#### SURREY COUNTY COUNCIL

**CABINET** 

DATE: 29 JUNE 2021



REPORT OF CABINET MR TIM OLIVER, LEADER OF THE COUNCIL

MEMBER:

MICHAEL COUGHLIN, DEPUTY CHIEF EXECUTIVE **LEAD OFFICER:** 

SUBJECT: **IMPROVING MENTAL HEALTH OUTCOMES, EXPERIENCES** 

AND SERVICES IN SURREY

**ORGANISATION** STRATEGY PRIORITY **TACKLING HEALTH INEQUALITY** 

AREA:

#### **Purpose of the Report:**

The purpose of this report is to provide an overview of the work of the Mental Health Partnership Board on emotional wellbeing and mental health outcomes, experiences and services in Surrey and the resulting recommendations on how Surrey as a system needs to change to improve these. The recommendations have enabled the production of a high-level improvement programme to support the implementation of these changes.

This report supports the 'Tackling Health Inequality' priority objective of the refreshed Organisation Strategy. The vision of the Mental Health Partnership Board is: "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."

### **Recommendations:**

It is recommended that Cabinet:

- 1. Acknowledge the work commissioned and undertaken by the Surrey Mental Health Partnership Board.
- 2. Endorse the recommendations and implementation programme arising from that work, which will drive improvements across the mental health system.
- 3. Acknowledge the Council's role and contribution to emotional wellbeing and mental health outcomes, experiences and services in Surrey.

#### **Reason for Recommendations:**

Tackling health inequality is one of the Council's four strategic priorities. Poor mental health is a key factor in a range of conditions and personal situations, such as substance abuse, unemployment, poor physical health, that create and/or worsen health inequality. The mental health system in Surrey is under great stress and struggling to manage the demands made upon it. This report and its recommendations, the work to date and the work proposed are intended to support the mental health system deal with the immediate demands and pressures as well as building an effective and sustainable improvement programme.

## **Executive Summary:**

## **Background**

- More Surrey residents, of all ages, are experiencing more pronounced mental health problems as a result of being affected by Covid-19, national or tiered lockdowns, social distancing and the general disruption to the patterns and rhythm of normal life. (There are an estimated 122,856 adults and 23,037 children (aged 5 – 17) living with a mental health disorder in Surrey, with 75% of residents reporting that lockdown has affected their mental wellbeing).
- 2. Such experiences are known to heighten and worsen health inequality, with those experiencing mental health problems feeling and/or being left behind. Good mental health relies on the individual and, critically, shared accountability of everyone providers, funders, commissioners, individual residents, families, parents, schools, employers and the private sector. While considerable efforts have been made to cope with and manage the current pressures it is evident that services, the workforce and more importantly those needing support, care, help, therapies and treatment, are suffering, not only psychologically, but also from the inequalities and socio-economic disadvantage often experienced by people with significant mental health needs.
- 3. In November 2020 a Summit on Mental Health was held to facilitate a joint understanding across Surrey of the current situation with regard to the mental health of residents, the experiences of users and challenges facing services and build a consensus around and set in motion activity to improve mental health services, user experiences and outcomes. The Summit highlighted key issues and poor service user experiences, as well as best practice and alternative models from elsewhere It also confirmed a renewed commitment and energy to work together as system partners to design and invest in transformative solutions that will improve emotional wellbeing and mental health outcomes for the residents of Surrey.
- 4. Arising from the Summit, in December 2020, the Surrey Heartlands Integrated Care System (ICS) Board established an independently chaired Mental Health Partnership Board, comprising representatives of service users, the voluntary sector, District and Borough Councils, health bodies, business and County Council.

### **Mental Health Partnership Board**

- 5. In January 2021 the inaugural Mental Health Partnership Board met with the purpose 'To bring together a range of partner organisations to oversee, govern and drive whole system transformation and improvement in mental health outcomes, experiences and services for children and adults living with mental ill-health in Surrey.' The Partnership Board identified their 'key lines of enquiry' and commissioned a Peer Led Review to enable effective engagement and understanding from all partner agencies, carers, those with lived experience and residents with no experience of mental health problems.
- 6. The peer team's approach involved focus groups & written feedback from service users, carers & Surrey residents, focus groups from all of Surrey's agencies & organisations, interviews & workshops with 19 senior leaders from the MHPB, data and insight gathering exercises, a relational value audit, a study of the Care Quality Commission outstanding examples, a review of best practice and existing evidence across Surrey and England and a cross-cutting 'findings and recommendations' workshop.

- Having regard to the peer-led review's findings and recommendations the Board prepared a report setting out their conclusions and recommendations. This is attached at Appendix A.
- 8. In order to provide a foundation and prompt for the necessary work going forwards, the Board endorsed an initial high-level Improvement Programme, drawn from the diagnostic review and built around the recommendations. This is attached at Appendix 2. It is important to note the Improvement Programme section of the MHPB report, which sets out some conditions e.g. dedicated resources, governance, etc. that will be essential to ensure the delivery and success of the programme.
- 9. Formal, structured monitoring, assessment, escalation and approval of any necessary remedial action to ensure the Improvement Programme is on track will be undertaken at the Surrey Heartlands ICS 'Strategic Oversight and Assurance Group' (SOAG), along with periodic update reports to the ICS Board, Health and Wellbeing Board, Surrey County Council's Cabinet, South East Regional NHSE/I Board and Adults and Children's Safeguarding Partnerships.
- 10. The MHPB also recommended that a follow-up peer review in one year's time be undertaken, to assess the progress made against the Improvement Programme and suggest any further activity required to secure the vision for emotional wellbeing and mental health in Surrey.

#### Consultation:

11. The work of the MHPB has involved a wide range of stakeholders, including those with lived experience, both on the Board itself, and approximately 150 through focus groups, written submissions, relational diagnostic survey, etc.

# **Risk Management and Implications:**

12. The risks associated with a mental health system that is not able to cope effectively with the level and acuity of demand include harm to individuals, harm to communities and harm to the economy. This report sets out a programme of work and governance aimed at mitigating these risks.

## **Financial and Value for Money Implications:**

- 13. The Mental Health Partnership Board recommended that a review of the funding of mental health services in Surrey be undertaken by an external health economist. This will identify the adequacy and appropriateness of the allocation of funds across the system.
- 14. While this work is being undertaken, the initial stages of the improvement programme and support for it will be met from within existing system-wide resources.

## **Section 151 Officer Commentary:**

15. Although significant progress has been made over the last twelve months to improve the Council's financial position, the medium-term financial outlook beyond 2021/22 remains uncertain. The public health crisis has resulted in increased costs which may not be fully funded. With uncertainty about the ongoing impact of this and no clarity on the extent to which both central and local funding sources might be affected in the medium term, our working assumption is that financial resources will continue to be constrained, as they have been for the majority of the past decade. This places an onus on the Council to continue to consider issues of financial sustainability as a priority in order to ensure stable

provision of services in the medium term. As such, the Section 151 Officer supports the recommendations included within this report.

## **Legal Implications - Monitoring Officer:**

16. This report outlines for Cabinet all the work that is being done to enhance the Council's ability to meet its statutory responsibilities under existing legislation including the Care Act 2014, the Mental Health Act 1983 and the Children and Families Act 2014. It does not introduce new responsibilities.

## **Equalities and Diversity:**

17. The recommendations in this report are intended to support the improvement of mental health outcomes, experiences and services, aiding those experiencing mental health issues to be aware of and access early support and services as early as possible to minimise the impact of their condition.

## Other Implications:

18. The potential implications for the following council priorities and policy areas have been considered. Where the impact is potentially significant a summary of the issues is set out in detail below.

Area assessed:	Direct Implications:
Corporate Parenting/Looked After	Set out below
Children	
Safeguarding responsibilities for	Set out below
vulnerable children and adults	
Environmental sustainability	No significant implications arising
·	from this report
Public Health	Set out below

#### **Corporate Parenting/Looked After Children Implications**

19. Children are coming into care because of the impact of lockdown on them and their families. Looked after children are known to have more MH challenges than children not in the care system; any pressure in CAMHS impacts on services to them, so work to improve mental health provision should benefit looked after children with EWMH issues and is an important part of our duties as corporate parents. For children in care and care leavers, the Children in Care CAMHS services will continue and improve under the new Alliance contract. These and the HOPE service are beacons of good practice. In addition, a regional agreement on priority MH services for Care Leavers out of County has recently been entered into.

## Safeguarding Responsibilities for Vulnerable Children And Adults Implications

20. The measures proposed should benefit vulnerable adults and children, given the correlation between poor mental health and vulnerability, as identified by the Surrey Safeguarding Children's Partnership

# Public Health

21. Positive mental health is a key determinant and driver of wider health indicators and conditions. The measures proposed should benefit individuals and population health.

## **What Happens Next:**

22. The improvement programme is being undertaken with immediate effect. Improvement across the system will be monitored through existing assurance and performance boards and overall progress will be periodically reported into the Health and Wellbeing Board, Cabinet, Select Committees and the SABP Strategic Board.

\_\_\_\_\_\_

### **Report Author:**

Michael Coughlin, Deputy Chief Executive, michael.coughlin@surreycc.gov.uk

### Consulted:

Tim Oliver, Leader of the Council

#### Annexes:

Annex 1 – Surrey Mental Health Partnership Board - Emotional wellbeing and mental health in Surrey: A review of outcomes, experiences and services

Annex 2- Mental Health Partnership Board draft improvement programme

## Sources/background papers:

- Peer-led review report
- Relational Diagnostic report
- Agendas and minutes of Mental Health Partnership Board meetings

