

# REPORT FOR DECISION

<b>Agenda Item</b>	
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<b>DECISION OF:</b>	<b>CABINET</b>
<b>DATE:</b>	<b>10 APRIL 2013</b>
<b>SUBJECT:</b>	<b>BURY MENTAL HEALTH STRATEGY 2013 - 2018</b>
<b>REPORT FROM:</b>	<b>Councillor Rishi Shori, Cabinet Member, Health and Wellbeing</b>
<b>CONTACT OFFICER:</b>	<b>Julie Gonda, Assistant Director, Commissioning and Procurement, Adult Care Services</b>
<b>TYPE OF DECISION:</b>	<b>KEY DECISION</b>
<b>FREEDOM OF INFORMATION/STATUS:</b>	This report is within the public domain.
<b>SUMMARY:</b>	<p>This report seeks approval of the proposed Bury Mental Health Strategy 2013- 2018.</p> <p>This is a joint strategy, owned by Adult Care Services and Bury Clinical Commissioning Group.</p> <p>It outlines Bury’s local response to the six objectives in the national mental health strategy “<i>No Health Without Mental Health</i>” (February 2011) and sets out how Adult Care Services and the Bury Clinical Commissioning Group will work with partners to ensure the provision of effective and efficient mental health services for all adults in Bury.</p>
<b>OPTIONS &amp; RECOMMENDED OPTION</b>	<p><b>Option 1</b> Approve the Bury Mental Health Strategy 2013-2018. This will provide direction for future services and inform the development of a targeted action plan. The Mental Health Steering Group will also be refreshed to monitor the implementation of the Action Plan.</p> <p><b>Option 2</b> Approve the Strategy with amendments. Any proposed changes would need to be set out in detail to enable full assessment of the amendments in relation to Equality and mental health legislation.</p> <p><b>Option 3</b> Do nothing. This increases the risk that national mental</p>

	<p>health objectives will not be met and/or a fragmented approach to implementation which would not represent best use of resources</p> <p>Cabinet is recommended to approve option 1.</p>
<b>IMPLICATIONS:</b>	
<b>Corporate Aims/Policy Framework:</b>	Do the proposals accord with the Policy Framework? Yes
<b>Statement by the S151 Officer: Financial Implications and Risk Considerations:</b>	<p>The Strategy outlines how Mental Health Services will be provided for 2013 – 18 against a background of diminishing resources.</p> <p>This will be achieved through greater partnership working, awareness raising and preventative measures to ensure individuals' needs do not escalate unnecessarily.</p>
<b>Statement by Executive Director of Resources:</b>	
<b>Equality/Diversity implications:</b>	<p>The Equality Assessment outlines that the strategy aims to improve mental health services for all residents in Bury, with a particular focus on those at a greater risk of having a mental health condition and those at higher risk of not having their condition detected.</p> <p>The overall effect of the strategy, and the targeted work taking place as a result of it, will have a direct and positive impact on the vast majority of the groups with protected equality characteristics.</p>
<b>Considered by Monitoring Officer:</b>	<p>Yes</p> <p>When considering the Strategy, Members must have due regard to the Council's equality duties (under the Equality Act 2010) and any consultation responses.</p>
<b>Wards Affected:</b>	All
<b>Scrutiny Interest:</b>	Health Scrutiny Committee

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**TRACKING/PROCESS**

**DIRECTOR:** Executive Director, Adult Care Services

Chief Executive/ Strategic Leadership Team	Executive Member/Chair	Ward Members	Partners
			Bury Clinical Commissioning Group (14/11/2012)
Scrutiny Committee	Committee	Council	
Health Scrutiny Committee (21/03/2013)			Adult Care Services Strategic Management Team (29/10/2012)

## 1.0 BACKGROUND

- 1.1 The Government published the national mental health strategy "No Health Without Mental Health" in February 2011.
- 1.2 The main drivers of the national strategy are to achieve parity of esteem between mental and physical health and to improve the mental health and wellbeing of the nation. The strategy sets out six key objectives which underpin these aims.

## 2.0 PURPOSE OF THE BURY MENTAL HEALTH STRATEGY

- 2.1 The purpose of the Bury Mental Health Strategy 2013 – 2018 is to outline Bury's local response to the six objectives of the national strategy, which are:
- (i) More people will have good mental health.  
This is about prevention and ensuring people can reach their full potential throughout all stages of life.
  - (ii) More people with mental health problems will recover.  
The focus is on ensuring people recover well and how effectively they manage their condition. This includes a focus on early intervention and taking a broader view of the factors that affect mental health, such as housing and social networks.
  - (iii) More people with mental health problems will have good physical health.  
This is about improving the physical health of people with mental health problems and vice versa.
  - (iv) More people will have a positive experience of care and support.  
The focus is on providing good quality services which give individuals as much control as possible over their own care.
  - (v) Fewer people will suffer avoidable harm.  
The focus is on reducing self-harm, reducing harm mental health patients cause to others, and reducing avoidable harm.

- (vi) Fewer people will experience stigma and discrimination.  
This is about tackling the stigma and discrimination which can have a serious impact on the life chances of people with mental health problems.

### **3.0 PROCESS USED TO DEVELOP THE BURY MENTAL HEALTH STRATEGY**

- 3.1 Bury Council's Adult Care Services Department has produced the Bury Mental Health Strategy 2013 -2018 in conjunction with NHS Bury / Bury Clinical Commissioning Group.
- 3.2 A Steering Group was formed to co-produce the strategy by means of a series of interactive workshops. The group met 6 times and involved a wide range of local partner organisations, including representatives from the Council (public health, sport and leisure, adult learning, strategic housing, employment support and training), the NHS, providers, service users, carers, Greater Manchester Probation Trust, Jobcentre Plus, BME community organisations and the voluntary sector.
- 3.3 A series of consultations, in the form of focus groups, were carried out between May and September 2012 to inform the strategy with a range of local service user groups, including:
  - (i) Bury Involvement Group (BIG)
  - (ii) Choices
  - (iii) Creative Living Centre
  - (iv) The Federation of Jewish Services
  - (v) Streetwise
  - (vi) Bury Asian Women's Group
  - (vii) Bury South Asian Men's Group
- 3.4 The Senior Leadership Team were requested to input their views of the draft strategy in December 2012.

### **4.0 OVERVIEW OF THE BURY MENTAL HEALTH STRATEGY**

- 4.1 The strategy is focused on working age and older adults and covers the following services:
  - (i) Preventative services;
  - (ii) Services for individuals with mild to moderate conditions; and
  - (iii) Services for those with severe and enduring conditions.
- 4.2 Part 1 of the strategy provides an overview of the mental health needs of the population of Bury with estimates in relation to future needs. An outline of the individuals or groups that are more likely to develop mental health conditions are explained, supported by local statistical evidence.
- 4.3 Part 2 is focused on outlining Bury's response to the six objectives of the national mental health strategy. This includes a brief overview of existing services and customer views of current services, with a series of actions outlining how mental health services and support will be improved over the lifetime of the strategy.

- 4.4 Part 3 provides a broad outline of the funding of mental health services by Bury Council and NHS Bury, with a comparison against other areas.

## **5.0 KEY ISSUES FOR CONSIDERATION, FUTURE CHALLENGES AND RISKS**

- 5.1 The strategy has been co-produced with the assistance and support of a wide range of partner organisations, following a considerable series of consultation sessions with service users. It has also been informed by a significant amount of information, directly and indirectly, related to mental health. However, there are some challenges to overcome in order to deliver the improvements outlined in the strategy. These challenges are outlined below.

### **5.2 Partnership working**

- 5.2.1 Mental health is interconnected with housing, employment, skills and income, the environment, culture and ethnicity, crime and anti-social behaviour, drugs and alcohol, and not least, physical health and life expectancy. Due to the far reaching impact of mental health, a wide range of partner organisations from the statutory and voluntary sector have participated in the development of the Bury Mental Health Strategy.
- 5.2.2 The strategy puts forward a broad ranging and ambitious agenda for improvement. To achieve it will **require the collaboration and commitment of a wide range of partner organisations**, as well as individuals, carers, families, employers, voluntary groups and communities. In Bury, we have already made progress in this area in recent years, going beyond the local Council and the NHS leading the way alone, with the growth of peer support in the voluntary sector. We need to further build on this.
- 5.2.3 In response, an action plan is currently being developed, jointly by the Bury Clinical Commissioning Group and Bury Council, with partners, to deliver the Bury Mental Health Strategy. The action plan will explain how we plan to achieve change, with specific actions and timescales from all partners.
- 5.2.4 The action plan will be monitored and owned by the Mental Health Steering Group. This body has been established for a number of years. The role and membership of the Steering Group is currently being reviewed in order to ensure that this body is fit for purpose to drive the changes identified in the action plan.

### **5.3 Data**

- 5.3.1 The strategy is informed by a significant amount of data, including estimates of the number of people in Bury with mental health conditions and projections outlining how this is likely to change in the future. It also includes a wide range of data on the wider determinants of mental health including, links with housing and homelessness; employment, income and benefits; crime; and drugs and alcohol.
- 5.3.2 Having more local data on mental health, including current and future needs, the performance of mental health services, and outcomes for patients would give us an enhanced understanding of the value we obtain from the services that are currently commissioned by Bury Council and NHS Bury. In turn, this would enable us to take more informed commissioning decisions in order to achieve maximum use of the resources available.

5.3.3 As a result, the strategy includes a **commitment to improving data on mental health** and briefly outlines how we achieve this. We will:

- (i) Obtain data from GP registers on the number of people with mental health conditions in Bury (broken down by condition, age, gender, ethnicity and geographical area). Work is already underway to gain this information.
- (ii) Obtain further performance data from providers of mental health services (broken down by age, gender, ethnicity and geographical area) to gain an enhanced understanding of the movement of patients through services.
- (iii) Create patient related outcomes indicators. These are performance indicators which will give us an understanding of how effective services are in treating patients.

5.3.4 In order to be used to best effect, the above information needs to be put into context. As a result, the strategy outlines the intention to develop a "pathway" for mental health (ie. a diagram outlining the flow of people / patients into and between services / support). The pathway will illustrate all mental health services in Bury (from first point of contact with a GP through to being admitted on a mental health hospital ward) and how they are connected.

5.3.5 Having this enhanced data and a clear pathway, will enable us to better understand both the movement of patients through services and the outcomes being achieved for patients. This will provide us with a better view of where services are effective or under-performing, and respond to this accordingly.

## 5.4 Resources

5.4.1 The combined total of funding for mental health services was £27.7 million in 2011-12 (of which 19% was Bury Council funding and 81% was NHS Bury funding). This level of spend has been approximately the same for the last three years.

5.4.2 It is important to note that the improvements outlined in the strategy will be delivered within existing or diminishing resources. This will be possible due to:

- (i) The **commitment of both Bury Council and NHS Bury to review the proportion of spend** on mental health services and target a proportion of funding from intensive support towards lower level services. This will ensure that more support is available in the community with the aim of preventing people from escalating in terms of mental health need.
- (ii) The nature of many of the actions for improvement which do not require additional investment. For example, the provision of better information about mental health and a change in the approach of mental health professionals towards service users. In addition, in the longer term, the provision of more lower level, preventative, services has the potential to generate efficiencies.

## **6.0 EQUALITY AND DIVERSITY**

- 6.1 The Equality Assessment for the Bury Mental Health Strategy outlines that strategy aims to improve mental health services for all residents in Bury, with a particular focus on those at a greater risk of having a mental health condition and those at higher risk of not having their condition detected.
- 6.2 The overall effect of the strategy, and the targeted work taking place as a result of it, will have a direct and positive impact on the vast majority of the groups with protected equality characteristics.

## **7.0 CONCLUSION AND RECOMMENDATIONS**

- 7.1 The Bury Mental Health Strategy 2013 – 2018 aims to improve the mental health and emotional wellbeing of our borough and meet the aims of the national mental health strategy. A detailed Action Plan is currently being developed to underpin the delivery of the strategy, which will be monitored by the Mental Health Steering Group.
- 7.2 Cabinet is recommended to:
- (i) Approve the Bury Mental Health Strategy 2013 -2018.
  - (ii) Note the commitment to develop an Action Plan to underpin the delivery of the strategy.
  - (iii) Note the commitment for the Mental Health Steering Group to be refreshed and reconvened in order to monitor the implementation of the Action Plan.

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### **List of Background Papers:-**

- Bury Mental Health Strategy 2013 – 2018
- Equality Analysis

### **Contact Details:-**

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