

## **EAST AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP**

### **STRATEGIC PLANNING GROUP: 14 NOVEMBER 2018**

#### **DEVELOPING AND DELIVERING AYRSHIRE'S MENTAL HEALTH STRATEGY IN EAST AYRSHIRE**

##### **Report by: Head of Community Health and Care Services and Head of Primary Care and Out of Hours Response Services**

#### **PURPOSE**

1. The purpose of the report is to update on the progress made in developing a pan-Ayrshire strategy for mental health in response to the national Mental Health Strategy 2017-27 and in parallel, the progress made in developing East Ayrshire's mental health strategic commissioning arrangements.

#### **BACKGROUND**

2. At its August 2018 meeting, the Integration Joint Board (IJB) received a report outlining the arrangements, led by North Ayrshire HSCP, for development of a pan-Ayrshire Mental Health Strategy, to provide an overarching strategic framework to set the context and future vision for mental health services and enable the development of service delivery plans in each of the Ayrshire HSCPs.
3. The report also set out the initial pan-Ayrshire proposals to realise Action 15 of the national mental health strategy, using the associated allocation of Scottish Government investment. The report stated these proposals would be subject to further detailed development and engagement, ensuring alignment to the Primary Care Improvement Plan, which was approved in November to implement the national General Medical Services contract. This report was presented to the IJB on 1<sup>st</sup> November 2018 as an update and progress report.

#### **AYRSHIRE MENTAL HEALTH STRATEGY DEVELOPMENT**

4. The pan-Ayrshire Mental Health Strategy Engagement Team has designed and rolled out an engagement programme entitled the Ayrshire Mental Health Conversation to gather feedback from key audiences: people with lived experience of mental health services, including carers and families, GPs and the general public. The engagement period was originally 1 August to 17 September, subsequently extended to allow for thorough engagement with emerging audiences. The feedback obtained will form part of the evidence base for the Ayrshire strategy.
5. Almost one thousand responses are anticipated across online, hard copy survey responses, outputs from face to face engagement events, partner-hosted conversations and GP survey responses.
6. The Ayrshire team have agreed the methodology for analysing engagement responses and North Ayrshire colleagues are completing this work for the pan-Ayrshire strategy. An Ayrshire Mental Health Strategy co-production day is scheduled for 4<sup>th</sup> December. All who have been involved in the development of the strategy have been invited to attend.
7. In parallel, per the August report, East Ayrshire HSCP ('the Partnership') has been conducting a focussed engagement programme with local stakeholders.

## **EAST AYRSHIRE INVOLVEMENT IN AYRSHIRE STRATEGY**

8. In developing the Ayrshire Mental Health Strategy, there has been recognition of the differences in strategic context for each HSCP and in the approaches taken to engage with stakeholders and communities.
9. In relation to East Ayrshire, this has included acknowledgement of the shared Wellbeing agenda with Community Planning Partners, the Partnership's Strategic Plan 2018-21 priorities and in relation to primary care, the new national General Medical Services contract, which explicitly sets out the role of mental health practitioners in GP Practices. East Ayrshire, in its role as lead Partnership in Ayrshire for Primary Care Services, alongside North Ayrshire HSCP, South Ayrshire HSCP and NHS Ayrshire and Arran are responsible for implementing the contract through the approved Primary Care Improvement Plan.
10. The local approach demonstrates the strengths of relationships between partners, with a number choosing to 'host their own' conversation events using the engagement pack designed by the Ayrshire team and Community Connectors providing dedicated support to completion of the GP survey in practices.
11. Members of the Integration Joint Board have been actively engaged during the period, with thoughtful consideration taking place during development sessions. These views have been captured to contribute to both the Ayrshire Strategy and the East Ayrshire arrangements.
12. The Partnership, alongside and in addition to the activities described, is conducting its strategic commissioning activities, in relation to its delegated functions. In particular, a mixed stakeholder event took place on 3 October 2018, with 52 attendees, to map current mental health needs, assets and improvement priorities, aligned to the national and Ayrshire strategic themes and taking into account the perspectives of East Ayrshire survey respondents and other local evidence.
13. Stakeholders, including community partners, people with lived experience of mental health services and GPs also specifically gave their views to shape East Ayrshire's proposal for realising Action 15 of the national mental health strategy in GP Practices, in conjunction with the wider review of Primary Care Mental Health Teams, to achieve whole systems change.
14. Some themes emerging from the local engagement, which will be further developed are:
  - The top issues that people (all respondents) report as challenging to their mental health are: work-related (64%); relationships (57%); money/debt (50%); body issues/self-image (41%); bereavement (35%) and; loneliness/isolation (32%);
  - Community supports are working well to provide early intervention and asset based support and the strengths of local joint working are evident;
  - Waiting times for statutory services are a barrier to timely support, however the high quality of these services is recognised; and
  - Information and communication about the range and role of available supports for mental health problems is key to empowering people and managing demand.

## **EAST AYRSHIRE DELIVERY PLAN AND NEXT STEPS**

15. The outputs from these activities, together with analysis of the Ayrshire Mental Conversation feedback will together form the basis of the East Ayrshire Mental Health Delivery Plan, which will be reported following completion of the Ayrshire Strategy.
16. The detail of local proposals to implement Action 15 is being finalised, noting the progress and content of the paper reported to the NHS Board on 8 October 2018 with reports scheduled for the IJB at the December 2018 meeting.

## **PEOPLE WHO USE SERVICES AND CARER IMPLICATIONS**

17. The Ayrshire Strategy seeks to develop mental health services and build capacity within the workforce to improve outcomes for people using services and carers.

## **FINANCIAL IMPLICATIONS**

18. The financial allocation in respect of Prison services in East Ayrshire is £130,886 for 2018/19 and 2019/20 and £327,235 for Primary Care Services for 2018/19 and 2019/20.

## **HUMAN RESOURCE IMPLICATIONS**

19. Building capacity and additional workforce in alignment with the national and Ayrshire mental health strategies will require workforce planning and development, which may include re-aligning job profiles to meet demand, to ensure effective implementation of the model. Implementation of Action 15 utilising the local proportionate share of resource allocation modelled on Band 6 mental health nurse/practitioners as agreed by the NHS Board, will have HR implications.

## **LEGAL IMPLICATIONS**

20. There are no legal implications arising directly from the contents of the report.

## **COMMUNITY PLANNING**

21. The content of the report aligns to the Community Plan 2018-21 priorities and to the Wellbeing Delivery Plan priorities.

## **TRANSFORMATION IMPLICATIONS**

22. The strategic developments described in the report align to the Partnership's transformation agenda, including delivery of the Primary Care Improvement Plan to implement the national General Medical Services contract and; to the transformational context of the Integration Partners.

## **EQUALITY IMPLICATIONS**

23. The Ayrshire strategy and East Ayrshire delivery arrangements will provide more preventative, effective support for people who require additional support in local communities, ensuring improved access.

## **RISK IMPLICATIONS**

24. Developing and implementing mental health strategic commissioning and service delivery arrangements will build whole systems capacity, increase prevention and early intervention approaches and improve timely access to services by reducing waiting times for support, thereby reducing risk.

## **RECOMMENDATIONS**

25. Members are asked to:
  - (i) Note the progress being made towards a pan-Ayrshire Mental Health Strategy;
  - (ii) Note East Ayrshire's contribution to the development of the pan-Ayrshire Strategy;
  - (iii) Note East Ayrshire's parallel engagement and strategic commissioning activities in relation to delegated mental health services;
  - (iv) Note the finalisation of proposals to implement Action 15, aligned to the Primary Care Improvement Plan;

- (v) Note the financial allocation as detailed in paragraph 18 and delegate to the Director to issue a Direction to NHS Ayrshire and Arran in this respect
- (vi) Note this report has been presented to IJB on 1<sup>st</sup> November 2018;
- (vii) Note that the finalised Ayrshire Strategy will be reported to a future meeting of the IJB and the Strategic Planning Group;
- (viii) Note the subsequent reporting of East Ayrshire's Mental Health Delivery Plan; and
- (ix) Otherwise note the contents of the report.

**Annemargaret Black**  
**Head of Community Health and Care**  
**23 October 2018**

**Pamela Milliken**  
**Head of Primary Care and Out of Hours**  
**23 October 2018**

**Implementation Officers:**  
**Annemargaret Black, Head of Community Health and Care; Pamela Milliken, Head of**  
**Primary Care and Out of Hours**