

Briefing on Adult Mental Health Support Pilot.



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Mental Health: Context

- One in four adults and one in 10 children experience mental illness, and many more of us know and care for people who do. People with severe and prolonged mental illness are at risk of dying on average 15 to 20 years earlier than other people
- For people being supported by secondary mental health services, there is a 65 per cent employment gap compared with the general population
- Common mental health problems are over twice as high among people who are homeless compared with the general population, and psychosis is up to 15 times as high.
- The cost to the economy is estimated at £105 billion a year – roughly the cost of the entire NHS

(NHS England)



Service Model

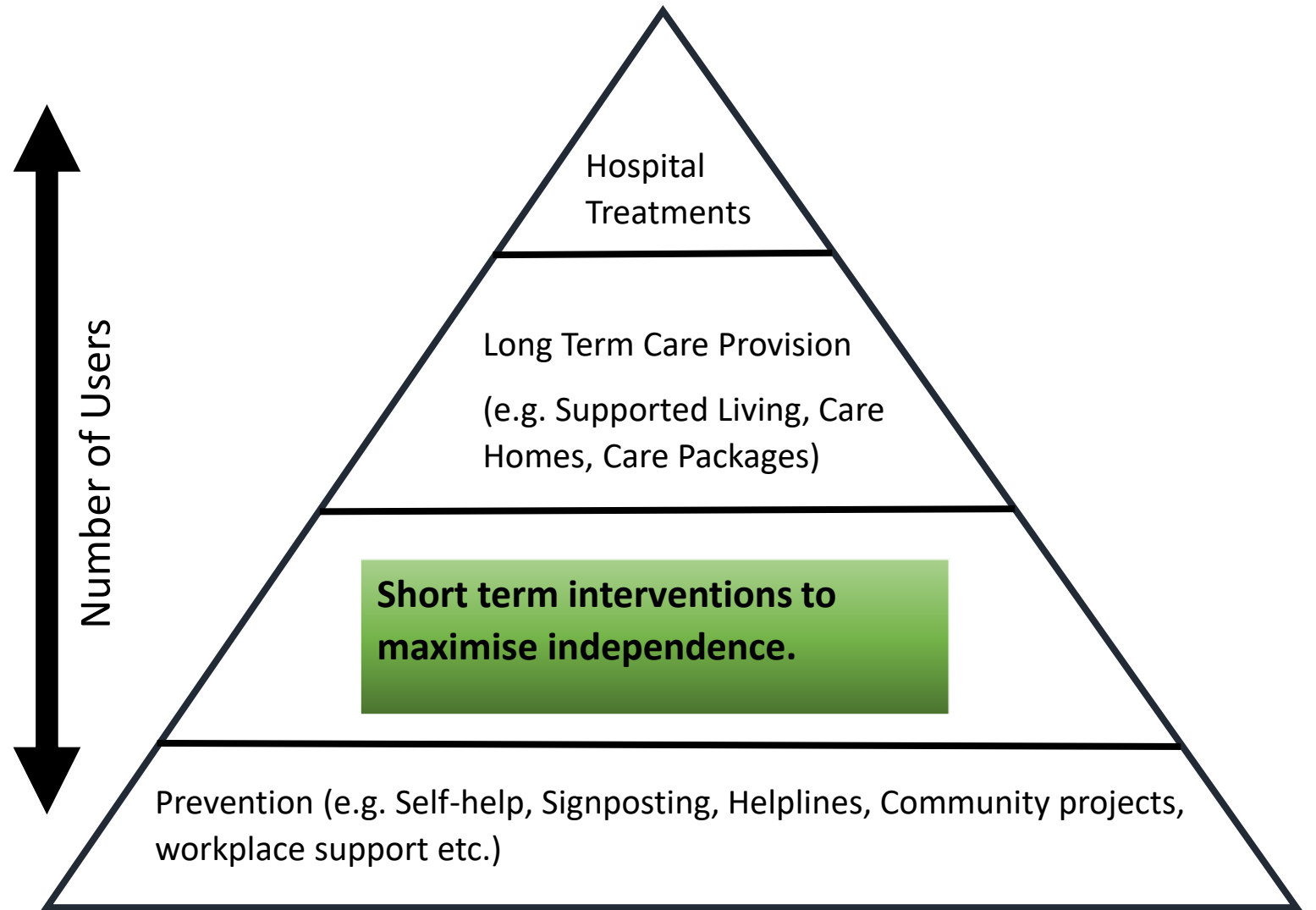
We want to deliver services in a 'recovery' model of mental health, which means in broad terms:

- **Maximising peoples independence because our mental wellbeing comes from achievement not reliance**
- **Focus on the strengths, not the deficits (strengths based model)**
- **Positive Risk Taking**

Everyone is different and people will require different care at different times and for different durations ; and so we need a mixed marketplace.

Service Model: 'pyramid of services'

- Short Term 'crisis responses' drive the model upwards.
- Long term investment (often years in advance) drives it down.



Focus on: Short term interventions to maximise intervention

People of working age with first or low level presentations to secondary mental health services tend to present with social care issues around:

- **Housing stability (maintaining tenancies)**
- **Activities of daily living (Household and financial management)**
- **Social connectivity and access to community facilities**
- **Employment support (accessing and maintaining)**

Required intervention is for small care plans (around 4 hours a week) for periods around 3 months – The current care market as it stands may not pick those packages up as they are not attractive; and there is not always the skilled staff.

Focus on: Short term interventions to maximise intervention

If we are unable to deliver this type of support intervention we can:

- **'Over prescribe' the wrong sort or too much – pushing someone up the pyramid of services**
- **Create a dependency on services**
- **Inefficient use of resources**
- **Greater costs in longer term**

Proposal

2 staff members (Full time equivalent) JG6 grade for a 12 month pilot to be based in the Adult mental health teams to:

- Deliver structured short term interventions under the direction of professionals (social workers, Community Psychiatric nurses and clinicians)
- Work with approx. 50 to 60 users

Outcomes:

- Less use of commissioned care services
- Maintaining current or new housing provisions
- Higher user satisfaction

Recruitment to commence in March 2021 – Operational by June / July 2021

