

For General Release

REPORT TO:	CABINET 11th December 2017
SUBJECT:	The Woodley Review
LEAD OFFICER:	Guy Van Dichele, Director of Adult Social Care, & Rachel Flowers, Director of Public Health
CABINET MEMBER:	Cllr Louisa Woodley, Cabinet Member for Families, Health & Social Care
WARDS:	All
CORPORATE PRIORITY/POLICY CONTEXT/AMBITIOUS FOR CROYDON: Ambition Priority 2: Independence <ul style="list-style-type: none">• Work with partners to provide more integrated health, care and support in local communities.• Work with partners to promote good mental health and deliver a more preventative and early intervention focused approach.	
FINANCIAL IMPACT The work of the review has highlighted the need for additional funding in the system alongside the re-prioritisation of existing funding through better partnership working to better address need of the borough.	
KEY DECISION REFERENCE NO.: not a key decision	

The Leader of the Council has delegated to the Cabinet the power to make the decisions set out in the recommendations below

1. RECOMMENDATIONS

The Cabinet is recommended to:

1.1 Endorse the attached report and recommendations in section 2.3

2. EXECUTIVE SUMMARY

- 2.1 The Woodley review of mental health services was launched in late 2016 to assess progress against Croydon's mental health strategy (2014-19) and identify trends in inequalities. The review was undertaken as part of the audit and evaluation process within adult social care. The review has a special focus on how effectively mental health services are supporting BAME groups.
- 2.2 The key findings of the review include;
 - 2.2.1 Croydon's Integrated Mental Health Strategy is comprehensive and ambitious – and partners remain committed to delivering the strategy's key objectives.
 - 2.2.2 The Strategy has driven significant improvements in the mental health system in recent years.
 - 2.2.3 However the Strategy is not being delivered in a collaborative way – leading on occasion to confusion and fragmentation among service commissioners and providers, and missed opportunities to deliver best practice care to service users.
 - 2.2.4 The statutory sector is not yet providing robust commissioning arrangements with commissioners, on a number of occasions, working in silos rather than in partnership, although this is improving it needs to get better.
 - 2.2.5 Providers of mental health services, and service users themselves, are showing signs of consultation fatigue – what is required now is action and tangible changes to services and pathways that will support people to recover faster and access the right service first time round.
 - 2.2.6 A focus on delivering national targets, including the waiting time for IAPT services, may be impacting on the delivery of the highest quality services. For, despite Croydon meeting NHS England's targets for initial waiting times to access local psychological talking therapies, people are waiting for an average of 60 days to access intensive IAPT support after receiving their initial assessment.
 - 2.2.7 Unwarranted delays in discharge from hospital, particularly for BAME service users, are being addressed but continue to represent a significant pressure on the local system.
 - 2.2.8 The voluntary and community sector supporting people with both mental illness and wellbeing is astute, nimble and enthusiastic to lead improvements for service users, but often feels frustrated by lack of opportunity to engage in strategic discussions about delivery of the mental health strategy.
- 2.3 Recommendations from the Review

2.3.1 These recommendations are taken from the review with an adaptation (in italics) to recommendation in the 3rd bullet point following the financial implications mentioned in section 5

For the Integrated Head of Mental Health Commissioning, working with Directors in the Council, CCG and senior representation from the voluntary sector:

- To review the membership and governance of the Mental Health Strategy Group, and its accountability in ensuring that the Mental Health Strategy is delivered. This will include updating the group's terms of reference.
- To update the Terms of Reference of the Mental Health Partnership Board to ensure the Board is empowered to actively support delivery of the Mental Health Strategy.
- To review the mental health budget in order to shift resources towards earlier intervention, assessing baseline spends and re-profiling budgets to ensure best value for money, *and to lobby for appropriate levels of funding.*
- To embed the Woodley Review recommendations within the Mental Health Strategy's action plan.
- To embed the Mind the Gap report recommendations within the Mental Health Strategy action plan.
- To improve existing contract monitoring processes so as to ensure that coordinated, robust arrangements are in place.
- To ensure that future commissioning proposals involve the co-production of mental health service design and delivery with service users, and to ensure that new contracts for mental health services are devised to (1) help build community capacity and resilience and (2) ensure adequate focus on BAME service user needs.
- To explore opportunities to use technology to bridge the gap where there are delays in face-to-face services and identify if additional investment in this area would be helpful.
- To work with service users, through existing service user forums i.e. Hear Us, the BME Forum, and Healthwatch, to agree how to make sense of, and communicate, how services are performing e.g. IAPT waiting times.
- To work with the Mental Health Strategy group and service users to explore the feasibility of a BAME dedicated mental health drop in service, presented in a co-produced options paper.

2.3.2 South London and the Maudsley NHS Trust:

- To report progress of the SLaM BME Patient Experience CQUIN 2016/17 and 2017/18 to the Mental Health Strategy group.

2.3.3 Croydon Council:

- To take forward, in collaboration with partners, Public Health England's personalised recommendations to Croydon to inform this review. They suggested that in order to address the key challenges raised by the review,

local partners needed to work together to consider mental health prevention and early intervention in its broadest terms, including further consideration of:

- The role of Primary Care
- Mental health and wellbeing and not just mental illness and services
- How to build a more mentally healthy community and more 'mental health literacy'
- The power of good physical health to support good mental health
- Addressing high risk factors for poor mental health: men, loneliness, schools, debt / financial challenge
- Suicide prevention

3. DEVELOPMENT AFTER THE REVIEW

3.1 The commissioning landscape continues to shift within the local health economy and this has happened alongside the Woodley Review process. The Woodley review has informed the mental health aspect of the local transformation plan being undertaken by the Transformation Board. The review highlighted particular issues around gaps in governance structures to ensure the delivery of Croydon's mental health strategy and contract monitoring.

3.2 During the September 2017 Health and Wellbeing Workshop, looking at the implementation of the review recommendations, it was agreed that governance structures should be streamlined and clear lines of accountability needed to ensure that delivery of the strategy is achieved and that this aligned with the work of the Transformation Board.

3.3 There was a clear narrative around the need for metrics used to communicate mental health services to be meaningful for Croydon residents and not relying on national statutory targets to describe mental health provision. This requires the development of local Croydon metrics co-produced with residents to provide meaningful information for commissioners, providers and residents. The development of meaningful local Croydon metrics need to be developed with the input of the wider local health system and align with the population approach within the transformation work.

3.4 Future contract monitoring by the CCG and Council need to be co-ordinated and use the Mental Health Partnership Board to feedback formally on contract monitoring issues. We are working with the newly formed BME Wellbeing partnership to support their development and input in supporting the implementation of the Woodley review recommendations.

3.5 Next Steps

An action plan for implementation of the recommendations is being developed with partners in the CCG and will be taken for sign off to the Health and Wellbeing Board for in February 2018.

4. CONSULTATION

- 4.1 The Woodley review panel included representation from voluntary sector services, Healthwatch, Public Health England, the CCG, Croydon Council, and Croydon Council elected Members.
- 4.2 The recommendations were taken to a Health and Wellbeing Board Workshop in September 2017 to discuss how the report's recommendations can be implemented.

5 FINANCIAL IMPLICATIONS AND RISKS

- 5.1 This review has highlighted the need for more funding and a realignment of resources within the mental health system, along side stronger partnership working.
- 5.2 The risk of not progressing the recommendations is the increase in inequalities in access to mental health services and the failure to deliver the Croydon Integrated Mental Health Strategy.
- 5.3 There is also a risk that re-profiling of the mental health spend may not be sufficient to improve outcomes and reduce inequalities in mental health in Croydon.
- 5.4 Costs to the wider health and social care system of poor mental health are significant as poor mental health has an effect on general health and can make health conditions worse. Each person with a long-term condition and co-morbid mental health problem raises total health care costs by at least 45%.
- 5.5 The recent McKinsey strategic review of the Croydon Health and Care System stated that there was potentially insufficient community activity for the mental health weighted population compare to peers, leading to high demand for inpatient acute MH services.
- 5.6 Croydon CCG spends approximately £120 per head of population compared to the national average of £170. This is the second lowest spend within London.

6. FUTURE SAVINGS/EFFICIENCIES

If stronger partnership working across the sector is implemented it could lead to greater efficiencies.

Approved by: Lisa Taylor, Director of Finance, Investment and Risk

7. COMMENTS OF THE COUNCIL SOLICITOR AND MONITORING OFFICER

- 7.1 The Solicitor to the Council comments that the Council is an authority to which the National Health Service Act 2006 (NHS Act) Section 244 applies. Under the Localism Act 2011 (which amended the Local Government Act 2000) the Council is required to establish a Scrutiny and Overview Committee (or sub-

committee) to review and scrutinise, in accordance with regulations under that section, matters relating to the health service in the Council's area and to make reports and recommendations on such matters in accordance with the regulations.

- 7.2 The NHTA 2006 further provides that any functions conferred on a local authority by regulations under Section 244 are not the responsibility of an Executive of the authority under executive arrangements (within the meaning of Part 1A of the Local Government Act 2000).
- 7.3 The relevant regulations are the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. Part 4 deals with health scrutiny and any matter relating to the planning, provision and operation of the health service within the Council's area.
- 7.4 The scrutiny of mental health services falls within the remit of the Council's Health and Social Care Scrutiny Sub-Committee.
- 7.5 The Chairman of the Health and Social Care Scrutiny Sub-Committee has been consulted on this matter. The report as presented is for noting only.

(Approved by: Sandra Herbert Head of Litigation and Corporate Law for and on behalf of Jacqueline Harris-Baker Director of Law and Monitoring Officer)

9. HUMAN RESOURCES IMPACT

- 9.1 Whilst there are no implications for LBC employees, the positive outcomes that may be highlighted through this work may offer scope to develop complimentary initiatives to support employee's wellbeing at work

(Approved by: Sue Moorman, Director of Human Resources)

10. EQUALITIES IMPACT

- 10.1 This review and the recommendations within it are set out to address inequalities in access and delivery of mental health services within the borough. The review specifically considered the differential experiences of mental health services among BAME service users.
- 10.2 Detailed evidence regarding the impact on equalities of the current delivery of mental health services are set out within the report and mechanisms to reduce inequalities are detailed within the recommendations.
- 10.3 The report's recommendations seek to address inequalities in access to mental health services by explicitly considering the role of community based providers of care, such as the voluntary sector, and the importance of this sector in

supporting those with mental health issues who may not engage with statutory services.

11. ENVIRONMENTAL IMPACT

11.1 Not applicable

12. CRIME AND DISORDER REDUCTION IMPACT

12.1 Not applicable

13. REASONS FOR RECOMMENDATIONS/PROPOSED DECISION

13.1 It is a key priority for the Council to promote good mental health and to deliver the Croydon Integrated Mental Health Strategy. These recommendations set out to ensure that the governance and delivery of mental health services are best positioned to deliver the strategy

14. OPTIONS CONSIDERED AND REJECTED

14.1 Not applicable

CONTACT OFFICER: [Rachel Flowers, Director of Public Health, Resources]

APPENDICES TO THIS REPORT

Appendix 1 – The Woodley Review 2017

BACKGROUND PAPERS:

1. Croydon Integrated Mental Health Strategy for Adults 2014-2019
<https://www.croydon.gov.uk/democracy/dande/policies/health/imh-strategy>
2. The Five Year Forward view for mental health. A report from the independent Mental Health Taskforce to the NHS in England February 2016.
<https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>
3. Implementing the five year forward view for mental health. NHS England 2016.
<https://www.england.nhs.uk/wp-content/uploads/2016/07/fyfv-mh.pdf>
4. Mind The Gap. Hear Us, Croydon BME Forum, Off the Record. 2013
<http://www.hear-us.org/aboutus/linkworking/PDF/MIND-THE-GAP-WEB.pdf>
5. Strategic review of the Croydon Health and Care System, McKinsey
6. SLAM Council of Governors meeting 9/9/2017
https://www.slam.nhs.uk/media/476081/council_of_governors_meeting_2017-09-19_full_papers.pdf

7. Long-term conditions and mental: The cost of co-morbidities, The King's Fund, Naylor et al, 2012
https://www.slam.nhs.uk/media/476081/council_of_governors_meeting_2017-09-19_full_papers.pdf