

Date of Meeting	December 2020				
Report Title	Transformation - Decisions Required: Action 15				
Report Number	HSCP 20.050				
Lead Officer	Sandra MacLeod, Chief Officer				
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Consultation Checklist Completed	Yes				
Directions Required	Yes				
Appendices	Appendix 1 - Her Majesty's Prison (HMP) & Young Offenders Institute (YOI) Grampian – Joint City/Shire Prison-wide Mental Health project Appendix 2 – Direction Appendix 3 – Aberdeen City Health & Social Care Partnership Action 15 Committed Funds.				

### 1. Purpose of the Report

- 1.1. This report seeks approval to agree financial expenditure to progress projects to deliver against the ACHSCP strategic aims and progress towards the Scottish Government Action 15 programme plan, previously approved by the 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 a Direction to NHS Grampian.

#### 2. Recommendations

- 2.1. It is recommended that the Integration Joint Board (IJB):
  - a) Approve the preferred option 2, as set out in Appendix 1, relating to the HMP&YOI Grampian Joint City/Shire Prison-wide Mental Health service project.
  - b) Instruct the Chief Officer of Aberdeen City Health & Social Care Partnership to work with the chief officer of Aberdeenshire Health &





Social Care Partnership to implement the project as set out in the report.

c) Instruct the Chief Officer to make the Direction relating to HMP & YOI Grampian Joint City/Shire Prison-wide Mental Health Project as per Appendix 2 and issue to NHS Grampian.

## 3. Summary of Key Information

- 3.1 The Scottish Government's National Mental Health Strategy 2017-2027 <u>Link</u> 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 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 Aberdeen Health and Social Care Partnership 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.
- 3.4 Alongside these strategic actions, there has also been a wider Mental Health and Learning Disabilities review which has focussed 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 Covid 19 including digital solutions and different ways of delivery services. The key commitments include: 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 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.

- 3.7 This proposal seeks to deliver a tiered approach to support people in custody within HMP&YOI Grampian to improve mental wellbeing recognising characteristics such as (trauma history, cognitive impairment, impact of substance misuse, socio-economic determinants) by providing a holistic and targeted service. This proposal will provide lower tier support as an alternative to the medicalisation of expressed need such as anxiety, depression and wellbeing issues faced by the identified population.
- 3.8 Action 15 funding will provide 1 whole time equivalent Mental Health Support worker and 0.6 whole time equivalent Occupational Therapist (OT) to be employed by NHS Grampian. These posts will support functional improvement so that people are better able to engage with opportunities for recovery and progression within the prison. This in turn will contribute to improved longer term and sustained outcomes in the transition out of prison and into communities. This business case will help support emergent mental health needs as a result of Covid19.
- 3.9 Aberdeenshire Health and Social Care Partnership (HSCP) have lead responsibility for the health and wellbeing of the population of HMP&YOI Grampian. This project has been developed in partnership with colleagues from Aberdeenshire HSCP. Aberdeenshire HSCP will take the lead role for the project in terms of recruitment, performance and outcomes. This proposal seeks agreement from Aberdeen City IJB to invest finance in the City share of costs.
- 3.10 The proportion of costs including the Aberdeen City population of Aberdeen accommodated with HMP&YOI Grampian is 65% at any given time. This is reflected in proportionate ratio of costs allocated to each partner in the proposal. The total cost of this will be £194,786 over four years.
- 3.11 The proposal seeks to embed this permanent recurring resource within existing structures as a supporting role to the extant psychology and wider prison healthcare team augmenting capacity and ensuring a seamless service.
- 3.12 Recruitment at the prison can be an ongoing challenge due to the specific nature of the environment and demands on workers. With the growing evidence base of the effectiveness of OT Provision and consistent numbers of individuals available and keen to take up the role of Assistant Psychologist, recruiting to both posts is not forseen to be problematic
- 3.13 Feedback from service users and stakeholders will be sought as part of the project evaluation going forward at 6 month intervals.
- 3.14 This project will be jointly accountable to both the Aberdeen City & Aberdeenshire's Health and Social Care Partnerships. It will be reported for







ACHSCP via the Action 15 Steering Group and ultimately the Executive Programme Board and IJB. This project has been led by Aberdeenshire HSCP (AHSCP) because the delivery of health services within HMP&YOI Grampian are hosted by Aberdeenshire Health and Social Care Partnership.

- 3.15 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 annum from 2022/23. 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).
- 3.16 Following presentation of this business case at the Integrated Joint Board on 28<sup>th</sup> October 2020, clarification was sought regarding the scoring of the business case and the reasoning for choosing option 2 over option 3 which would deliver a more comprehensive model for delivery of mental health care that would meet the very specialist needs of a prison population. Option 3 is, however, not at the present time recommended to the IJB; this is due to services not having the necessary financials within the allocation of Action 15 budget to fund the posts on a recurring basis. It is, however, hoped that it might be possible to secure temporary funding to trial and evaluate some elements of the option 3 model through slippage monies. For example, it would be possible to recruit to an Assistant Psychology post on a temporary basis with the focus of the post specifically upon the screening, liaison and delivery of low intensity intervention for the older adults and individuals with a brain injury. This would provide the essential evaluation evidence to consider future and recurring investment through other funding streams.

### 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.

Under prison health care arrangements, prisoners are entitled to equivalent access to the same quality and range of health care services as the general population, and they have the same rights in relation to mental health care as other patients (The Mental Health (Care & Treatment) (Scotland) 2003 Act; The Equality Act, 2010). Aberdeen City Residents have access to clinical psychology within the community.

#### 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 / populations of deprivation / disadvantage

#### 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 set out in the business case (appendix 1) and an Action 15 commitments for Aberdeen City Health & Social Care Partnership are outlined in Appendix 3.

#### 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. Services will be re-designed in future to ensure that these posts can be recruited to permanently.

## 4.5 Legal

There are no direct legal implications arising from the recommendations of this report.

#### 4.6 Covid-19

Positive impact on Operation Home First; aim to reduce harm to vulnerable groups impacted as a result of COVID19.

### 5. Links to ACHSCP Strategic Plan

5.1 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

### 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 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 - Staff recruitment for the prison is an ongoing challenge, psychologists who would fit the requirements of this role and who need this type of experience are abundant within the wider health sector







Approvals						
\ ICM V J IC\ \ / I I/J/ I / I/C\ / I	Sandra Macleod (Chief Officer)					
	Alex Stephen (Chief Finance Officer)					





Appendix 1

See separate Business Case attached.

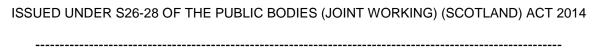




Appendix 2

#### INTEGRATION JOINT BOARD

#### DIRECTION



**NHS Grampian** 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: - Transformation - Decisions Required: Action 15: HSCP 20.050

Approval from IJB received on:- 28th October 2020

Description of services/functions:-

1. Provision of Mental Health support within HMP&YOI Grampian as described in the report.

Provision of a tiered approach to support people in custody to support and improve mental wellbeing within HMP&YOI Grampian complementing existing service provision (0.6wte OT and 1wte x Mental Wellbeing Worker).

Reference to the integration scheme: - Annex 1

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):-

This provision links to 3 strategic aims for ACHSCP: prevention; resilience; enabling.

#### Timescales involved:-

Start date:- 29.10.2020 (recruitment process begins). Posts to be in place January 2021. End date:- recurring (dependent on successful recruitment)







# **INTEGRATION JOINT BOARD**

#### **Associated Costs**

(£)	Year 1	Year 2	Year 3	Year 4	Total
City Contribution	46,908	48,081	49,282	50,515	194,786
Shire Contribution (Agreed)	25,253	25,890	26,537	27,200	104,885
Total	72,166	73,970	75,819	77,715	299,670

£194,786

Details of funding source:- Scottish Government Action 15 Funding

Availability:- Confirmed



Grampian





# **INTEGRATION JOINT BOARD**

## **Appendix 3**

# **ACTION 15 – Aberdeen City HSCP – Committed Funding**

Committed Funding	WTE	2020/21 £k	2021/22 £k	2022/23 £k	2023/24 £k
Primary Care Psychological Therapy Service	12.17	544	600	604	608
Beating the Blues	1.0	31	32	33	34
Community Listening Service (Currently 0.5wte increasing to 1.0wte in 2021/22)	1.0	31	55	57	59
Psychological Wellbeing Practitioners (Currently progressing through Commissioning process)	4.0	84	170	174	177
Mental Health & Wellbeing Practitioners & Peer Support Project (Currently progressing through Commissioning process)	9.0	60	361	367	375
Aberdeen City Contribution to HMP Grampian Prison Service Proposal (with IJB for consideration)	1.0	48	49	50	51
TOTAL	28.17	£798k	£1.26m	£1.28m	£1.31m



