



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	28 October 2020
<b>Report Title</b>	Transformation - Decisions Required: Action 15
<b>Report Number</b>	HSCP 20.051
<b>Lead Officer</b>	Sandra MacLeod, Chief Officer
<b>Report Author Details</b>	Kevin Dawson, Lead for MH/ LD/SMS services <a href="mailto:Kevin.dawson@nhs.scot">Kevin.dawson@nhs.scot</a> 07818076228
<b>Consultation Checklist Completed</b>	Yes
<b>Directions Required</b>	Yes
<b>Appendices</b>	<ol style="list-style-type: none"> <li>1. Locality First Contact Mental Health &amp; Wellbeing Project Business Case.</li> <li>2. Integrated Joint Board Direction</li> <li>3. Extract from Scottish Government Mental Health Strategy 2017-2027 – Action 15</li> </ol>

### 1. Purpose of the Report

- 1.1. This report seeks approval to agree financial expenditure to progress a Locality First Contact Mental Health & Wellbeing Project to deliver against the Aberdeen City Health & Social Care Partnership (ACHSCP) strategic aims and progress towards the Scottish Government Action 15 programme plan, previously approved by the Integrated Joint Board (IJB) on 28<sup>th</sup> August 2018.
- 1.2. This report requests approval from the IJB to incur expenditure, and for the Board to make Directions to Aberdeen City Council (ACC) as per Appendix 2.

### 2. Recommendations

- 2.1. It is recommended that the Integration Joint Board (IJB):
  - a) For the IJB to note the change to cancel the Mental Health & Wellbeing Out of Hours Hub business case previously approved by the IJB on the 19<sup>th</sup> September 2019.



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- b) Approve the expenditure, as set out in the Business Case at Appendix 1 relating to the Mental Health First Contact Support project which amalgamates & supersedes the Mental Health & Wellbeing Out of Hours project above.
- c) Instruct the Chief Officer, ACHSCP to make the direction relating to the Mental Health First Contact Support project as per Appendix 2 and issue to Aberdeen City Council.

### 3. Summary of Key Information

3.1 The Scottish Government's National Mental Health Strategy 2017-2027 [Link here to MH Strategy](#) sets out forty national actions under five headings:

1. Prevention and early intervention;
2. Access to treatment, and joined up accessible services;
3. The physical wellbeing of people with mental health problems;
4. Rights, information use, and planning;
5. Data and measurement.

3.2 Action 15 of the National Mental Health Strategy (Appendix 3) seeks to improve accessibility of services, entailing whole system change, specifically: "Increase the workforce to give access to dedicated mental health professionals to all A&Es, all GP practices, every police station custody suite, and to our prisons. Over the next five years increasing additional investment to £35 million for 800 additional mental health workers in those key settings."

3.3 AHSCP has a Community Mental Health Delivery Plan 'Promoting Good Mental Health' [Link to MH Delivery Plan](#) which sets out local objectives, which include: *developing support in the community which promotes independence and self-management; early intervention and support from people with "lived experience" of mental health issues and support for carers.* This plan was co-produced as part of a community engagement and consultation process and a specific action to explore the creation of community mental health and wellbeing workers was agreed. The proposal to have peer support within the project is a direct result of co-production with community members and service users.

3.4 Alongside these strategic actions, there is a wider Mental Health and Learning Disabilities review which is focussing on long term sustainability and transition to community based services.

3.5 The Scottish Government's Mental Health Transition and Recovery plan for Scotland builds upon positive changes during Covid19 including digital solutions and different ways of delivery services. Their key commitments include:



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- 1) Promoting and supporting conditions for good mental health & wellbeing at population level,
  - 2) Providing accessible signposting to help, advice and support;
  - 3) Providing a rapid and easily accessible response to those in distress.
- 3.6 In the community many people will face challenges to their mental health due to alcohol, drugs, deprivation, domestic abuse, family issues, suicide prevention etc. Most people experiencing poor mental health won't require clinical treatment, and the aim of this project is to ensure there is a low threshold direct access pathway for those individuals who are experiencing need around their mental health and wellbeing which may include aspects of distress. Local data indicates that there are significant numbers of people that do not require clinical or statutory services but do require support and signposting to assist them to manage their situation.
- 3.7 To ensure there has been appropriate alignment between the national direction and local priorities, an Action 15 partnership group with representation from Aberdeen City & Aberdeenshire HSCP Community Mental Health Services, Police, NHS Grampian (including A&E, Acute Mental Health, Primary Care) third sector providers has met and developed a business case to progress local objectives.
- 3.8 In September 2019 a business case for Action 15 was agreed by the IJB (The Mental Wellbeing Out of Hours Hub (Accident Emergency Department and Kittybrewster Custody Suite)). Due to COVID19 this business case has not progressed and we have identified new emergent needs as the landscape of attendances and footfall in current services has changed which has resulted in a re-examination of the original business case. This new business case will help support emergent Mental Health needs as a result of Covid19.
- 3.9 The outcome of this process is the development of a Locality First Contact Mental Health & Wellbeing project to work in the three City localities. The new business case retains out of hours support to Police Custody and A&E whilst responding to new emergent needs. The full business case is in Appendix 2: "Locality First Contact Mental Health and Wellbeing Project".
- 3.10 The business case has been driven by both qualitative and quantitative data, with analysis of information and audits from cross-system sources. ACVO and 3<sup>rd</sup> sector colleagues have worked jointly with the steering group to proactively examine gaps and opportunities as well as relevant engagement and consultation with service users and individuals who use services in order to deliver on this aim.



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### **A summary of the key points are below:**

- 3.11 The purpose of the project is to provide a “Direct Access First point of contact for Mental Health Services based within deprived areas of Aberdeen available 7 days per week with some additional out of hours support to Police Custody and A&E”. The service will operate on the principle of easy access and will focus on listening, immediate support and signposting. This will be provided by Mental Wellbeing Practitioners and paid peer support with lived experience.
- 3.12 As a low threshold service, this will be a gateway to more specialist Mental Health Services via their GP, if required. Whilst this is a 7 day service with some out of hours support, this is not an acute or emergency provision. To mitigate risk in emergency situations, out of hours decision support will be available and this is detailed in the business case.
- 3.13 The key differences between this model and other existing services include: 1) Direct Access – no requirement for people to see their GP in the first instance reducing barriers and instance access to support “ask once – Get help fast” 2) Community based services focussing on areas of deprivation 3) 7 day service provision 4) Integrated working to provide a wraparound seamless service – linking with drugs and alcohol and other commissioned services and new community based structures currently being developed by the Partnership to support the provision of wrap around services for Aberdeen residents.
- 3.14 The service will be procured through commissioned services and will provide 1 mental health & wellbeing practitioner and 2 peer support workers within each of the 3 localities (a total of 9 posts) for a period 4 years at a cost of circa £360k per annum. The total value of this contract over 4 years is £1.44m.
- 3.15 If the service proves to be effective long-term sustainability will be sought through service redesign.
- 3.16 The full revised business case for The Locality First Contact Mental Health & Wellbeing was agreed by the Executive Programme Board on 9<sup>th</sup> September 2020.
- 3.17 The Action 15 Group will have oversight of the programme management of this project, reviewing outcomes and performance monitoring on a quarterly basis. This will also feed into the Mental Health Partnership Group to report on our Delivery Plan Aims around prevention, self-management, recovery, dignity & rights and support for carers.
- 3.18 Specific ring-fenced funding is available for the implementation of the Action 15 Plan which increases on a 4-year profile to £1.2million per year from 2022/23. In
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In addition, the Psychological Therapies service is jointly funded with the Primary Care Improvement Fund as part of the delivery of the Primary Care Improvement Plan (PCIP).

### 4. Implications for IJB

- 4.1 **Equalities** - Inequality, mental health and human rights are inextricably linked. This proposal will ensure mental health services are accessible and meet the needs of all in compliance with Equality legislation. These plans will have a positive impact on the protected characteristics as protected by the Equality Act 2010.
- 4.2 **Fairer Scotland Duty** - Implementation of the recommendations, will have a neutral to positive impact on people affected by socio-economic disadvantage. These services will increase accessibility to mental health services in areas of deprivation.
- 4.3 **Financial** - Specific ring-fenced funding is available for the implementation of the Action 15 Plan. The recommendations in this report will result in financial expenditure from the Action 15 fund. Full details of the financial implications are contained in the associated business cases.
- 4.4 **Workforce** - Action 15 of the National Mental Health Strategy commits to providing an additional 800 Mental Health Workers in Scotland (Aberdeen City's share is approximately 36) over the next 5 years and this will result in the recruitment and development of supplementary staff, who will support local services. The workforce will be outcome focused and collaborative working in a multi-agency and collaborative manner. With the added difficulty in recruiting NHS clinical staff, we have sought to innovate and mitigate the risk by recruiting third sector and peer support.
- 4.5 **Legal** - There are no direct legal implications arising from the recommendations of this report. Commissioning and procurement of services will be progressed through ACC to comply with appropriate legislation.
- 4.6 **Covid-19** - Positive impact on Operation Home First; aim to reduce harm to vulnerable groups impacted as a result of COVID19.





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### 5. Links to ACHSCP Strategic Plan

#### 5.1 The proposed service links with

This report seeks to support both the ACHSCP Strategic Plan and the Community Mental Health Delivery Plan 'Promoting Good Mental Health' and support the most vulnerable people impacted by poor mental health through Prevention, Resilience and Connections.

The primary direct link is with the Prevention Aim and the commitment of addressing the factors that cause inequality in outcomes in and across our communities

### 6. Management of Risk

#### 6.1 Identified risks(s)

Implementation of any service requires consideration of cross-system impacts as well as any governance requirements. The specific projects included in this report aims to shift in the balance of care which requires to be carefully planned, implemented and evaluation to ensure continued stability of the system to meet needs. Implementation of these proposals will be underpinned by a risk management framework.

#### 6.2 Link to risks on strategic or operational risk register:

The main risk relates to not achieving the transformation that we aspire to, and therefore our ability to sustain the delivery of our statutory services within the funding available. The resultant risk is that the Integration Joint Board fails to deliver against the strategic plan.

Risk 2. There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and project an overspend

Risk 5. "There is a risk that the IJB, and the services that it directs and has operational oversight of, fail to meet performance standards or outcomes as set by regulatory bodies."

Risk 9. Failure to deliver transformation at a pace or scale required by the demographic and financial pressures in the system.





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### 6.3 How might the content of this report impact or mitigate these risks:

Risk 2 – ring fenced funding has been identified and committed for these purposes.

Risk 5 – the Action 15 funding is within a specific envelope which to deliver on the whole time equivalent (WTE) target would result in lower graded posts. The Steering Group agreed and have proposed projects which seek to address the needs of the city in an appropriate and proportioned manner. This was done in ensuring that all proposals are developed in consultation with partners, experts by experience and carers and that support the four key settings. All projects have been scrutinised to consider cross system links and best use of financial resource.

Risk 9 - With the added difficulty in recruiting NHS clinical staff, we have sought to innovate and mitigate the risk by recruiting third sector and peer support.

Approvals	
	Sandra Macleod (Chief Officer)
	Alex Stephen (Chief Finance Officer)



Aberdeen City Health & Social Care Partnership  
*A caring partnership*

## **INTEGRATION JOINT BOARD**

### **Appendix 1:**

See separate document.





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### Appendix 2:

#### INTEGRATION JOINT BOARD

#### DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

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The **ABERDEEN CITY COUNCIL** is hereby directed to deliver for the Board, the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the Board's Strategic Plan and existing operational arrangements pending future directions from the Board.

**Related Report Number:-** HSCP 20.051

**Approval from IJB received on:-** 28 October 2020

#### **Description of services/functions:-**

Procurement of Locality First Contact Mental Health & Wellbeing Project

Procurement of a Direct Access First point of contact for Mental Health Services based within deprived areas of Aberdeen City available 7 days per week with some additional out of hours support to Police Custody & A&E.

**Reference to the integration scheme:-** Annex 1 Part 2: Part 2:

16. Services providing primary medical services to patients during the out-of-hours.

20. Mental health services provided outwith a hospital.

#### **Link to strategic priorities (with reference to strategic plan and commissioning plan):-**

The provision of this hub fits with all 5 strategic aims for ACHSCP: prevention; resilience; enabling; connections; and communities. In particular it looks to have early intervention and prevention for those in requiring mental health support 7 days a week within their own community.

#### **Timescales involved:-**

Start date:- 28.10.20

End date:- January 2024 (dependent on successful tender and recruitment)

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### Associated Budget:-

The project proposal is based on a four year contract

### Table: Costings for the Community Mental Health & Wellbeing Project Business Case

(£)	Year 1	Year 2	Year 3	Year 4	Total
<b>Total</b>	<b>360,910</b>	<b>360,288</b>	<b>367,228</b>	<b>374,307</b>	<b>1,462,733</b>

*\*Estimate as will be dependent on contract value.* Details of funding source:- Scottish Government Action 15 Funding

Availability: - Confirmed



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### Appendix 3:

### Extract: Mental Health Strategy 2017 – 2027 – ACTION 15

#### Access to treatment and joined-up accessible services

##### Ambitions:

- **Access to the most effective and safe care and treatment for mental health problems should be available across Scotland, meeting the same level of ambition as for physical health problems.**
- **Safe and effective treatment that follows clinical guidelines.**
- **Safe and effective treatment accessed in a timely way.**
- **Services that promote and support recovery-based approaches.**
- **Multi-disciplinary teams in primary care to ensure every GP practice has staff who can support and treat patients with mental health issues.**
- **Appropriate mental health professionals are accessible in Emergency Departments and through other out-of-hours crisis services.**

Access to services for mental health problems within a clinically appropriate timescale is a basic issue of health equality. There must be access to high quality, specialist mental health care for those who have higher levels of need, as well as general health care which can deal with an issue there and then for people with a mental health problem. General health care must also address the conditions that can contribute to people becoming unwell, with the ultimate aim of reducing the need for specialist services.

##### Workforce

One of the keys to ensuring that the principle of 'ask once, get help fast' is met is ensuring the right workforce is in place. We will be working at a local and national level, through Community Planning Partnerships, Integration Authorities, NHS Boards, training bodies, and local and national government. As well as increasing the supply of the mental health workforce with different skill mixes across different services, we need to make careers in mental health more attractive with clear career pathways.

- ❖ **Action 15: Increase the workforce** to give access to dedicated mental health professionals to all A&Es, all GP practices, every police station custody suite, and to our prisons. Over the next five years **increasing additional investment** to £35 million for 800 additional mental health workers in those key settings.