## Croydon's Integrated Mental Health Strategy Action Plan 2014-2019

1: Increasing access to mental health services						
Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead	Update December 14	Outcome Measure
Improve access and experience of services for BME service users.	MH Commissioning Team to engage with patients / service users and community groups through the BME forum to progress the work and actions from the local BME Mental Health Report 'Mind the Gap'	Aug-14	Aug-15	NT	<ul> <li>•30th Oct 2015. Attended and Presented at Mind the Gap follow up event to provide an update on SLaM's work at improving experience of BME services.</li> <li>•Public event with Hear Us, Off the Record, Healthwatch and Mind all invited.</li> <li>• Presented to Equality and Diversity Panel scoring developing in all sections.</li> <li>• Equality &amp; Diversity to be agenda item at all meetings</li> </ul>	To reduce health inequalities
Reduce the use of inpatient settings for BME service users	MH Commissioning Team to engage with patients / service users and community groups through the BME forum to progress the work and actions from the local BME Mental Health Report 'Mind the Gap'	Aug-14	Aug-15	NT	Meetings have been arranged between SLaM, BME Forum, & Hear Us to look at this issue and develop actions that can lead to improvements, meetings are scheduled for;  •27th Feb 2015  •10th March 2015  •17th March 2015	
Increase the referrals and take up of talking therapies for BME service users.	Explore IAPT market which could enhance services in Croydon	Apr-15	Apr-16	NT	<ul> <li>10th December Started worked with Clinical Psychologist (SLaM) to develop a pilot of existing 'Tree of Life' service to meet IAPT criteria and to pilot with three user groups by 31st March 2015.</li> <li>The 'Tree of Life' approach has demonstrated good outcomes with BME service users and Croydon CCG are keen to explore its potential wider use and expansion</li> </ul>	
Reduce over representation of young BME males in acute psychiatric services	Work with Public Health to ensure appropriate Prioritisation of community service developments within the AMH model	Apr-15	Apr-16	NT	Will form part of the above work	
Develop & Implement disorder specific pathways for mental health.	All Mental Health pathways to be mapped. We will produce pathway maps for each of the services to better understand the patient journey. We will involve service users / patients and carers and produce a recommendation and action plan based on the mapping project.	Jan-15	Apr-18	NT	Pathways will be mapped for each part of the Adult Mental Model as part of its implementation between Jan - June 2015 prioritising;  • Primary Care Mental Health Support Service - 21st May 2015  • Assessment and Liaison Team, - 21st May 2015  • Promoting Recovery Team - 21st May 2015  • Home Treatment Team - 21st May 2015  • Personality Disorder - 21st June 2015  • Oasis & Coast ( Early Intervention Services ) 21st June 2015  • Clozapine - 21st June 2015  • Enhancements have already been made to the Crisis and Home Treatment Service to increase capacity	
Reduction in the use of overspill beds for inpatients in acute care	We will monitor and review the usage of overspill beds, against the implementation of the new AMH model.  Quarterly figures will be produced and shared which shows the reduction in overspill, and if the reduction is not evident or insufficient recovery action will be instigated.	Jan-15	Apr-18	SG / PR	Barriers to discharge is an agenda item for the Mental Health Planning Group. An initial proposal has been circulated on the 9th January and further action will be planned in February to work with provider SLaM to hold a multi agency meeting on the ward to assess current patients and develop actions remedy barriers to discharge. The use of out of borough placements is now minimal. This has further ensured that Croydon service users have robust access to IMHA provision	
Increase access rates and capacity of IAPT service	Additional investment of 700k into IAPT services for year 14/15 which will be recurrent. There is a review of current Voluntary Sector Talking Therapies provision and its potential IAPT inclusion	Apr-14	ongoing	BB / SG	IAPT Service on target to increase Access Rates to 5% by March 2015. The service has been expanded with additional funding and the waiting list reduced. Review of Voluntary Sector provision uinderway	To improve access to better mental health services and treatments
Support MH Needs of offenders sooner	Recommendation from closing the gap and area to explore in 2015/16	Oct-15	Apr-19	MH Commissioning	Expected to begin work in October 2015	To improve access to better mental health services and treatments
No one turned away from services	Recommendation from closing the gap and area to explore in 2015/16 - will link with work on parity of esteem	Apr-15	Apr-16	MH Commissioning	Forms part of the work stream rolling out the AMH Model	To improve access to better mental health services and treatments

2: Stre	engthening partnership	workin	g and in	tegrating pl	nysical and mental health	Outcome Measure
Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead	Update December 14	
Aim to reduce mortality rates for people with a serious mental illness	Work with partners in Public Health to benchmark current mortality rates and these will be reviewed year on year in order the impact of the AMH model can be assessed.	Jun-15	Apr-19	SG	The Commitment is to ensure that there is an improved in reach of specialist clinical care in relation to physical health needs and that out patient appointments are honoured (particularly when a patient has a lengthy in patient episode of care) To improve the Quality of discharge letters at the point of discharge.	To increase service users confidence in a Healthy life expectancy . To narrowing the life expectancy gap associated with Mental Health Service users
Improve physical health support to mental health service users	Develop an enhanced physical health CQUIN for 15/16	Apr-15	Mar-16	BB / SG	For 15/16 there will be a new physical health CQUIN with provider SLaM on national DoH standards. Guidance yet to be published but discussions have been held with 4 borough colleagues and a 4 borough CQIUN will be implemented.	Improve health and wellbeing through promotion of sports, participation rates in sporting activity, % adults meeting at least minimum levels of physical activity, adult obesity rates
Ensure Mental Health Community are included within Croydon's Improved Whole Population Health Promotion	Need to establish initial contact with other departments to align work	Aug-14	Apr-16	MH Commissioning	To work in alignment with Bernadette Elves in Public Health in the development of the 2015 Annual Public Health report which has as its focus Health Inequalities within the Borough and from which an action plan will be developed	Tackle health inequalities within the borough
Ensure carers services are appropriate and fit for purpose	Work to begin 15-16	Apr-15	Apr-19	MH Commissioning	Mental Health Commissioning represented at Carers Forum 12th December 2014, and will continue to have representation on an ongoing basis. This will ensure future work on carers services are aligned with Council services and the Carer Strategy	Self-reported wellbeing, social care carers with as much social contact as they would like
To Reduce attendance at A&E's	Review the results of the Audit currently being carried out at Croydon University Hospital (CUH). The results of the audit can be used to produce a report with further recommendations and action points.	Apr-15	Mar-19	NT	Croydon CCG secured additional money for winter services to cover period of December 2014-April 2015. The following additional services will be delivered;  • Additional Staff Grade Doctor (Jan-March) within PLN team to further reduce A&E waiting times and improve experience of people in Mental Health Crisis presenting at A&E. This is expected to reduce A&E breaches by a further 5%  • Increased Capacity within Early Intervention Services to reduce caseload and waiting times. This increased capacity will be ongoing and was planned for 2019 but has been brought forward 3years with the additional short term funding.  • Development of New Early Detection service to work with young people at risk of developing psychosis. This service will be ongoing and was planned for 2019 but has been brought forward 3years with the additional short term funding.  •Croydon is working with Southwark, Lambeth & Lewisham to develop a 24/hr Crisis Line which will be available to primary care and the police services and members of the public. This will ensure consistently of response across the 4 boroughs and support the aims of the Mental Health Concordat, to support people experiences or at risk of experiencing Mental health Crisis.	To reduce attendance at A&E
Medication adherence	Work to begin 15-16	Jan-15	Apr-19	MH Commissioning	Will form part of the wider service redesign about effectiveness of primary care and integration with self help, secondary care and community support services  •To start Jan 2015	Tackle health inequalities within the borough
Ensure the partnership and governance has wide and appropriate membership to implement the strategy	TOR, governance, and mental health strategy action plan to be addressed and next MH partnership board meeting	Dec-15	Review Dec-16	NT	The Mental Health Partnership has been refreshed with meetings in Sep and Dec 2014.  •ToR's and attendance have been refreshed The Partnership is actively attended from representatives of Service Users, Carers and BME forum.  •Additionally 4 reps have been invited onto the Mental Health Strategy Steering Group to work on implementing the Mental Health Action Plan. The strategy group meets monthly.	To ensure there are clear Governance arrangements in place which can underpin the deliverance of the strategy.

2: Strengt	thening partnership wo	rking aı	nd integra	ating phys	sical and mental health (cont.)	Outcome Measure
Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead	Update December 14	
Ensure all services provide good intelligence and that targets are clear	Work will begin on both voluntary and secondary care to ensure that each service is clear and we understand data that relate to its key areas. Additionally, each service area will have updated key performance indicators and service spec's. Each service area will be tackled individually and will involve engagement and consultation with all stakeholders and include views service users.	Jan-15	Apr-19	NT	Activity & KPI monitoring in the SLaM contract is to be further enhanced and clearly set out in the 15/16 contract. Mental Health Commissioning currently undertaking a review of the Voluntary Sector which should result in a report by 28th Feb 2015. This report will inform commissioning and ensure organisations are working in alignment with the Mental health Strategy	To manage CCG & Counci finances in a prudent manne
Secure long term provision of the London Street Triage Service	Street Triage Board meets quarterly, and Croydon attends	Sep-14	Sep-15	NT	Croydon CCG are working with the 4 boroughs and NHSE regarding the ongoing financial viability of the Street Triage Service. Last meeting 29th Jan 2015.  •However, the key component of the service, the access to a 24/7 Crisis helpline has been secured to continue from April 2015 on an ongoing basis which will mitigate any risk of the one year pilot ending.	To reduce crime in partnership with local polic

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead	Update December 14	
Ensure the voluntary/third sector have an increased understanding of mental health preventative measures and primary care	A review of all voluntary sector services is being planned and will be carried out between Sep 14 and 30th Nov 14. This review will be used to inform the commissioning intentions for the voluntary sector. This review will cover a wide range of areas and will include the referral routes into each service in order that the services can be mapped and there relationship with primary and secondary care understood.	Sep-14	Aug-15	SM	Voluntary Sector Review planned for completion 28th Feb. Commissioning Recommendations to follow.	To help local families at an early stage
Deliver timely advice and signposting to reduce the risk of escalating problems, and improve availability and access to universal services	To form part of the Voluntary Sector Review and future commissioning of advice services. Roll out of the AMH Model.	Apr-15	Apr-16	MH Commissioning	The increased investment into the Adult Mental Health Model will develop expansion with Assessment & Liaison services working with primary care to facilitate easy in / easy out pathways for Mental Health.  This will result in better access to services and integration between primary, secondary and community care     Voluntary Sector Review to be completed 28th Feb 2015	To increase access to bette mental health services and treatments
Ensure that Postnatal depression services are effective and can respond to expected increase in demand over the next 10 years	We will review postnatal services as a project and involve service users in this work. From this review we will share the results and recommendations with the partnership board.	Mar-15	Mar-16	MH Commissioning	SG will attend a national conference on Perinatal Services in January. Working group expected to be formed next year (15-16)	To increase access to bette mental health services and treatments
Family Therapy	Access to family therapy identified in Closing the Gap, service area to be explored further in 15/16	Jan-16	Apr-19	MH Commissioning	As above - working group expected to pick up Jan 2016	To help families at an early stage
Transition Arrangements				MH Commissioning		
nsure prevention and early intervention services for the 14-35 years olds are effective. Schools to feel supported to identify MH Earlier	Develop a project to work with service users, carers and children's services commissioners to review services and inform future commissioning decisions. it is a priority area for Croydon to develop early detection and intervention services (COAST & OASIS) to be operational by March 2015. Full specification and KPI's developed	Jan-15	Apr-16	MH Commissioning	Review of the expansion and development of Coast and Oasis service as part of core contract monitoring once established Jan 2016 •Further work review the transition process with children's commissioners Review of the expansion and development of Coast and Oasis service as part of core contract monitoring once established Jan 2016	To help local families at an early stage
Peer support	Service reviewed against existing evidence base but not currently prioritised for funding with Croydon, as funding directed towards early intervention and hospital liaison services	Jan-15	Mar-16	MH Commissioning	<ul> <li>29th Jan Croydon CCG met with colleagues within the TAC's programme to explore social prescribing.</li> <li>Croydon CCG working with Public Health to develop evidence base of Social Prescribing and its impact on isolation.</li> <li>Report from Public Health an agenda item for March 2015 Partnership Board Meeting</li> </ul>	To prevent people from becoming isolated
Increase promotion and support for self-care. ncrease choice and control of people using mental health services. Including increase of decision making.	All of the service reviews and future commissioning decision will include feedback from service users.  Contracts and revise service specifications will include KPI's and targets for increasing choice and control of service users.	May-15	Mar-16	MH Commissioning	MH Commissioning represented on Presentation, Self Care and Shared Decision Making working group Nov 14.  Workshop set up for 26th Feb to test Mental Health App's with a stakeholder group. If positive feedback will consider with GP leads how we promote to Citizens. Work is beginning to review the information on Mental Health currently held on CRESS to be transferred to D-Sit.	To reduce health inequalities within the borough, to address the impact of alcohol, tobacco and substance misuse, self-reported wellbeing, to increase social contact for social care clients and carers

	4: Improving the quality	Expected	Expected Expected	ie with ment	ai neaith problems	Outcome Measure
Aims of Integrated Mental Health Strategy 2014-2019	Actions	Timescale start	Timescale finish	Lead	Update December 14	
Increase the choice and control of people using Mental Health services, through increased ersonalisation and using personal care and support planning to put people in control.	Joint work with social care to explore opportunity for increased use of personalisation within social care	Mar-16	Apr-19	MH Commissioning	Expected to begin March 2016 to work closely with social care colleagues and the Mental Health Partnership to explore the greater use of personalisation and promotion of personal budgets within MH Social Care.	Self - reported wellbeing, & social care clients and carer with as much social contact as they would like
Croydon will work towards delivering Personalised ackages of self-directed support that meets assess need, that have a strong focus on promoting independence, recovery and resilience.	as above	Mar-16	Apr-19	MH Commissioning	Expected to begin March 2016 to work closely with social care colleagues and the Mental Health Partnership to explore the greater use of personalisation and promotion of personal budgets within MH Social Care.	Self - reported wellbeing, & social care clients and carers with as much social contact as they would like
The Mental Health Strategy has been graded by external stakeholders as 'developing' or 'amber' from assessment for EDS2, Equality and Diversity Performance. We will work towards obtaining a reen score for each identified area. To facilitate this Equability and Diversity will be a standing agenda em at each Mental Health Planning Meeting, Team Meeting, & Partnership Board Meeting, were will review the actions from the assessment.	Progress against current performance reviewed and shared with partnership board. Updates will be compiled on a three monthly basis.	Sep-14	Apr-19	NT	Equality and Diversity is a standing agenda item across all Mental Health Working Groups	To increase access to bette mental health services and treatments
Ensure community -based support is available	Will be part of the proposed AMH model and subsequent scoping and review of Voluntary Sector provision and community services	Jan-15	Apr-19	MH Commissioning	The Voluntary Sector are part of the mental Health Strategy Steering Group which will meet monthly throughout 2015. The role of the Voluntary Sector Rep's will be ensure that service expansion in secondary care is aligned with services available in the Voluntary Sector •The development of the Clozapine service will facilitate more people being able to manage their mental health within the community rather than as inpatients and this service should be in place by June 2015	To prevent people from becoming isolated, provide better access to mental health services and treatments, self-reported wellbeing, % social care clients and carers with as much social contact as they would like
	Funding has been secured to deliver borough wide				I Haining delivery April 15- Dec 15	Right people in right jobs
ront line staff not equipped to deliver personalised training	mental health awareness and first aid training to front line health and social care workers in Croydon to enhance service and experience of services by MH service users	Feb-15	Dec-15	NT / HESL Project Support TBC		Task all council departments with improving health of residents
Promote the use of direct payments	Need to ensure a clear alignment with social care via the ICU	Mar-16	Apr-19	MH Commissioning	Expected to begin March 2016 to work closely with social care colleagues and the Mental Health Partnership to explore the greater use of personalisation and promotion of personal budgets within MH Social Care.	To prevent people from becoming isolated, provide better access to mental health services and treatments, self-reported wellbeing, % social care clients and carers with as much social contact as they would like
Enhanced Support for with MH who is a victim of crime	To work in close collaboration with the Community Safety team at Croydon Council	Oct-14	Oct-15	MH Commissioning	Work began in late 2014 with community safety team Croydon Council.	tackle disability hate crime to increase the percentage of social care clients who feel as safe as they want and are satisfied with care
Reduce Restraint	Identified as an area within the Closing the Gap report - to be explored 15-16 and as part of the ongoing AMH service development with SLaM	Nov-14	Oct-15	MH Commissioning	Work began in Nov 2014 with SLaM as part of work with Hear-Us and BME Forum to improve patient experience.	To commission for the best hospital and healthcare services fro Croydon
Change Approach to self harm	Identified as key area in Close the Gap report - will need to be taken forward as a quality issues in 15-16	Nov-14	Oct-19	MH Commissioning	Work to begin with SLaM in June 2015	To commission for the best hospital and healthcare services fro Croydon

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead	Update December 14	
Develop personal health budgets	It is a government priority to increase choice and control in public services. Guidance is expected to be developed by NHS England on how Personal Health budgets will be implemented and this project area will be developed in the future	Mar-16	Apr-19	MH Commissioning	Expected to begin March 2016 to work closely with social care colleagues and the Mental Health Partnership to explore the greater use of personalisation and promotion of personal budgets within MH Social Care.	To prevent people from becoming isolated, provide better access to mental health services and treatments, self-reported wellbeing, % social care clients and carers with as much social contact as they would like
Review Reablement Service Pilot	Current pilot is being evaluated and a review of which will inform commissioning decisions.	Jan-15	Apr-15	MH Commissioning	Decision to be made in Jan regarding 15/16 funding. External evaluation is being completed by York University and will inform decision making process	To manage CCG & council finances in a prudent manne
Integration with transport, green space and leisure	Need to establish initial contact with other departments to align work and develop work plan	Mar-16	Apr-19	MH Commissioning	Expected to begin discussions with community safety team March 2016	To make parks and open spaces safe for all, to tackle disability hate crime
Review of Mental Health Day Services	Scoping to be undertaken in 2015/16	Mar-16	Apr-19	MH Commissioning	Expect to review to commence March 2016	Reduce social isolation and enable re-ablement and recovery
Develop a strategy for welfare reform	Action plan to be developed. To provide good welfare and debt advice. To work in alignment with Croydon Council and findings on Universal Credit. Barriers to discharge work will offer clarity regarding welfare concerns of service users	Nov-14	Apr-16	MH Commissioning	Work commenced with Council colleagues in Nov 2014 - to be further discussed at Partnership Board in March 2015	To provide access to a welfare benefits hotline, to assist those affected by the bedroom tax / universal cred to access timely advice
Develop a housing and housing related support action plan	A review of mental health commissioned supported housing is being carried out in 14-15. This review will form the basis of action planning and next steps.  Housing services should focus on recovery and hospital admission.	Jun-15	Apr-16	MH Commissioning	Mental Health to expand links with housing department beginning Nov 2014 To work in liaison with the JSNA on homelessness due early 2015	To increase access to menta health services for those service users living in emergency accommodation
Use of friends and family test to allow all patients to evaluate services	Work to begin 15-16	Jun-15	Apr-16	MH Commissioning	Use of family and friends test to be a quality CQUIN for year 15/16.	Open and transparent and put communities at heart of decision making
Increase choice about mental health services	Work to begin 15-16	Jun-15	Apr-16	MH Commissioning	To be discussed at the Mental Health Partnership Agenda May 2015 along with Advocacy Services	Open and transparent and put communities at heart of decision making
Review employment support services	A full review of council employment services is planned and will need to include closer working arrangements with established mainstream services, Job Centre Plus, Disability Employment Advisors information and signposting services.	Apr-16	Apr-17	MH Commissioning	Develop links with Council colleagues April 2016	To increase employment and reduce poverty across all communities
Increase resilience of employers workforce	Action plan to be developed to work with Council, Primary Care and SlaM to support the workforce reduce risks of mental ill - health and support return to work.	Apr-17	Apr-19	MH Commissioning	Develop links with Council colleagues April 2015 - and to establish the level of need ahead of April 2017	Adults with mental health needs in paid employment