, has undergone a reset, in order to address some of the challenges

which have been found to date, to align with wider system ambitions and to build on our successes. A key element of this reset is the establishment of a new Mental Health System Delivery Board for Surrey.

This paper provides an update on the changes that have been made, and next steps. It also asks the Health and Wellbeing Board to agree the Terms of Reference of the new Mental Health System Delivery Board.

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3. Recommendations

The Health and Wellbeing Board is asked to:

1. Approve the draft terms of reference of the new Mental Health System Delivery Board (Appendix 2); and
2. Note the contents of this update and endorse the proposed next steps.

4. Reason for Recommendations

We have refreshed our governance and are currently phasing our broad and ambitious work plan. Further input from the Board will be requested in future updates.

5. Detail

Since the MHIP was launched in 2021 there has been a wide range of work undertaken across the system which contributes to meeting the 19 recommendations and promoting the mental health and emotional wellbeing of our residents.

However, we have also been held back by the absence of some key enablers. Our governance arrangements did not provide the right leadership and decision-making required to drive the programme forward and resourcing has been a challenge.

Refreshed governance

Mental health improvement and transformation in Surrey is a broad agenda with many activities and plans in need of prioritisation and phasing. The scope of mental health improvement and transformation covers:

- a) The 19 recommendations underpinning the Mental Health Improvement Programme;
- b) 'Priority 2' of Surrey's Health and Wellbeing Strategy (HWBS);
- c) 10 year plan for Mental Health (currently being prepared by NHS England);
- d) Sustainability and financial recovery requirements of the health systems in Surrey;
- e) Delivery of the NHS Long Term Plan; and

- f) System ambitions around place, in line with local priorities and the Fuller Stocktake¹.

The Health and Wellbeing Strategy is a key element of this work and Early Intervention and Prevention, aligned with Priority 2, is a particular focus. People with serious mental illness are one of the priority populations identified in the HWBS. There are other areas of overlap, for example regarding wider determinants of health. Until now, however, governance for the different areas set out below has not been effectively aligned.

We have now refreshed our governance, creating a new Mental Health System Delivery Board for Surrey, to be established jointly by the Health and Wellbeing Board and the Integrated Care Board (ICB) with the remit and membership to take the necessary decisions to deliver this work. The ICB had its first meeting in August 2022. Jonathan Perkins, formerly Deputy Chair of NHS Surrey Heartlands CCG, serves as Independent Chair with Clare Burgess, CEO of Surrey Coalition of Disabled People as Vice-Chair. Liz Bruce, Joint Executive Director – Adult Social Care & Integrated Commissioning continues as Executive SRO for mental health and Graham Wareham, CEO of Surrey and Borders Partnership NHS Foundation Trust (SaBP) is the ICB representative.

We have also maintained the best of the previous governance arrangements. A key feature of this was the engagement of a wide range of stakeholders – including service users, carers, schools, police, ambulance services and others – and the ability for that wide group to influence the direction of travel. This invaluable contribution will now be brought through the Co-Production and Insight Group, co-chaired by Tim Bates, Surrey Heartlands ICS Clinical Director, Integrated Services, and Helen Rostill, Deputy CEO and Director of Therapies, SaBP.

A summary of the governance arrangements is provided at Appendix 1 and the draft terms of reference for the Mental Health System Delivery Board – as discussed at the Board’s August meeting – are provided at Appendix 2. The Health and Wellbeing Board is asked to approve these terms of reference, as one of the two bodies (alongside the ICB) establishing it.

Within this wider governance reset, we have also agreed to bring together the leadership of the Early Intervention and Prevention work in the MHIP and Priority 2 of the HWBS, which have until recently been operating separately and with a different focus.

Phasing our priorities

The broad range of activities, plans and priorities we have cannot all be delivered at once, and a lack of system focus on the most critical issues will hold us back.

Our system priorities need to be clearly phased. We are therefore conducting a phasing exercise, to form the foundation of a plan which will set out:

- When interventions are able to be delivered
- What resources are required to deliver and where they will be drawn from

¹ Next steps for integrating primary care: Fuller stocktake report, NHS England May 2022

- The impact and reach of our choices

Appendix 3 is our workplan setting out how we intend to do this. At the time of writing, this phasing exercise is currently underway.

Key milestones already concluded include two workshops:

- Initial workshop with a number of senior leaders from across the system, representing NHS, local authority and voluntary sectors for both adults' and children's. This workshop tested and developed our approach to the overall phasing exercise.
- A workshop with the Co-Production and Insight Group, which includes representation from a wide range of stakeholders including service users and people with lived experience, Healthwatch, police, ambulance services, elected representatives, public health and others. This workshop provided an opportunity for this diverse group to contribute their views and insight on the areas which are most important to them and those they represent.

The Mental Health System Delivery Board is due to discuss recommendations at its meeting on 29 September 2022. It is anticipated that further work will be required to further develop our programme of work, as outlined in the workplan in Appendix 3.

The HWB Board should note that, while this phasing exercise is key to effective delivery of our work, a number of activities, plans and projects are already being delivered. Work has not been paused and we continue to deliver improvements to mental health support and services while we review the areas we need to focus on going forwards.

6. Challenges

Resourcing continues to be a challenge for this programme. We considered accelerating the pace of the phasing exercise by commissioning support from external health consultants. We have, however, decided to proceed using existing and internal resource. Two factors have been key to this decision: use of public money and the desire to align our work with wider system prioritisation, including the wider exercise being conducted by ICSs to respond to the Fuller Stocktake and how our services will be delivered at home, at neighbourhood, at place and at system.

When the Mental Health System Delivery Board has considered phasing recommendations, we will then need to determine the extent and timing of resource which can be allocated to deliver our priorities.

7. Timescale and delivery plan

Timescales for delivery will follow the phasing exercise and establishing the available resource.

8. What communications and engagement has happened/needs to happen?

A wide stakeholder group is being engaged in our phasing work, in particular using members of the Co-Production and Insight Group. Service users and people with lived experience are a key part of this. We are also engaging closely with the Adults and Health Select Committee.

Further assessment of our communications and engagement needs will be required following the phasing exercise.

9. Next steps

Key next steps are:

- Conclusion of the phasing exercise
- Meeting of the Mental Health System Delivery Board on 29 September
- Securing resource to deliver system priorities in line with the agreed phasing

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