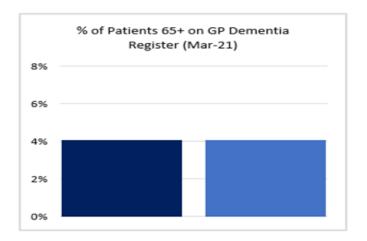
Adult Mental Health Transformation

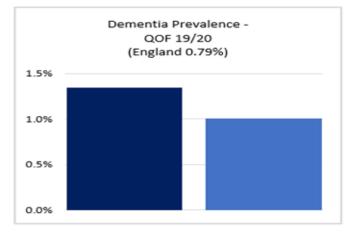
Eugene Staunton, Deputy Director of Mental Health and Learning Disability Transformation (NEE CCG)

Emma Strivens, Deputy Director of Mental Health (EPUT)

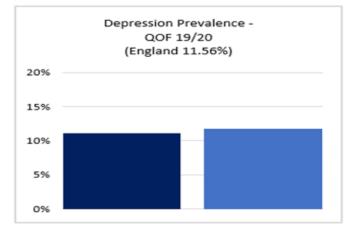
Mental Health Needs Overview

A mental health prevalence and activity mapping exercise was undertaken pre Covid at a GP Practice level to understand the areas of focus by neighbourhoods. The below is a snap shot of the Tendring GP Practices combined to give a Tendring vs North East Essex view. As we come out of the pandemic, this data in the process of an update and will inform locality requirements and future transformation.

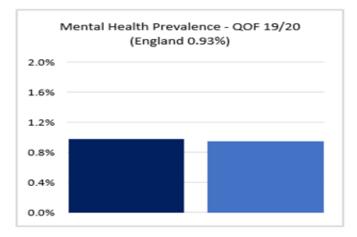


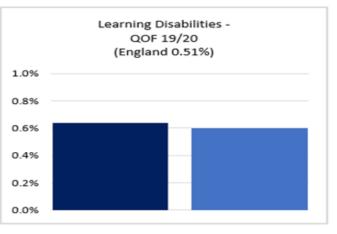


% of Patients on SMI Register (Mar-20) 2.0% 1.5% 0.5%

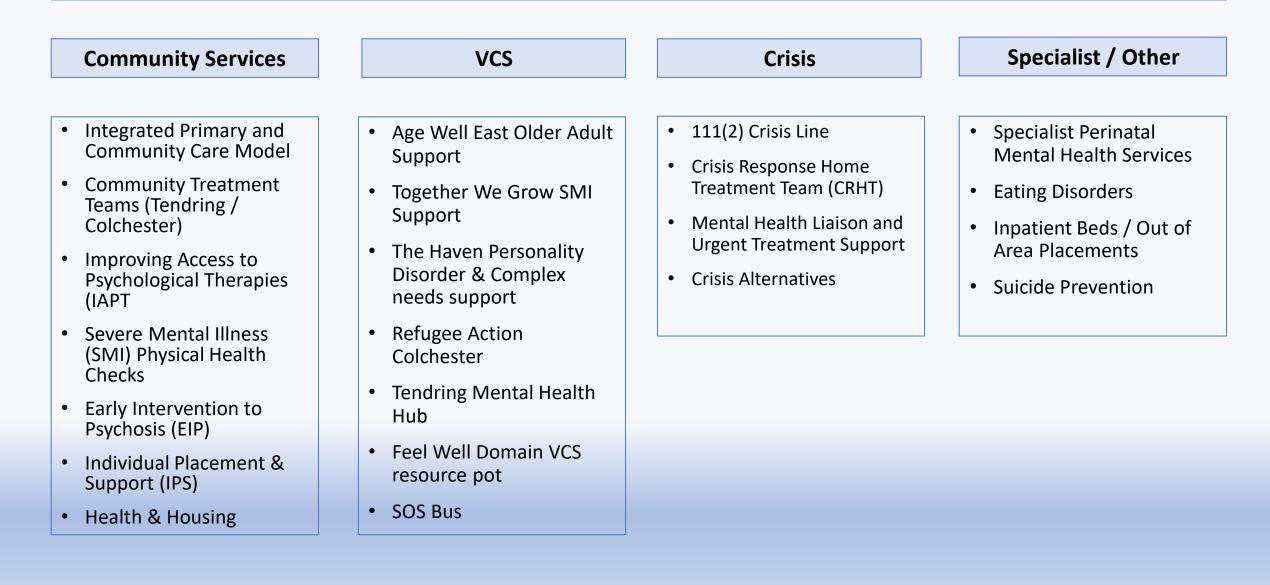


Prevalence rates Tendring North East Essex CCG





Mental Health Transformation Programme



Community Mental Health Provision

Within north east Essex there are a number of mental health community service provisions which cover both Colchester and Tendring Districts.

Below shows a snap shot of the recent activity flowing through the Single Points of Access (SPA) by district:

	Jul-21		Aug-21		Sep-21		Oct-21	
	Referrals	Caseload	Referrals	Caseload	Referrals	Caseload	Referrals	Caseload
Mental Health SPA Colchester	409	46	289	69	280	81	232	128
Mental Health SPA Tendring	179	23	154	31	139	39	184	47

Alongside the secondary care community SPA, there is also the Improving Access to Psychological Therapies Service (IAPT)

	Jul-21	Aug-21	Sep-21	Oct-21	
	Referrals	Referrals	Referrals	Referrals	
Mental Health IAPT Colchester	145	173	207	133	
Mental Health IAPT Tendring	186	178	234	153	

Both IAPT and wider community transformation initiatives have been underway to support increasing demand and to improve quality of service provision to meet local population needs across both Tendring and Colchester flexed to address locality demands as appropriate:

- Integrated Mental Health Primary & Community Care Model of Care This commences the integration of the mental health workforce within primary care
 environments with a proposed additional 30 new whole time equivalent mental health personnel deployed across Primary Care Networks (PCN) between 2021/22
 and 2023/24. That's 3 per PCN in addition to further resource within the community and treatment teams such as a mental health pharmacist and peer support
 workers.
- Improving Access to Psychological Therapies (IAPT) Essex Partnership University Trust assumed the service from the 1st April2021 which included increasing the
 access from 25% of the prevalence of those with common mental health problems to in excess of 30% entering the service and starting treatment, inclusive of the
 requirement to derive Long Term Condition and Older Adult pathways all of which are in development.
- Early Intervention to Psychosis Multi-disciplinary teams set up to seek, identify and reduce treatment delays at the onset of psychosis and promote recovery by
 reducing the probability of relapse following a first episode of psychosis. Based in Reunion House the service has recently received additional investment to
 expand, improve service quality and deliver an At Risk Mental State service linked to wider community service delivery such as IAPT
- Severe Mental Illness Physical Health Checks Evidence shows that people with SMI die up to twenty years younger than the average population and across Colchester and Tendring there is a locality programme of work underway led by GP Primary Choice and supported by EPUT to enhance the provision of health checks with the objective of 60% of all those on registers receiving one by March 2022.
- Individual Placement & Support Essex wide employment support service integrated within community mental health teams for people who experience severe
 mental health conditions. An evidence-based programme that aims to help people find and retain employment which has recently been expanded to widen access
 but also better integrate with community pathways and work closer with other agencies such as the Department of Work and Pensions.

Voluntary Community Sector

As part of the NHS Long Term Plan there is a strong theme throughout on the role of the Voluntary Community Sector (VCS) in partnership with the health and care sector. This has been recognised as a key component within the mental health transformation programme with a number of programmes of work underway which also build on the Covid response and recovery initiatives given identified increased complexities and support needs in the system.

Age Well East – Older adult mental health support

Service provision with the objective of:

- linking with statutory services and wider VCS's to support the reduction of social isolation and;
- reinvigorate community activities ;
- reducing crisis situations arising;
- reducing inequalities to service access

Refugee Action Colchester

Service provision with the objective of:

- providing two case workers to support over 400 extremely vulnerable individuals, carers and families with:
- o support Of The Resettlement Scheme
- survivors of Torture and/or Violence
- o legal and or physical protection needs
- Family reunification

Community Voluntary Services Tendring

 Pick up and post discharge support for all admissions to mental health wards (bar dementia) offering discharge package of basic food items, transport and follow up for first 48 hours linking to crisis café and 111

Tendring Mental Health Hub

Service provision with the objective of:

- Non stigmatised walk in support for those struggling with mental health conditions to address the causes of anxiety, depressions etc
- Volunteer programme to aid the rehabilitation and recovery of those with mental health conditions

The Haven Personality Disorder & Complex needs support

- Complex case discharge transition support from inpatient admission
- Pre- and post-discharge support for patients identified as having traits of Emotionally Unstable Personality Disorder (EUPD) and additional complex care needs

Feel Well Domain VCS

A resource allocation has been provided to the Feel Well Domain to work in co-production with Tendring & Colchester VCS organisations to derive initiatives aligned to supporting the Feel Well indicators and outcomes.

Mental Health Crisis Care Provision

Police / Ambulance / Self Referral / Street Triage / VCS

CORE 24 Mental Health Liaison

Provide mental health assessment and treatment for people who are inpatients in general hospitals or for those who may go to an A&E department and are in need of a mental health assessment

Across the 2020 the service was enhanced to achieve CORE 24 standards:

- Emergency Dept Access to MH Liaison Service within 1 hour of referral
- Inpatient Access to MH Liaison Service within 24 hours of referral
- Support the Urgent Treatment Centres in both sites.

Crisis 111 (2), Tele Triage, Mental Health Outreach Care

In a mental health emergency you can contact your local crisis service via 111 and pressing option 2 whereby access to a mental health professional will allow telephone triage, telephone coaching and where required the mental health outreach care responding as part of the Crisis Response Home Treatment Team.

This service delivery was accelerated due to Covid to ensure crisis service support and commenced 1st April 2020

Crisis Alternatives

In both Clacton and Colchester there are Crisis Cafes which operate 7 days a week (excluding B/H) operating between 4pm and 10pm offering a space where people experiencing emotional distress or a mental health crisis, can receive care & support outside of normal working hours

Between April 2021 and September 2021 Clacton has had 216 referrals and Colchester has had 289 with The Haven providing post follow up resilience groups in the locality each week from 03 August to 05 October with over 150 attendances (these may be the same person over a number of weeks)

Specialist / Other provision

Specialist Perinatal Mental Health Services

Perinatal Mental Health service were derived in 2018 with service provision to provide assessment and treatment for women who are experiencing or are at an increased chance of experiencing a severe mental health condition during pregnancy.

In the last 18 months, the locality has agreed to expanding the service from 3.5% of the prevalence rates of moderate/severe mental health conditions in the perinatal period to 10% inclusive of expanding the duration of care and expanding service support.

At present, the locality is in the scoping phase of deriving Maternity Mental Health Services which support those include those who experience posttraumatic stress disorder following birth trauma, perinatal loss or severe fear of childbirth (tokophobia)

Inpatient and Out of Area Placements

Within the inpatient environment of EPUT of which Landermere in Clacton is one site, there is work underway to improve the therapeutic delivery of services both environmentally and psychologically with further investment into the psychology pathways, discharge support and community recovery services linking in with the VCS as needed.

Furthermore there is an ambition to ensure no out of area placements take place in the local system come March 2022 with people requiring an inpatient placement kept within the locality and supported back into the community at the right time.

Eating Disorders

In line with the NHS Long Term Plan and Community Mental Health Transformation programme of work, dedicated funding has been identified in order to expand the existing specialist Adult Eating Disorder Service within EPUT, as well as broadening out the offer to include VCSE support and early interventions. Due to the impact of COVID-19, there has been a significant increase in referrals to the service and as such, service users are waiting longer to be assessed and receive treatment.

A pan-Essex approach is currently being considered, and following a deep dive session in early November it is intended that North East Essex and West Essex will align and jointly produce a business case to determine the additional resource required in order to deliver the national priorities, i.e. Medical Monitoring, FREED and Marsipan.

Suicide Prevention

- Tendring CVS lead on the work of Suicide Prevention in North East Essex.
- Essex Association of local councils were grant makers, initially supporting 18 projects with £115,560 worth of funding over the past three years, this role was then delivered by CSV Tendring
- CSV Tendring delivered the role of grant maker after year 1 and have been administering the fund for the past two years. CVS Tendring grant monitor and support projects to develop further such as Carer's First - a new men's support group; Summit - developing a toolbox to support people who have attempted suicide or have been bereaved by suicide
- There are 12 projects live and further projects are bidding for new funding for the next 12 months including Together we Grow working with LGBTQX community; Motivated Minds to deliver training in Colchester and Clacton

Areas to address and innovation

What we are trying to address?

- Access to Specialist Community Mental Health in a timely manner.
- Long psychology waiting lists, for SMI Psychological Therapies and psychologically informed interventions.
- High demand for Complex Trauma and Emotionally Unstable personality Disorder
- Increase in demand for First Episode in Psychosis.
- Dependence on crisis services.
- Increased access to support for mental ill health in primary care.
- Reduction in case load sizes per WTE to 30.
- Better access and information on crisis provision for both public and other agencies
- Covid recovery both staffing impacts and additional complex presentations.

What are our innovations?

- Disaggregation of "Journeys" teams to place based teams.
- Consultant Psychiatrist allocated to each Neighbourhood.
- Routine 28 day referrals allocated within place based teams.
- Single point of access in progress, including Dementia, IAPT and Specialist Mental Health September 2021.
- ARRS funding agreed for all PCN's, work shops with all PCN's to consider "what does good look like"
- 2022/23 money brought forward for additional primary care posts.
- Complex trauma pathway to join HIUG September 2021. Structured Clinical Management training planned for all teams.
- Additional sessions agreed to support psychologically informed waiting list – trajectory planning.
- Colchester and Tendring Crisis Café.
- Temporary Flow and Capacity Lead in Specialist Community Team.
- Review of CCG and EPUT digital platforms and closer working with the Police, Ambulance and other agencies.

Children and young people's mental health

Tina Russell, Head of Children's Services EWMHS

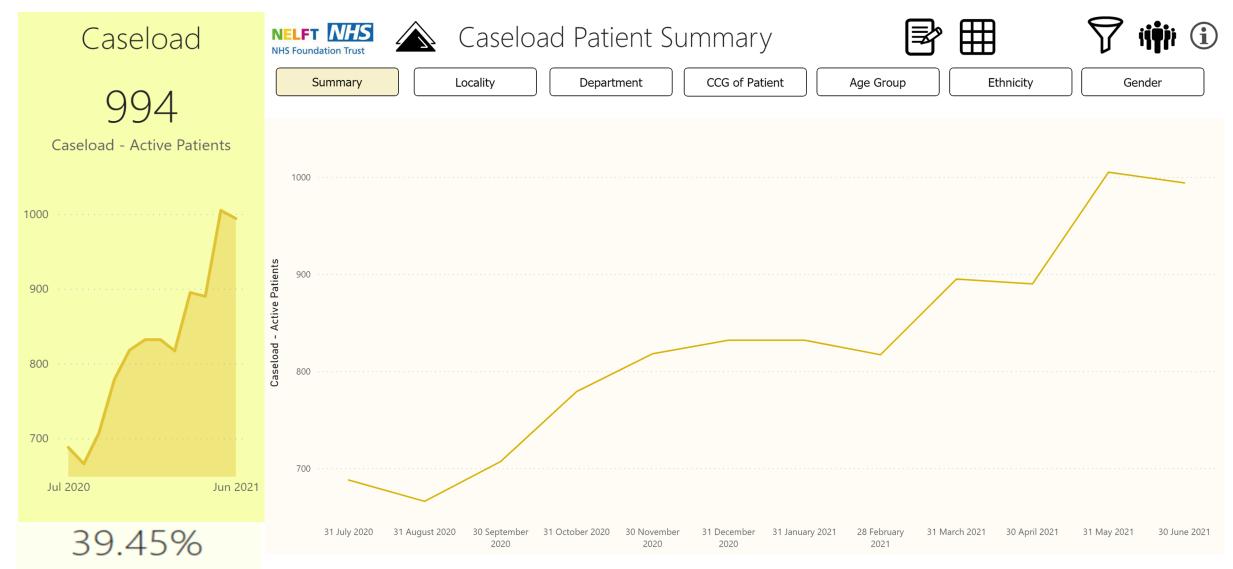
Jamie Mills, Transformation Programme Manager CCG

The current Service

- 7 Community Hub Teams
- 3 Intensive Support Teams (crisis teams)
- 1 x Eating Disorder Service including community ED team

- 1 x Learning Disability with MH Service
- 1 x Single point of access (SPA) service
- 1 x out of hours service (out of hours SPA)





Variance vs Same Period Last Year

Local Transformation Plan

As part of the NHS Long Term Plan there is a strong theme throughout on the role of the Voluntary Community Sector (VCS) in partnership with the health and care sector. Further details can be found on the Open Up, Reach Out publication

Schools Provision

- Self-Harm Management Toolkit (SHMT)
- Wellbeing Workshops in Primary Schools
- Reprezent Secondary school MH campaign
- Mental Health Support Teams

Parental and family support

- ASD Family support (health based coaching)
- CYP MH Family Support (health based coaching)
- Barnardos crisis support
- Triple P online provision

Young People Support

- Progressions Core Assets
- KOOTH
- Transforming Care 'Spot Purchase'
- CYP MH Ambassadors Healthwatch

Positives

- One provider across Essex
- Self referrals (anyone else can also refer)
- Integrated Tier2/Tier3 specialist Mental Health services
- A strengthened role with education ensuring that the local education system remain well connected and a key partner
- One Single Point of Access (SPA)
- Provision for young offenders and for CYP misusing substances
- Signposting to alternative universal and community services provision for support where an CAMHS intervention is not required

- Emotional Wellbeing and Mental Health Service for CYP with Learning Disabilities and Difficulties (EWMHS/LD) expansion
- Silvercloud roll with 2 additional posts (2 year pilot)
- 'Spot Purchase' budget for CETR
- Further funding for VCS to support Crisis Teams/SPA
- Further funding to roll out health based coaching in a family approach
- Consultation, support, advice, and training to the wider system
- Crisis Intensive Support Service (ISS) expansion
- CYP Specialist Community Eating Disorder Service (CYPEDS) expansion to include community based and home treatment team

Areas to address and innovation

CHALLENGES	SOLUTIONS
COVID 19	Phone triage systems and preventing young people needing to be assessed in A&E
SCHOOL RETURN (PEAKS IN ACUITY)	Increased liaison and feeding into schools
DUAL DIAGNOSIS PRESENTATIONS AT A&E (PHYSICAL & MENTAL HEALTH) MEANING MANDATORY ATTENDANCE	We've put out education / flow charts to schools / GPs / Closer working with internal SPA, been more accessible to prevent need to attend A&E
AMHP LEAST RESTRICTIVE PRACTICE	Including ISS attendance at A&E for mental health act assessments in new resources
ACUITY & BED ACCESS OF LOCAL T4 PROVIDERS & NATIONAL ACCESS (ED/LD/Low Secure/ GAU/PICU)	We have limited control over bed availability but have flexibility in staffing and close working protocols with acute wards to support where T4 admission is delayed
YOUNG PEOPLE REQUIRING SHORT TERM ACCESS IN CRISIS	72hr bed project in partnership with EPUT
WEEKEND AND OUT OF HOURS NETWORK SHUT DOWN	ISS OFFER 24HR 7 DAY A WEEK SERVICE (NOT REFLECTED IN PARTNER AGENCIES)
RECRUITMENT	Stability in agency staff, review of staffing structures, in house training, flexible approach to recruitment resulting in therapists and not just Nursing/Social Work