

Wednesday, 5 October 2022



MENTAL HEALTH IMPROVEMENT PROGRAMME: UPDATE ON PHASING OF SYSTEM PRIORITIES

Purpose of report: To provide an update to the Adults and Health Select Committee on progress since the June 2022 meeting.

Introduction:

1. An update on the Surrey's Mental Health Improvement Programme (MHIP) was provided to the Committee in June 2022. Recommendations following that meeting included:

"For Surrey Heartlands, SABP, and Mental Health leads in Surrey CC to provide a future update and report to the AHSC on how existing and additional funding will be effectively used to deliver on the MHIP, and to provide a timeline as to when the plan is expected to be delivered on."

2. We look forward to bringing the Committee a report in due course which fulfils this recommendation and provides a full update on our collective work to deliver the MHIP. At the 23 June meeting of the Committee, we discussed the need for system priorities to be clearly phased. We are currently undertaking an exercise to do this, commissioned by our new Mental Health System Delivery Board at its first meeting in August. This phasing exercise will set out clearly how and when we will deliver improvements to mental health support and services for Surrey residents.
3. We are not yet in a position to report to the Committee on the outcome of the phasing exercise. This report is therefore a brief update on progress since June 2022 and the work currently underway. Because of the nature of this report, it focuses on how we will get our partnership structure and system accountability right, in order to enable delivery and effective oversight of progress.
4. The next meeting of the Mental Health System Delivery Board is on 29 September, therefore, we will be able to provide a further verbal update to the Committee during the meeting on 5 October.

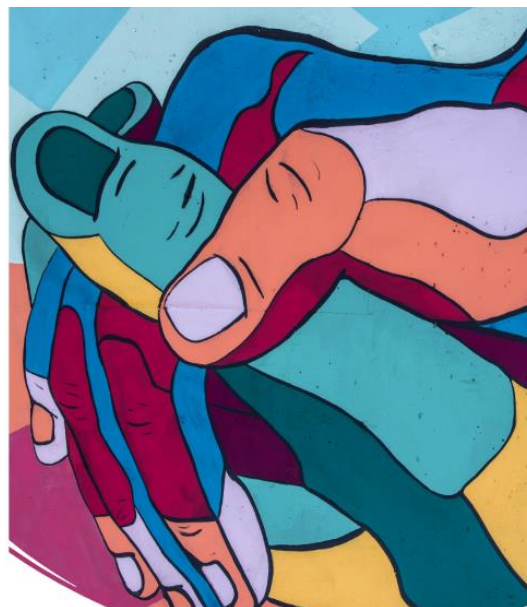
5. It is anticipated that a fuller update, meeting the recommendation in paragraph 1 above, will be provided in the near future.

Context

6. Approximately 63,000 people were in contact with mental health services during 2020/21. These contacts ranged from nearly 600,000 primary care appointments and 30,000 Improving Access to Psychological Therapies (IAPT) referrals to 900 inpatient admissions at Surrey and Borders Partnership NHS Trust (SaBP) and 500 open care packages for mental health with the County Council. Analysis by NHS Providers suggests that 180,000 people in Surrey would benefit from contact with mental health services. Comparing this figure to the activity, it suggests that only a third of people are being directly supported.
7. The Mental Health Improvement Plan (MHIP) is in place to deliver the 19 recommendations from the report *Emotional wellbeing and mental health in Surrey: A review of outcomes, experiences and services*, dated May 2021 and ratified by the Health and Wellbeing Board in June 2021. This report itself followed a previous Task Group established by the Adults and Health Select Committee and a system Mental Health Summit held in November 2020. Each of these highlighted that there were significant improvements which could and should be made to better promote the mental health and emotional wellbeing of Surrey residents.
8. The MHIP is a system plan, being designed and delivered collectively by NHS, local authority and third sector partners. The voice of users, carers and those with lived experience is vital and is embedded into our work. The MHIP works to deliver our vision, co-produced with service users:

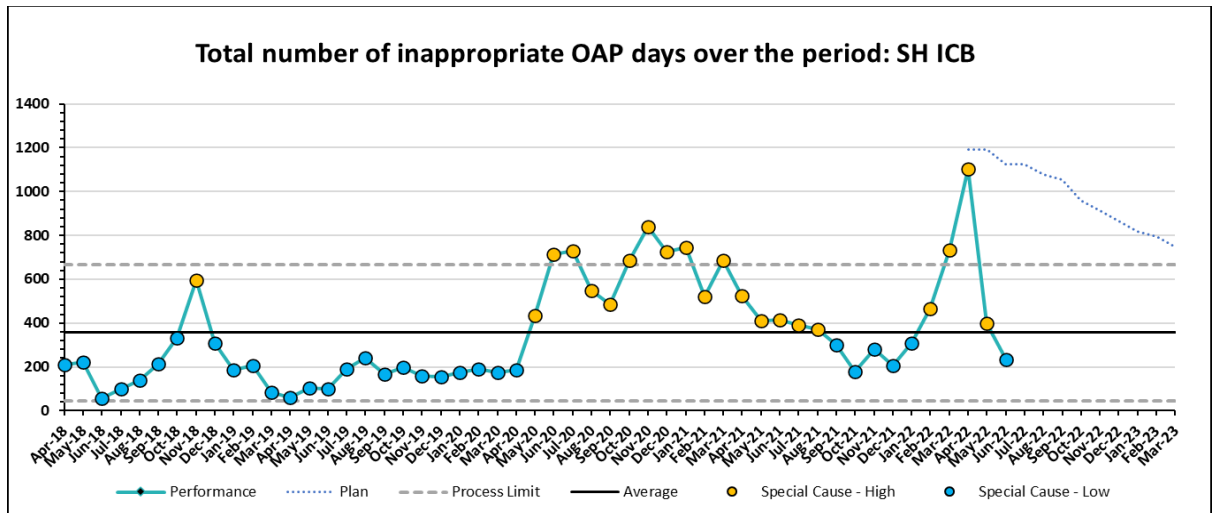
The re-worked draft vision

"Together, we build and nurture good mental health and emotional wellbeing for all. If anyone needs help, they will find services on offer for themselves, their family and carers, which are welcoming, simple to access and timely. No-one is turned away from a service without being given support to get the help they need"



9. Alongside the work of the MHIP, we are also seeing signs of improvement in 'business as usual' in historically challenging areas. Examples include:

- A reduction in Out of Area Placements, as illustrated by the below (data currently subject to validation)



- Improved responsiveness in responding to complaints and investigating and learning from serious incidents (SaBP had 89 serious incidents open at August 2022, down from 139 in June 2021)
- SaBP, our specialist secondary care provider, is rated as 'Good' by the Care Quality Commission both overall and in each domain they assess.

Update on MHIP progress since June 2022

Scope of mental health improvement and transformation

10. 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:
- The 19 recommendations underpinning the Mental Health Improvement Programme ('MHIP');
 - 'Priority 2' of Surrey's Health and Wellbeing Strategy (refreshed in summer 2022);
 - 10 year plan for Mental Health (currently being prepared by NHS England);
 - Sustainability and financial recovery requirements of the health systems in Surrey;
 - Delivery of the NHS Long Term Plan; and

- vi. System ambitions around place, in line with local priorities and the Fuller Stocktake (see below).
11. This broad range of activities, plans and priorities cannot all be delivered at once, and a lack of system focus on the most critical issues will hold us back.
12. At the 23 June meeting of the Adults and Health Select Committee, we discussed the need for system priorities to be clearly phased. This phasing exercise will form the foundation of a plan which will set out:
 - i. When interventions are able to be delivered
 - ii. What resources are required to deliver and where they will be drawn from
 - iii. The impact and reach of our choices
13. Annex 1 is our workplan setting out how we intend to do this. The workplan was circulated to system partners and stakeholders at the start of the phasing exercise to support discussions about our approach and expected outputs.
14. 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 (shadow) 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.
15. Our approach includes gathering together the plans, data and information which already exist among system partners and bringing them together into a way which can inform and drive our collective system priorities. The process of gathering and drawing together this information is ongoing.

System leadership

16. At the 23 June meeting, we discussed the need for refreshed governance and leadership and our plans for putting this in place. Since the meeting, we have had the first meeting of the new Mental Health System Delivery Board, which has a remit to oversee mental health improvement and transformation in Surrey.

17. This Board has been established by both the Health and Wellbeing Board and the Integrated Care Board, with accountability for the full scope described in paragraph 3, above. The Board is independently chaired by Jonathan Perkins, formerly acting chair of NHS Surrey Heartlands CCG, with Clare Burgess, CEO of Surrey Coalition of Disabled People, as vice-chair.
18. At its first meeting in August, the Mental Health System Delivery Board discussed our approach to the phasing, or prioritisation, of our work. The workplan set out in Annex 1 is the result of that discussion. The Board will receive an update and initial recommendations on the phasing exercise at its September meeting. The Co-Production and Insight Group provides a key route for engagement and co-production with our stakeholders.

Timetable for completing this work

19. In preparing for this work, we considered accelerating the pace of our work 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.
20. In May 2022, Dr Claire Fuller, Chief Executive of Surrey Heartlands Integrated Care System published a report commissioned by NHS England, "*Next steps for integrating primary care: Fuller stocktake report.*" The 'Fuller stocktake' looked at integrated primary care, what is working well, why it's working well and how we can accelerate the implementation of integrated primary care (incorporating the current 4 pillars of general practice, community pharmacy, dentistry and optometry) across systems. Surrey Heartlands, as well as all local systems nationally, is preparing a response to the recommendations of the Fuller stocktake, due to be completed in the autumn. This response will review our priorities as an Integrated Care System and consider what support and services are delivered at home, at neighbourhood, at place and at a system level. The Fuller stocktake is, therefore, key to our approach to improving mental health and emotional wellbeing in Surrey.
21. In October, we are anticipating publication of reviewed and refreshed outcome metrics for the Health and Wellbeing Strategy, following the strategy refresh over the summer. These metrics have been developed to better link with the updated priorities, outcomes and priority populations and will provide clarity on the areas in which our Early Intervention and Prevention work will need to focus.
22. We are holding two workshops in October which will combine system expertise to consider the current demand and capacity challenges we are facing in mental health, both for adults and children. The aim of the workshops is to review the

sustainability of our current models of care and identify opportunities for improvement. It is anticipated that these workshops will generate plans and actions which will need to be integrated into our phasing.

23. As we phase our system priorities for mental health improvement and transformation, we must do so in a way which aligns with wider changes to primary care and system working. Considering this, alongside the additional financial cost of commissioning support from an external consultancy, we have decided to continue with existing resource. We acknowledge that this does have an impact on the pace of work, in particular during the summer.
24. Our new Mental Health System Delivery Board will receive an update with initial recommendations on the phasing of our system priorities when it meets on 29 September.

Conclusions:

25. The exercise to phase, or prioritise, our work across this broad agenda continues to be high priority for the system. The Mental Health System Delivery Board will receive an update with initial recommendations when it meets on 29 September and we will be able to provide a verbal update on this by the time of the Committee's meeting on 5 October.

Recommendations:

26. A final report, responding to the recommendation of the AHSC in paragraph 1, will be provided in the near future, at a time to be agreed with the Committee.

Next steps:

27. Conclusion of the phasing exercise as described in this report.

Report contact

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Sources/background papers

Annex 1 – Phasing workplan (as circulated to stakeholders)