

Joint Health Overview and Scrutiny Committee 25th October 2019

Report of: Mental Health Services in Bristol, North Somerset and South Gloucestershire

Title: Update on Mental Health Services in BNSSG

Ward: Citywide

Officer Presenting Report: Deborah El-Sayed, Director of Transformation, BNSSG CCG

Recommendation

It is recommended that the Joint Health Overview & Scrutiny Committee note the report for information.

Summary

This report provides the JHOSC with an overview of 3 key strategic processes that are currently underway to improve mental health provision – the delivery of the Mental Health Strategy, the Review of Adult Mental Health Services commissioned by the CCG and the implementation of the Long Term Plan. In addition it provides an update on three newly commissioned CCG services – Improving Access to Psychological Therapies (IAPT), Sexual Violence Therapies Service and the Crisis Café in Weston.

Context

Mental Health is a significant priority for BNSSG CCG and the STP and work is being delivered at pace, to understand the need in the area, the existing offer and the focus of future provision. There is currently a challenged picture within BNSSG including high numbers of people being placed out of area, significant numbers of people on the wards who are under Section, a fragmented and geographically inequitable pathway, and CAMHS services offering different levels of provision. However alongside this, there is real opportunity – there is system wide agreement that Mental Health is a priority and that changes are required to really improve people's experiences and therefore lives. There is also national recognition of the issues, which are welcomed locally, which is leading to significant investment in services locally, via the Mental Health Investment Standard.

The discussion below outlines the work that is currently in delivery across BNSSG.

Strategic Context

Mental Health Strategy

The CCG has worked with partners across BNSSG to develop an STP wide all age Mental Health and Wellbeing strategy which sets out what changes will need to be made to local services, identifies support to address current and emerging need, and which responds to feedback and insights from people with lived experience, carers, clinicians and our wider population. It is also aligned with national policy direction such as the NHS Long Term Plan and recognises the need to make our services efficient, affordable and sustainable.

The draft strategy has been co-produced with users, clinicians, stakeholder and wider population through a significant number of engagement events and a structured insights process. A Healthier Together mental health strategy steering group facilitates oversight and the involvement of all system partners with a commitment to embed the insights from those with lived experience in all aspects of the design.

The strategy has been built upon four common themes in the context of the life course; promoting mental wellbeing and preventing ill health; access; integration and sustainability.

The draft strategy will presented to STP partner organisations for their views before final approval is sought from the STP Partnership Board. It is anticipated that the strategy will be presented for sign off in December 2019.

Mental Health Review of Adult Services

This review of adult Mental Health Contracts is an internal CCG review, to fully understand the position for all Adult Mental Health Contracts commissioned by the CCG in BNSSG.

BNSSG CCG is in a position where a number of contracts within the Bristol area have previously been procured. In 2013 Bristol PCT tested the market and awarded contracts to multiple Providers – awarding to different organisations and moving away from one Provider (in this case AWP) providing services to the whole of the pathway. This re-commissioning also included a 'system leadership' function designed to co-ordinate the many different providers in place in Bristol. However, this function was decommissioned in 2017 as it was challenging to evidence the value of the function and in some respects duplicated the role of commissioners. In comparison South Gloucestershire and North Somerset CCG's did not market test their services and continued to have AWP providing the vast majority of the services. This, coupled with varying levels of investment in predecessor organisations has meant that there was inconsistency in the type and level of services commissioned across BNSSG. Alongside this each area also had a number of historic small value contracts which also required review.

As BNSSG CCG we recognise that there is now a fragmented pathway across the area, with different organisations providing services in different ways. We know that we need to modernise, rationalise and develop services and that we need to do this at pace.

Contracts within the Bristol area have been extended until September 2021, the maximum extension that is permitted under the contract terms. With this in mind, it was the opportune time to move towards further scoping of the options for adult mental health services to work towards a consistent approach across BNSSG.

The review has enabled the CCG to fully understand the existing services in greater detail in order to take decisions around the future direction of travel. It has included:

- An overarching assessment of the current performance and outcomes of all adult mental health contracts across BNSSG including both those formerly market tested under the 'Bristol Mental health' commissioning exercise and statutory and voluntary sector services which have never been market tested.
- Identify where there are gaps in knowledge and understanding of services.
- Begin to think about next steps for adult mental health contracts

NHS Long Term Plan

Mental Health is at the forefront of the Long Term Plan, of which there are a number of outcomes that BNSSG will be required to achieve over the next 5 years. The following sets out the national requirements, many of which we have already made strides to deliver.

The national outcomes for the Mental Health Long Term Plan can be grouped into 7 themes, as described below.

For people requiring perinatal mental health care to have:

- improved access to evidence-based care for women with moderate to severe perinatal mental health difficulties and a personality disorder diagnosis, provided by specialist perinatal mental health services, from preconception to 24 months after birth
- expanded access to evidence-based psychological therapies within specialist perinatal mental health services so that they also include parent-infant, couple, coparenting and family interventions
- for fathers/partners of women accessing specialist perinatal mental health services, an offer of an assessment of their mental health and where required signpost to other services
- an offer of evidenced based maternity outreach clinics that provide combine maternity, reproductive health and psychological therapy for women experiencing mental health difficulties.
- o increased access to evidence-based psychological support and therapy, including digital options, in a maternity setting.

For children and young people requiring mental have support to have improved:

o access to community based mental health services

- o access to services more quickly for eating disorders
- access to services when they are in crisis with 100% coverage of 24/7 crisis provision for CYP which combines crisis assessment, brief response and intensive home treatment functions
- o support in schools and colleges via Mental Health Support Teams
- o support during transition.

For people with a "common disorder":

o to be able to access IAPT, which includes a focus on long term conditions.

For people with severe mental health problems:

 to be supported by new and integrated models of primary and community mental health care.

For people who require "emergency support" to be able to:

- o access crisis services, with a 24 hour community response available
- o have 24/7 access to Mental Health liaison in hospitals
- o be able to access support with a single point of access via 111
- o have alternative support available when in crisis
- have access to a mental health professional working in the ambulance control centre to reduce inappropriate ambulance conveyance
- have the ability to access a Mental Health vehicle to reduce inappropriate ambulance conveyance.

For people who require Inpatient Care:

- o to be treated near home and not be placed out of area
- to have an improved therapeutic offer to improve patient outcomes and experience of inpatient care, and reduce average length of stay in all in adult acute inpatient mental health settings.

To ensure that as a system we focus on Suicide Prevention

o reducing the number of suicides and developing suicide bereavement support.

The STP are currently working to deliver a submission to NHS England, outlining how they plan to address all the elements of the Long Term Plan (Mental and Physical Healthcare). This submission is due in late November, with a workshop planned for all partners and members of the Public on 17th October, to discuss the priorities and the plans.

Newly Commissioned Services

Alongside the Strategic work, BNSSG CCG has tendered 3 services in the past 12 months.

Improving Access to Psychological Therapies (IAPT)

Mobilisation update

As JHSOC will be aware, the CCG tendered the three IAPT contracts that were in existence and specified one new service. The tender was won by Vita Health in partnership with Bluebell Care Trust and Windmill Hill City Farm. An accelerated mobilisation period took place, and the new Provider took over on 1st September 2019.

It cannot be underestimated how significant the task was to implement this service at pace, winding down 3 contracts and starting up a new one. This service already has nearly 5000 people who require treatment and there has been a huge volume of calls coming in with queries and referrals. The CCG are working with Vita on a daily basis to address any issues as they arise, as it is inevitable with a change of this magnitude that there will be some initial concerns. Embedding any new service is always a challenge, when people have been used to working with a certain Provider in a certain way and it is common in transition to have a higher than average number of queries and concerns raised during this phase- the CCG will be closely monitoring this and working with Vita Health to deliver the excellent service that has been commissioned.

An update on mobilisation and implementation, that was discussed at the project group, which meets fortnightly, is summarised below.

Workforce

The Workforce work-stream was focused on two key points: ensuring a smooth transition for staff between providers for the individuals being TUPED across to Vita and monitoring staff that left or were placed in a different role within Avon and Wiltshire Mental Health Partnership Trust. There were a number of specific actions relating to staff and trade union consultation, policies, procedures, pensions and educational training which Vita/AWP and BNSSG CCG were actively involved in. There were a number of last minute changes to the number of people who were TUPEing and there is now an active recruitment process underway.

Estates

The Estates work-stream was focused on ensuring the Estates Vita had identified as fit for purpose were handed over in co-operation with AWP. Those estates that Vita had chosen not to use were included within AWP decommissioning plan. There was a delay in getting the estates confirmed, however, the estates were confirmed in the 2/3rd week of august 2019. The three main hubs have been confirmed as Newminster (for Bristol), Coast Resource Centre (For North Somerset) and Station Road, Yate (For South Gloucestershire). Alongside the three main hubs, there are a number of additional estates across the BNSSG area which will be used for therapy.

Finances

The finance work-stream was focused on two priorities: ensuring a smooth transition between the providers and proactively managing any potential financial issues. First, in June, a joint meeting between AWP, Vita and BNSSG CCG took place to review a number of potential actions related to the transition of services. It quickly became apparent that with the nature of the transition, there was limited engagement required, since none of the assets, liabilities or obligations were transferring between providers. Second, Vita was asked to provide regular financial forecast during the mobilisation to highlight any potential future financial issues. All financial performance

reporting mechanisms used during the mobilisation phase will continue to be applied as part of an ongoing contract monitoring

Operation Governance

The Operation Governance work-stream focused on providing BNSSG CCG with the assurance that Vita had appropriate Governance and constitution arrangements in place for go live on the 1st of September. This included reviewing and gaining assurance that Vita had clear information governance processes in place. There are no outstanding actions or risks in relation to the operational governance.

Data Protection

The Data protection work-stream focused on ensuring Vita were GDPR compliant and followed data protection guidelines appropriately. The review of the data protection was overseen by the Information Governance Manager with the CSU.

Under GDPR guidance, all service users on the waiting list were contacted by AWP advising their data would be transferred on the 1st of September unless they advise otherwise. Service users were contacted by letter and phone. This did see a number of individuals dropping out of accessing the service – this could be a for a number of reasons including people no longer needing help, or having sourced help from elsewhere. There are no outstanding actions or risks in relation to the operational governance.

Freedom of information

Vita are not subject to freedom of information requests and therefore any requests will be processed by BNSSG with ongoing support.

Information, Communication and Technology (I.C.T)

The I.C.T work-stream focused on ensuring Vita had secure email addresses and the appropriate technology in place for when the service went live on the 1st of September 2019. Despite the short time frame for the mobilisation, Vita worked through the I.C.T challenges at pace ensuring there would be no issues for go live. All of the estates were confirmed to have the right internet connection bar 1. As a result of delay in getting the estate defined and agreed there was a risk that the necessary data links from the sites to Vita infrastructure would not be in place before Service start and this would result in degradation to the Service. Vita developed a work round for the one estate where it had not been possible to make the internet connection. All telephony systems were in place and running from the 1st of September 2019.

Contracts

The Contracts work-stream focused on ensuring all contracts were in place. BNSSG CCG and Vita formally signed the contract on the 12th of July 2019. Vita have decided to subcontract Bluebell and Windmill City Farm, both of whom formally signed off contracts with Vita by the 31st August 2019.

Sexual Violence Therapies Service

This service was one that had been previously commissioned by NHS England and was passed to BNSSG CCG in April 2019. The CCG's approach to developing the new service was to work

collaboratively with NHS England, Avon and Somerset Police and Crime Commissioner and B&NES and Somerset CCGs, to agree the service specification and model of care. In the absence of any national guidance on the detail of the service and in the absence of any significant concerns with the existing service, the approach was to mirror current service provision, with some minor changes, to support best practice.

The service is all-age and is to support survivors of rape and serious sexual assault and is available to all genders. The service provides therapeutic interventions and counselling to:

- Adults (aged 18years +) who have experienced rape and serious sexual assault within the last 12 months (The CCG commissions a separate service for victims of historic abuse).
- Children regardless of when the assault or abuse took place

The service offers a comprehensive assessment to ensure that people are referred into the most appropriate model of intervention and support. Where indicated in the assessment, this includes support for families and friends of the survivor.

The successful bidder was Somerset and Avon Rape and Sexual Abuse Support (SARSAS) working as a consortium in association with Womankind and The Green House. The contract commenced on 1st June 2019, for 3 years.

North Somerset Crisis and Recovery Centre

The idea for a North Somerset Crisis and Recovery Centre came out of initial scooping of the Healthy Weston model at the start of 2018. During public engagement and co-design workshops, discussions specifically focussed around a 'crisis café' style model which would allow people access to out of hours mental health support. The model is also referenced in the NHS Long Term Plan as an appropriate model of care for vulnerable people which CCGs are expected to commission as part of their crisis offer. The service specification was co-produced with AWP, Lived Experience Representatives, SWASFT, GPs and voluntary sector providers during winter 2018/19.

There are two key purposes; to provide a safe, welcoming and comfortable place for people in immediate acute emotional distress and for those seeking to prevent the onset of a crisis, and to work with the individuals to create plans and strategies for managing their mental health and wellbeing and preventing future crisis. The service will have a very close working relationship with the local AWP Intensive Support Crisis Team and blue light services.

The CCG was very pleased to announce last month that local mental health charity Second Step, is the preferred bidder for the new service. We are currently working through the due diligence process and the contract is due to be signed. The new service will commence late Spring 2020.

Next Steps

As a system we are now working through the prioritisation of mental health pathways to establish the order in which workstreams should be addressed. This will enable the work that is taking place within the Strategy, the Review and the Long Term Plan to converge with an agreed set of priorities, and associated timelines to be finalised.

The work on the crisis pathway, which is a key area of focus has already commenced. The first of three workshops has been held with partners from across BNSSG, to understand what the future offer is for people in a mental health crisis. The next workshop is in plan for November and a blue print for the crisis offer is being developed.

When priorities have been agreed, work will continue at pace to deliver the agreed outcomes.

Conclusion

As described above there is a significant amount of work underway to address the variation and challenges that currently exist with mental health services across BNSSG. As a system we will continue to focus on these to deliver the best possible care for our population and further updates can be provided to JHOSC as appropriate.