

Health and Scrutiny Committee

Parity of Esteem	Dr Jeff Schryer, Clinical Lead, MH
Dementia	Shirley Allen, Programme Manager Communities and Wellbeing
	Dr Jeff Schryer, Clinical Lead, MH
Children and Young People	Dr Cathy Fines, Clinical Lead, Maternity & Children
Suicide	Jon Hobday, Consultant in Public Health

**MH Investment Standard
Parity of Esteem
Dr Jeff Schryer**

What is Parity of Esteem between Physical and Mental Health?

“My family and I all have access to services which enable us to maintain both our mental and physical wellbeing.”

“If I become unwell I use services which assess and treat mental health disorders or conditions on a par with physical health illnesses.”

Why is it important?

- Mental illnesses are very common.
- Among people under 65, nearly half of all ill health is mental illness.
- Mental illness is generally more debilitating than most chronic physical conditions.
- Mental health problems impose a total economic and social cost of over £105bn a year.
- Yet, only a quarter of all those with mental illness such as depression are in treatment
- We tend to view physical and mental health treatment in separate silos in health services.
- People with poor physical health are at higher risk of mental health problems...
- ...and people with poor mental health are more likely to have poor physical health.

Overview

- Requirement for NHS (CCGs) to increase expenditure in Mental Health by at least same % as CCG overall growth.
- Aim is to ensure Mental Health services are not disadvantaged as a result of other competing pressures.
- Mental Health expenditure 16/17 c £31.5m.
- Bury CCG growth 17/18 2.01%; 18/19 1.99%.
- Planned investments in Children and Young People's Services (refreshing plan with stakeholders including Local Authority), investments in Learning Disabilities and Dementia, working with local providers to ensure patient safety and working with third sector to improve local services.

National Targets for Mental Health 2016/17

Access and waiting time standards for mental health services for:

- Early Intervention in Psychosis
- Talking Therapies – Healthy Minds/IAPTs:

Measure	Current Bury Performance vs Target
50% of people experiencing first episode of psychosis to access treatment within two weeks	Achieving
15% of people who have depression and/or anxiety disorders to receive psychological therapies	Achieving
75% of people with relevant conditions access talking therapies in six weeks	Achieving
95% of people with relevant conditions access talking therapies in 18 weeks	Achieving
Increase in the number of people with Long Term Conditions accessing talking therapies	Achieving
Recovery rate of 50% of patients completing a course of treatment in IAPT services	Achieving

Parity of Esteem between Physical and Mental Health

Recent investments include:

- Safer staffing on wards
- Early Intervention in Psychosis
- Acute Transformation pilot to support the crisis pathway and avoid hospital attendances and admissions. Includes:
 - Next day clinics staffed by RAID practitioners
 - Supported discharge team
 - Increase in capacity in the Home Treatment Team
 - 7 day Community Therapy Programme
 - Clozapine Initiation Clinic in the community
- RAID and Telephone Street Triage
- Community RAID pilot – working alongside social care at Textile House
- Healthy Minds – psychological therapies including for people with Long Term Conditions
- Big White Wall
- Mental Health Advice Line
- Self Management/Recovery College

Healthy lives strong communities

Parity of Esteem between Physical and Mental Health

Recent investments include (continued):

- Voluntary sector grants 15/16:
 - Streetwise 2000 – services for young people
 - ADAB – Dementia services for the BME community
 - Turning Point – Employment services
 - Making Space – Dementia services
 - Groundwork – Employment services
- Post-diagnostic Support for Children with ASD / ADHD (BPF)
- Voluntary sector grants 16/17:
 - Earlybreak
 - Homestart
 - ADAB – engagement with BAME communities on mental and physical health
- Eating Disorders

Dementia

Shirley Allen – Bury Council

Dr Jeff Schryer – Bury CCG

Policies as Drivers for Activity

Prime Ministers Challenge on Dementia 2020. The PM Challenge on Dementia 2020 Implementation Plan -the development of Dementia Friendly Communities is a key theme within the Implementation Plan.

The Greater Manchester plan for devolution '*Taking Charge of our Health and Social Care*',

Bury Council's *Vision, Purpose and Values 2015-2020*; and

Bury's Health and Well Being Strategy.

Dementia United – all 10 GM localities

The Health and Social Care Act 2014 places an emphasis on supporting individuals well being and preventing or delaying people's need for care and support and encouraging the development of self care.

Drivers for Activity

The drive and the challenge is around:

- Significant progress has been made over the last five years but there is still a lot of work to be done.
- To understand that it is more than health and social care services it is about wider community assets including leisure, housing, refuse services, the environment and all other services that impact upon a person's well being
- Outcome based, integrated commissioning
- Consistency of quality and sustainability
- Engagement and empowerment
- Users and carers being at the front of everything we do and being encouraged to take control of their lives and situations from a needs led perspective
- Mobilising wider community assets including housing, dentistry, pharmacies, GP's and other community health services
- Working in partnership with other commissioners to avoid duplication and to ensure that the service focuses upon needs and wherever possible to joint fund services to ensure that available money goes further in this time of austerity when every penny counts

Some Statistics

1773 people have received a diagnosis and forecast prevalence of people who may have dementia in Bury is 2041

Of people invited to an NHS health check by GP – 78.9% have received a health check and been provided with information about healthy lifestyles and risk reduction

Of 397 people referred for a dementia diagnosis in 2015 – 70% received a diagnosis and of these only 12 waited for longer than 6 weeks for their diagnosis.

There are 2554 registered dementia friends in Bury, 4 dementia friendly organisations and 50 dementia friends champions

Of people with a diagnosis – 362 are receiving home care, 383 are receiving care in a residential setting and 1032 are receiving neither.

Hospital admissions for people with dementia: 42.5% per 1000– best in class in GM, only 16.2% were re admitted to hospital – best in class GM. Length of stay 11.1 days per admission – some improvement required

Proportion of people with dementia who died in their usual place of residence – 73.87% - (not in hospital)

Introduction- Personal Approach

People with dementia have told us what is important to them. They want a society where they are able to say:

- I have personal choice and control over the decisions that affect me.
- I know that services are designed around me, my needs and my carer's needs.
- I have support that helps me live my life.
- I have the knowledge to get what I need.
- I live in an enabling and supportive environment where I feel valued and understood.
- I have a sense of belonging and of being a valued part of family, community and civic life.
- I am confident my end of life wishes will be respected. I can expect a good death.
- I know that there is research going on which will deliver a better life for people with dementia, and I know how I can contribute to it.

Key to this is:

A person centred approach should be at the heart of good dementia care as Dementia is everybody's responsibility.

Good Practice in Bury

- Dementia Friendly Communities
- Dementia Friends
- Dementia Action Alliance
- Dementia Friendly Environmental Improvements
- Information and Advice Offer
- Dementia Buddi Scheme
- Safe Places Scheme
- Peer Support groups
- Local Dementia network
- Redesigned cognitive impairment pathway
- Dementia Advisers Service

Update on Dementia Developments

Dr Jeff Schryer

New pathway developed 2014/15 and implemented 2015/16/17

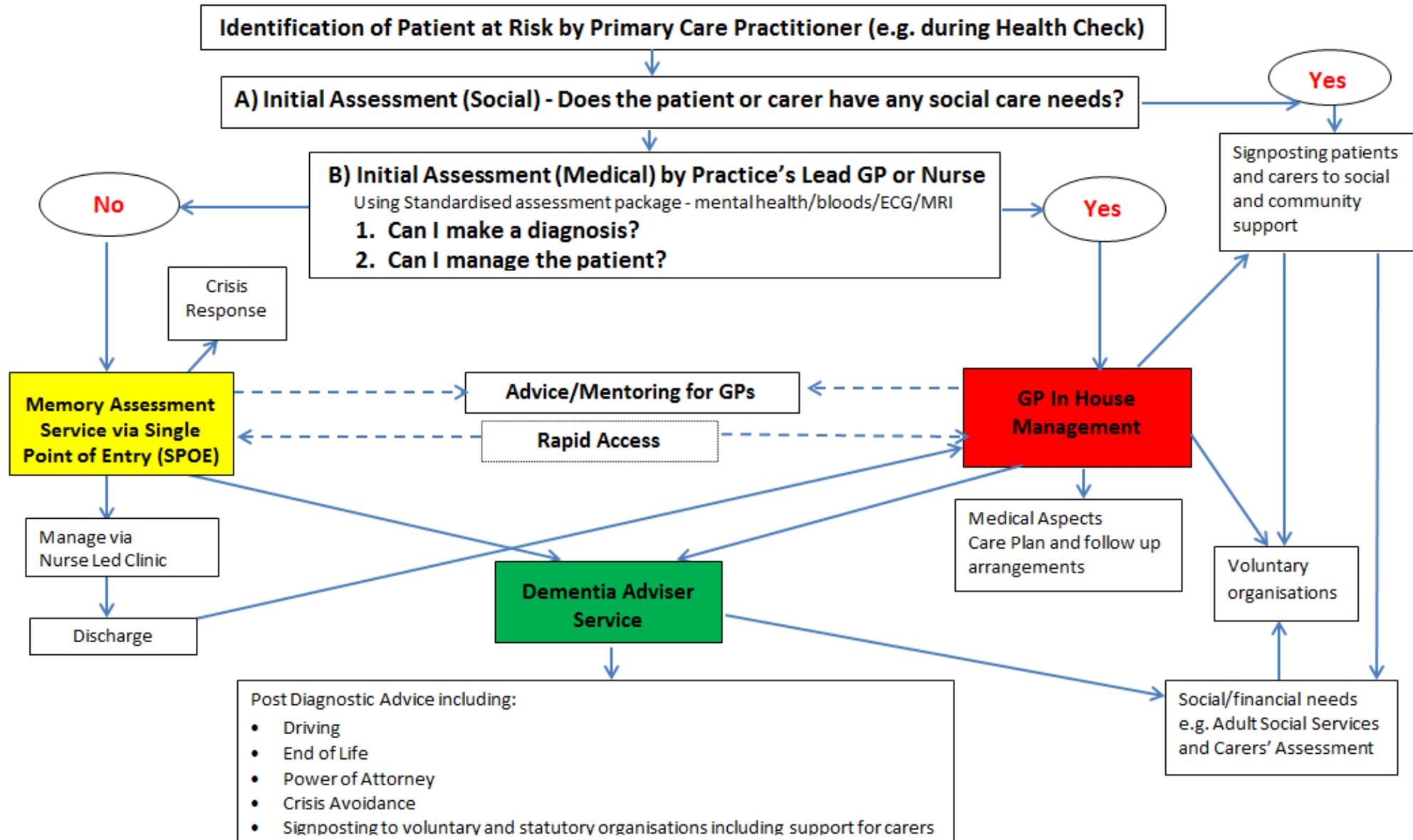
To assess, diagnose and manage 'non-complex' cognitive impairment/dementia in primary care without referral to the specialist Memory Assessment Service (MAS).

Primary care clinicians are expected to manage their patients along the whole pathway **in the same way as other long-term conditions.**

Objectives of new pathway

- Provide timelier, accurate diagnosis of dementia.
- Provide better clinical and post diagnostic support.
- Reduce number of referrals for diagnosis of dementia to the Memory Assessment Service (MAS).
- Enable the MAS to focus on care for people with complex dementia and on supporting practice clinicians who are uncertain about diagnosis or management.
- Improve the rate of diagnosis.
- Long term - reduce the number of hospital attendances for people with dementia in crisis, by providing improved post diagnostic support.

Dementia Diagnostic Pathway

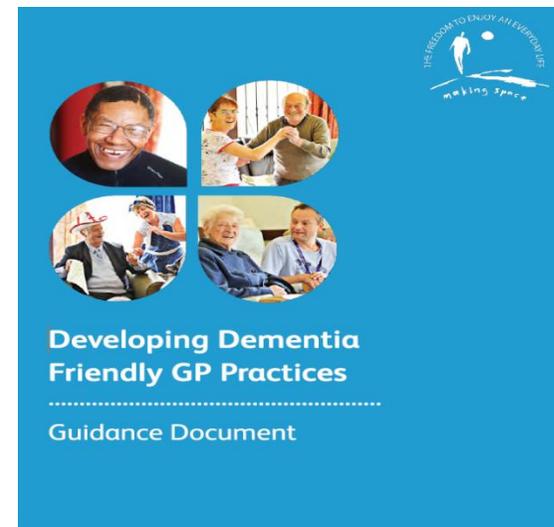
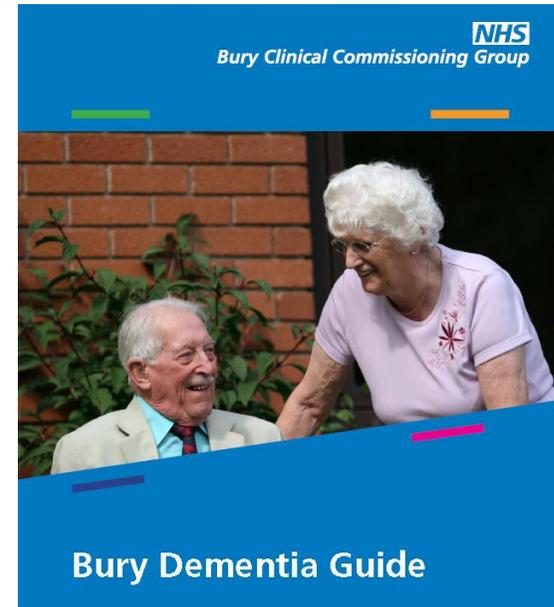


Key developments along the way include:

- Each practice appointed a named Dementia Clinical Lead (DCL)
- Comprehensive ongoing education programme for DCLs – led by consultants and other specialists including Dementia Adviser Service
- Template on clinical system guides clinicians
- Direct access to diagnostics

Key developments include (continued):

- Bury patient/carer information booklet developed and circulated.
- Recent education included practical session on using the Bury Directory.
- Making Space delivered in house education sessions in practices aimed at making all practices and their staff 'Dementia Friendly' and encouraging them to join the Dementia Action Alliance.
- Making Space have published and circulated a booklet to publicise this work locally and around the country.



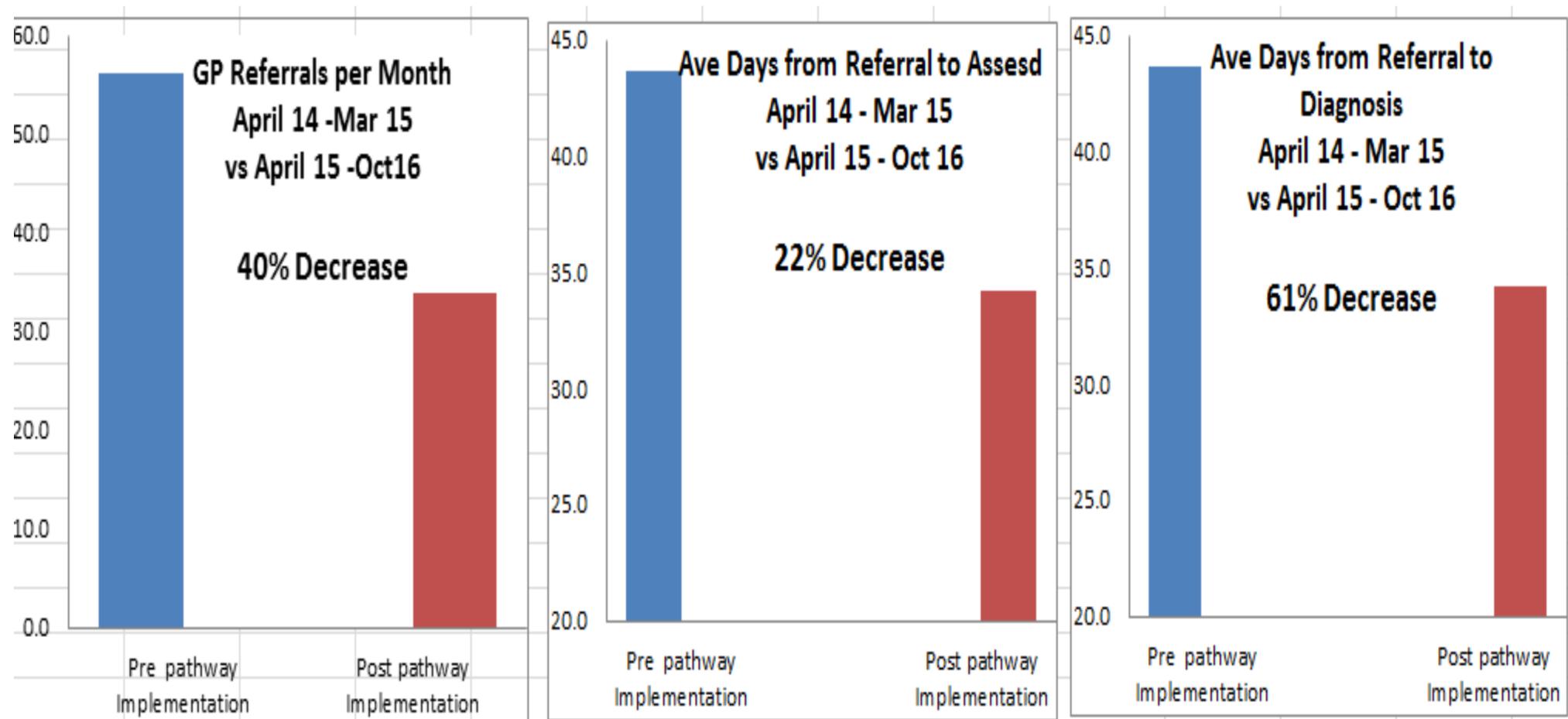
Evaluation - GPs' progress on implementation, confidence levels and experience

- 26/31 practices have implemented the pathway, more ready to go!
- Clinical leads report new pathway working well, patients more comfortable/with their GP, easier access, more holistic approach with continuity of care.
- Patients and relatives very receptive and prefer dealing with familiar venue/person.
- 18/21 questionnaire respondents felt either moderately or very confident about diagnosing dementia, and 21/ 21 were confident of managing people with 'non-complex' dementia.
- The education programme and mentoring from consultants was well received and a need to continue to educate practices identified.
- Some practices have developed their own systems and shared them with peers.
- The biggest challenge is time constraints.

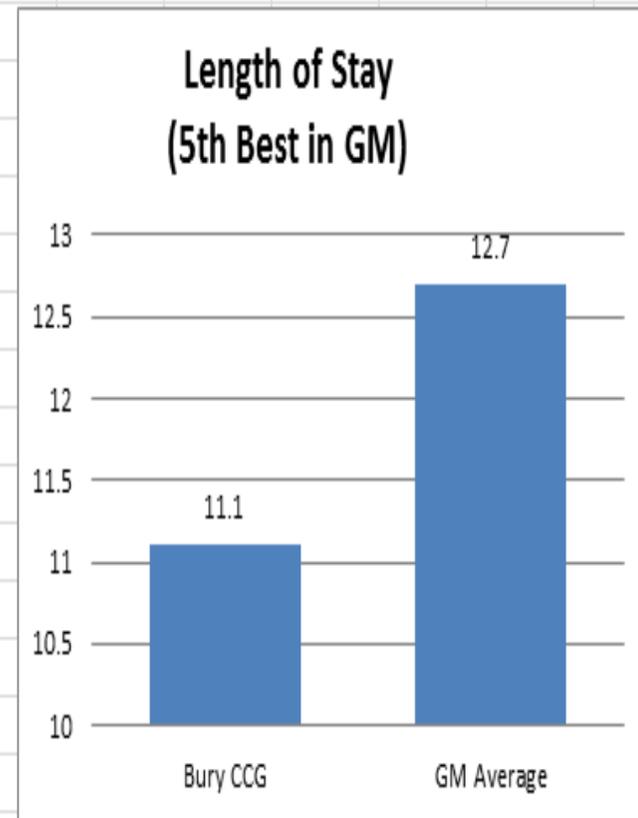
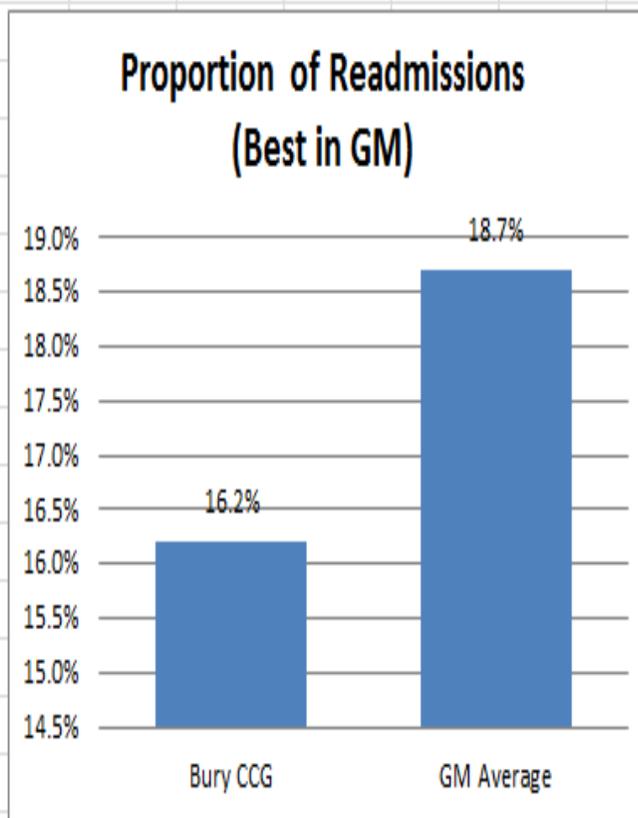
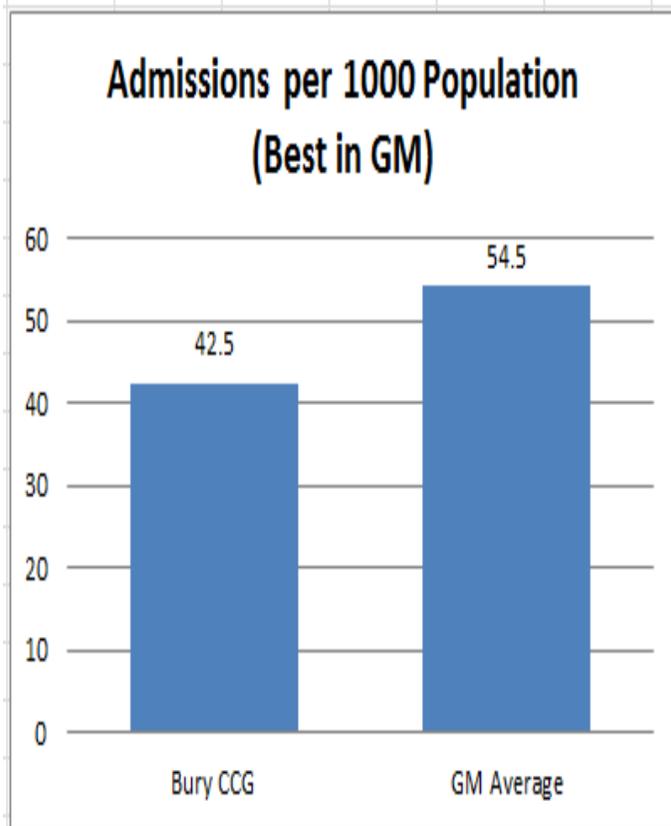
Evaluation – The views of service users and carers

- The majority of people seemed satisfied with the care received. Feedback included:
- ‘GP very supportive’, ‘GP very, very nice’, and two said how good it was to get a double appointment.
- ‘Impressed – quick diagnosis’.
- Most respondents had received the Bury Dementia Guide.
- Most respondents seemed to be satisfied - comments included ‘very pleased with service’.
- One said ‘there is nothing they can do’ and another said ‘they are getting the treatment she expects’.
- The lack of day care facilities was identified as a gap.

Impact of implementation of new pathway on Memory Assessment Service

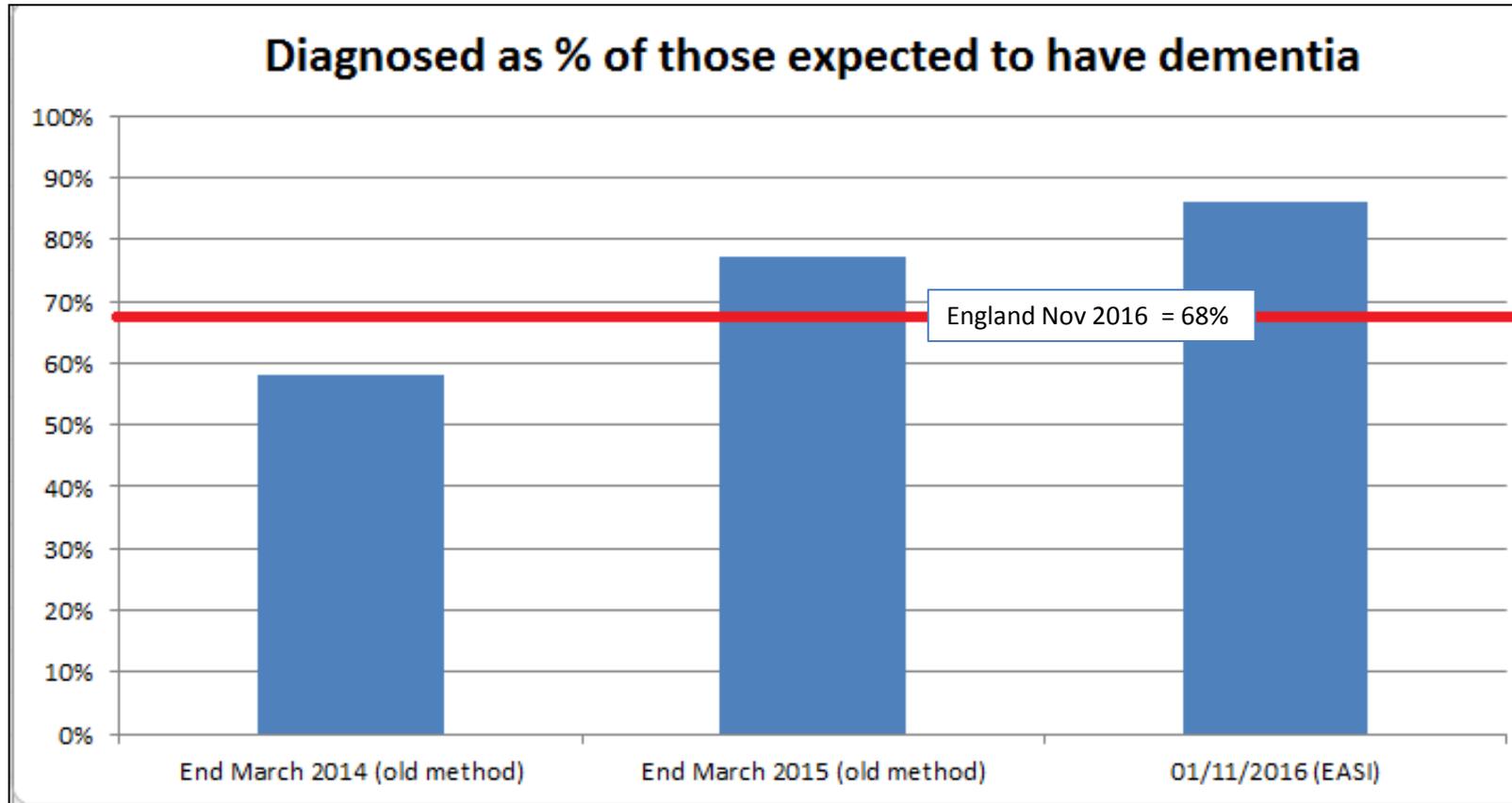


Impact of new pathway on admissions to hospital, readmissions and length of stay



Prevalence – November 2016

86% of people expected to have dementia diagnosed = 17th highest of 209 CCGs
This is a huge increase on March 2014 when 58% were diagnosed.



National 'Right Care' Dementia Atlas

Area	Measure	Bury	Best in England	Worst in England	Bury Better than Average Yes/No
Preventing	Smoking prevalence	18.9%	12.3%	27.1%	No
	Hypertension prevalence	13.4%	7.8%	18.4%	Yes
Diagnosing	Blood tests recorded in newly diagnosed	77.2%	67.3%	86.6%	Yes
	Dementia prevalence 65+ recorded	5.1%	5.6%	3.0%	Yes
	Dementia prevalence all ages recorded	0.9%	1.5%	0.3%	Yes
Supporting well	People using inpatient services as a ratio of recorded diagnosis	43.1%	16.3%	79.4%	Yes
	Emergency admissions rate per 100,000	3299	1840	6046	Yes
Living Well	Care reviewed in last 12 months	82.7%	85.8%	49.3%	Yes
Dying well	Rate of mortality aged 65+ with dementia recorded	967	441	1617	No
	Death in usual place of residence	73.9%	83.1%	33.9%	Yes

Source: Right Care Dementia Atlas

Current Position

- Dementia Clinical Leads in every practice
- 26 out of 31 practices participating in Local Commissioned Service in 2016/17 and more ready to go!
- Proposal to include in Primary Care Standards for 2017/18
- Continuing to provide education and quality assurance.
- Education for new leads planned for 2017/18.



Dementia Adviser Service

- The DAS is an integral part of the redesigned pathway
- Provides information covering diagnosis, signposting to available support, coping strategies and planning for the future for people with dementia and their carers
- Helps promote independence at home for older people
- Reduces service user/carer sense of isolation
- Helps to deliver reduction in GP appointments, A & E attendances, hospital admissions.

Next Steps for 2016/17 and 2017/18 onwards:

- Continue to evaluate and improve the new pathway using qualitative and quantitative data, including service user views.
- Opportunities for joint working practices across the voluntary sector, health and social care and embedding within Local Care Organisation development.
- Practices' role in supporting Bury becoming a 'Dementia Friendly' town.
- Review of post-diagnostic dementia care and support.
- Looking at ways of empowering service users and carers so they:
 - Are aware of existing local self help and support groups and events.
 - Know how to access and participate in existing self help/support groups/events.
 - Are encouraged to and able to set up their own support groups/events.
- Working with GM/Dementia United including mapping what's in place in Bury against the proposed Dementia United standards.
- Next stage - planning how to meet the standards in the longer term.

Dementia Awareness Raising

- The Dementia Friends initiative is a part of the creating Dementia Friendly Communities campaign which seeks to address one of the three challenges set out in the *Prime Minister's Challenge on Dementia*
- To increase awareness about dementia and how to support those living with dementia
- To reduce the stigma associated with dementia and;
- To allow people with dementia to be active and included as part of their community
- Dementia Friends is a national initiative that is being run by the Alzheimer's Society, funded by the government, and aims to improve people's understanding of dementia and its effects.
- A Dementia Friend is someone who attends a face to face friend's information session or someone who completes the e – learning modules and then turns their understanding into practical action.

Dementia Awareness Raising cont...

- Bury Council have made a commitment to become 'Dementia Aware' and 'Dementia Friendly' as an organisation and to ensure that our services can be responsive to the needs of people affected by dementia.
- Bury Council believe that the best way that this commitment can be achieved is through supporting staff to become more aware of the needs of people affected by dementia and to understand how often small changes in how services are delivered can make a massive difference to people affected by the condition
- The campaign to raise the Council's staff awareness of dementia takes a number of forms and consists of;
- E-learning – short modular videos which take a maximum of 20 minutes
- Face to Face awareness sessions for those in front line roles, to be identified by managers, to be delivered flexibly.

Dementia Friendly Communities

Drivers for the Project

- *Prime Ministers Challenge on Dementia 2020. The PM Challenge on Dementia 2020 Implementation Plan* -the development of Dementia Friendly Communities is a key theme within the Implementation Plan.
- The Greater Manchester plan for devolution '*Taking Charge of our Health and Social Care*',
- Bury Council's *Vision, Purpose and Values 2015-2020*; and Bury's *Health and Well Being Strategy*.
- *Dementia United – all 10 GM localities*
- The Health and Social Care Act 2014 places an emphasis on supporting individuals well being and preventing or delaying people's need for care and support and encouraging the development of self care.
- The Bury Building Dementia Friendly Communities project combines elements of all these and builds upon them to develop a model and approach that fits with the Bury context. The main objectives will be the same but the framework will be implemented in each locality according to the specific needs of individual localities.

Dementia Friendly Communities cont...

The Building Dementia Friendly Communities project is aligned through Dementia United to the National Health Service England Dementia Well Pathway which consists of five themes:

- Preventing Well
- Diagnosing Well
- Supporting Well
- Living Well
- Dying Well

In Bury we have added a sixth theme specifically relating to Carers as we understand and appreciate that without Carers who are healthy and able to carry on their caring responsibilities the financial burden will rise substantially as more people living with dementia will potentially end up in crisis, in hospital or in expensive long term residential settings.

Dementia Friendly Communities cont....

The project will:

- Foster a more collaborative approach to working with commissioners and providers as well as fostering collaboration between commissioners and providers across all sectors
- Ensure that people with dementia, their carers and families are fully engaged in the design and implementation of Dementia Friendly Communities in each of the localities
- Ensure that local business, schools and third sector organisations are fully engaged in the process of design and implementation
- Mean less duplication of services
- Develop appropriate data sharing and reduction of duplicate data recording
- Develop streamlined processes and defined pathways
- Mean that people living with dementia and their families and carers will be able to live well and carry on doing what they wish to do in their local communities
- Mean that local businesses will become dementia friendly
- Mean that dementia friendly services will be provided closer to home.

Dementia Friendly Communities cont....

Bury Strategic DFC will be made up of:

- Chair : Cabinet member Cllr Trevor Holt, Executive director, Dementia Action Alliance chair
- Architects, Planning, Libraries, Housing , Parks and Leisure, Social Care Practitioners, Workforce Development, IT and Assets, Environmental Health, Trading Standards and Employee Groups, Housing providers, Police, Bury CCG, Fire and Rescue
- Will look at how the council itself and council buildings can become more dementia friendly. This group will also look at how we influence external partners in other areas such as Building Homes for the Future, DF parks etc The group itself will be supported by the Dementia Project Lead and the group will define the priorities for the council going forward subject to relevant approvals.

Dementia Friendly Communities cont....

- One DFC in each township
- Members can be made up of anybody who lives, works or cares for somebody in the community

- Each area will:

Be made up of volunteers

Elect officers

Be supported by a project lead

Develop terms of reference

Decide priorities and work streams

Work to deliver priorities

Feedback good practice to Strategic DFC and other township DFC and to Dementia Action Alliance meetings

Dementia and Community Services

There are many good examples of community support for people living with dementia and their carers and families in Bury.

- Dementia Action Alliance
- Dementia Friendly Environmental Improvements
- Information and Advice Offer
- Dementia Buddi Scheme
- Safe Places Scheme
- Peer Support groups including dementia cafes
- Local Dementia network

Dementia and Community Services cont...

Dementia Action Alliance (DAA)

- Bury DAA has grown since it was officially formed in 2013.
- Currently has 51 members from a variety of sectors including supermarkets, banks , small businesses and providers.
- Meets 4 times a year and develops an annual action plan is linked closely into 'Building Dementia friendly Communities'

Dementia Champions Virtual Network

- Group is in place and network shares and disseminates information on new initiatives, policies and good practice from other areas.
- Nominated dementia champions from council services, external domiciliary and residential care providers, assessment and care management services, community services and health partners.

Dementia and Community Services

Making Space

- Has continued to run dementia cafes and pop up cafes throughout the borough , monthly cafes at Clarence Park, Moorside Library, Ramsbottom Centre, Tottington Library.
- Currently investigating funding for a new cafe in Radcliffe
- Runs a monthly Musical Melodies singing session at Whitefield Fire Station
- Runs Otago chair based exercise sessions weekly at the Green Clarence Park
- Runs weekly 50+ walking football sessions in partnership with Castle Leisure Centre
- Provides awareness sessions for GP practices
- Assists in supporting the Jinnah centre dementia cafe and assisted The Fed to restart their dementia cafe
- Has over 35 volunteers working with people with dementia
- Piloting the dementia buddi scheme with funding from P&CC grant for communities

Dementia and Community Services cont...

Bury Museum have been involved in a number of initiatives

- Working in partnership with National Museums Liverpool to deliver house of Memories
- Spaghetti Maze
- Storybox – Creative Cafe

Other activities

- Alzheimer's Society provides monthly Singing for the Brain sessions
- Bury Leisure provide support for people with dementia and their carers to access swimming sessions and are considering access to other leisure sessions

Dementia and Community Services cont...

Bury Carers Centre

- Offers specific drop in sessions for carers of people with dementia
- Provides targeted information for carers of people with dementia
- Developing improved referral pathways from GP's to the Carers Centre
- Safe Places Scheme has been developed for people with dementia and other vulnerable adults as safe havens for people in distress
- Improving access to information and advice on the Bury Directory for people with dementia and their carers

Dementia United Implementation Plan

- The plan provides an outline of how GM can support localities to deliver and meet GM standards
- Each element of the work programme will have a clear set of deliverables which will be mapped onto programme plan

4 Key Work Programmes

- Work programme 1 describes the delivery system within localities
- Work programme 2 describes the regional support architecture
- Work programme 3 describes the infrastructure for intelligence
- Work programme 4 focuses upon innovation research and evaluation

Work Programme 1

Each locality to:

- Appoint an Executive Lead for dementia with delegated responsibility from locality partnership to represent the locality
- Executive Lead will appoint a clinical lead and team from across the 'Well Pathway' to lead DU in the locality
- Each locality will agree a system of governance which connects the GM standards into the locality plan
- Each locality will use DU standards, locality profiles and DU dashboard to agree a local system to align with current service delivery
- Each locality will participate in developing peer review system and participate in their own and one other peer review
- Each locality will produce an annual dementia update (quality account)
- Localities to set up data collection systems to determine the 'lived experience' of people with dementia

THANK
YOU!



Children and Young People's Mental Health and Wellbeing Local Transformation Plan

Dr Cathy Fines

Children and Young People's Mental Health & Wellbeing - Local Transformation Plan

Key National Reports

- **The Five Year Forward View for Mental Health** - including specific focus on Children and Young People
- **Future in Mind** - Promoting, protecting and improving our children and young people's mental health and wellbeing

Findings Included

- 1 in 10 children aged 5-16 have a diagnosable mental health condition - only a fraction of those receive *adequate evidence-based* support. Negative impacts can include:
 - double the chance of leaving school with no qualifications,
 - triple the chance of becoming a teenage parent,
 - four times the likelihood of becoming dependent on drugs and,
 - 20 more times likely to end up in prison.

Children and Young People's Mental Health – Local Transformation Plan

Key recommendations for transformation of services included, by 2020/21:

1. Significant expansion in access to high-quality mental health care for children and young people (CYP)
2. Evidence-based community eating disorder services for CYP in all areas.
3. In-patient stays for CYP will only take place:
 - Where clinically appropriate
 - Minimum possible length of stay
 - As close to home as possible to avoid inappropriate out of area placements
4. Increased access to specialist perinatal mental health support.

In addition:

5. CYP will have access to crisis resolution and mental health liaison services – avoiding and reducing impact of often harmful and inappropriate A&E attendances and inpatient admissions.
6. To do this, significant expansion of the workforce including therapists and supervisors.

Children and Young People's Mental Health - Local Transformation Plan

Bury Local Transformation Plan

Bury's local transformation plan was published in November 2015 - details the local strategy to meet these objectives and improve health and wellbeing outcomes for our children and young people. Since then, we have:

1. Commissioned a new community eating disorder service, which will soon operate from Bury town centre.
2. Developed and recruited to a new 'link worker' role within the Healthy Young Minds Team. The two link workers provide mental health advice, guidance and support for schools and other services – better enabling prevention and early help.
3. Implemented the Single Point of Access.
4. Begun co-working within the new Neighbourhood Hubs.
5. Commissioned specific support from local 3rd Sector organisations including Early Break and Homestart.
6. Significantly reduced waiting times for Healthy Young Minds (CAMHS).
7. Continued to work closely with GM colleagues to develop crisis resolution and liaison services.

Children and Young People's Mental Health - Local Transformation Plan

Refresh of the plan

- Current plan to be refreshed and republished by end of March 2017.
- Prioritisation workshop held in early January. Local identified priorities included:
 - Transition – between children and young people and adult services as well as key transition points such as move to secondary school
 - Workforce development
 - Early help/prevention and strengthening links with schools
 - Perinatal Mental Health.
 - Improving access to effective support – with a focus on age 16-18
 - Scoping of need for vulnerable groups.
 - Accountability and transparency – development of local Healthy Young Minds dashboard.
- Supplementary priorities around: Communications and awareness of existing services; suicide awareness training.

Any questions?