

Meeting date: 9 November 2022

Report to: Health and Adult Social Care and Children's Services, Education and Skills Scrutiny Boards

Report title: Solihull Mental Health Delivery Plan

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Wards affected:

- All Wards | Bickenhill | Blythe | Castle Bromwich | Chelmsley Wood | Dorridge/Hockley Heath | Elmdon | Kingshurst/Fordbridge | Knowle | Lyndon | Meriden | Olton | Shirley East | Shirley South | Shirley West | Silhill | Smith's Wood | St Alphege
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Public/private report: Public

1. Executive Summary

- 1.1 The purpose of this report is to provide Scrutiny Board with details of the Solihull Mental Health Delivery Plan for comment.
- 1.2 The plan has been developed from a number of existing strategies and plans that are in place for BSOL, but outlines priorities and actions that are specific to Solihull, enabling a focus on the needs of people in the borough.

2. Decision(s) Recommended

- 2.1 That the progress on the development of the plan be noted
- 2.2 That Scrutiny Boards offers comments on the draft plan and proposed next steps

Report Title: Solihull Mental Health Delivery Plan

1. Matters for Consideration

1.1 Background

1.1.1 Good mental health is at the heart of everything we do. The environment we live in, the jobs that we do, the social connections we have with friends, family and neighbours all affects mental health. Stressful living and working conditions, financial pressures, social isolation and negative life events can all have a negative impact on mental health. And with the impact of covid-19 and increasing cost of living pressures we are seeing more mental health issues than ever before, with widening inequalities. Together with a growing awareness of mental health, our services are in ever increasing demand.

1.1.2 Solihull has developed a new Mental Health Delivery Plan for the borough. This outlines the strategic priorities and actions that partners from the local authority, health, the voluntary and community sector will take to improve mental health outcomes for children, young people and adults in Solihull.

1.1.3 Since the previous 2015-2020 Solihull Mental Health Strategy was published, a number of other strategies and plans have been developed by partners across Birmingham and Solihull.

These are:

- Birmingham and Solihull Strategic Outcomes Framework, based on the NHS Long Term Plan (Mental Health)
- The BSOL Mental Health Community Transformation Plan
- Birmingham and Solihull Mental Health Foundation Trust's Five Year Strategy (Clinical Services Strategy) 2021
- Solihull Children and Young People's Local Transformation Plan 2021-22
- Solihull Health and Wellbeing Strategy 2019-2023
- Solihull Health Inequalities Strategy
- Solihull Suicide Prevention Strategy

1.1.4 The new Mental Health Delivery Plan sets out in once place the priorities and key actions from these existing strategies and plans. The purpose of this plan is to clarify the priorities that our integrated care system, at place, can deliver to improve mental health and well-being. These include building positive mental health to improving crisis intervention at all stages of people's lives.

1.1.5 The plan on a page below outlines the strategic priorities and key actions.

Aim: To promote good mental health and wellbeing through joined up health and care, where people can access the right help and support as quickly as possible.

Strategic Priorities	Key Actions
1. Strengthen positive mental health and wellbeing and act early to prevent mental health conditions	Increase activities and approaches to encourage and support people to be mentally healthy
2. Improve access to services for people with mental health needs in primary care settings	Transform community-based mental health services to improve access to MH and ensure people can move more easily between services
3. Develop a 0-25 mental health offer	Extend the breadth of services from prevention to crisis for all children and young people, including 18-25 year olds, with a focus on transition to adult services, and support for young people with additional vulnerabilities
4. Increase and improve access to maternity and parenting support	Improve access to parenting support and perinatal mental health, and ensure workforce are able to identify and signpost appropriately
5. Increase and improve crisis support	Work with community transformation programme to reduce need for crisis support, enhance access through response vehicles, training and ensuring treatment is provided as close to home as possible
6. Increase and improve support for rehabilitation	Enhance the support available in Solihull and work with housing providers to ensure sufficient housing with support is available.

Enablers: Population Health Management; Engagement and involvement of people in Solihull; Digital; Provider collaborative

1.1.6 Measures of Success

Our overarching aim for our Solihull Mental Health Delivery Plan is that **‘More people have good mental health’**. For the purposes of monitoring progress towards this, we have a number of population level metrics in place. These are:

- Emotional wellbeing of young people measured through the Health Related Behaviour Questionnaire (HRBQ) (next one due 2024) undertaken in schools.
- Suicide rates
- Public Health Outcome Framework indicators;
 - % school pupils with social, emotional and mental health needs
 - % of hospital admissions for MH conditions <18yrs
 - Estimated prevalence of common mental health disorders
 - % of population aged 16+
 - % of population aged 65+
- Citizen reported measures through the ONS life satisfaction score 'overall, how satisfied are you with your life nowadays'

These will continue to be reviewed and enhanced as the Mental Health Provider Collaborative become more established.

In addition, all of our priorities have their own ways of monitoring and measuring performance and these metrics are overseen by various strategic and operational boards.

1.2 Oversight and Governance

1.2.1 Two delivery groups (one for adults and one for children and young people) will oversee delivery of the plan and monitor progress and impact. Both groups are multi-agency and include health, local authority, service user and voluntary and community sector representatives. Mental health is one of the key priorities within the Solihull Together portfolio of work and progress will be reported regularly to ST, the new Place Committee and the Health and Wellbeing Board.

1.3 Next steps

1.3.1 To enable people's care to be more joined up we need to develop and create the conditions for decisions to be made collectively and co-operatively between citizens and professionals and between different organisations and agencies. The creation of a Mental Health Provider Collaborative will be an important part of this work. Subject to a robust assurance process, Birmingham and Solihull Mental Health Foundation Trust will take the role of 'lead provider' and be responsible for the commissioning and planning of NHS funded mental health provision and integrating services by working collaboratively with SMBC and with other NHS and third sector organisations

1.3.2 The collaborative will take responsibility for the following;

- **Delivery** – implementation of the plan;
- **Population Health Management** – utilising shared data from partners to understand the needs of people in Solihull, responding to this by improving plans to develop services that meet need, and for those most in need of support, and developing a needs profile so that we have the data we require to provide the right services and continually evaluate them;
- **Engagement and ongoing involvement** of people living and working in Solihull – working with the VCSE sector to capture and utilise their knowledge of what communities want, and value the things that support good mental health; utilising existing and creating new opportunities to engage and involve parents, carers, and people who use services or have lived experience, including young people in the ongoing monitoring of this plan; and working with Healthwatch to capture feedback from service users and non-users to understand needs;
- **Digital** - ensuring services are available digitally where appropriate to improve access and clarifying digital good practice and requirements to ensure all MH services are operating in line with the ICS Digital Strategy;
- **Communication and information** – ensuring joined up information is available to the public about our mental health offer and the services available.

2. Implications and Considerations

2.1 State how the proposals in this report contribute to the priorities in the [Council Plan](#):

Priority:	Contribution:
<p>People and Communities:</p> <ol style="list-style-type: none"> 1. Improving outcomes for children and young people in Solihull. 2. Good quality, responsive, and dignified care and support for Adults in Solihull when they need it. 3. Take action to improve life chances and health outcomes in our most disadvantaged communities. 4. Enable communities to thrive. 	<p>Improvements in services and access to mental health support for all people in Solihull, from prevention to crisis support.</p> <p>Each priority includes actions to reduce health inequalities and inequalities in access.</p>
<p>Economy:</p> <ol style="list-style-type: none"> 5. Develop and promote the borough's economy, with a focus on revitalising our town and local centres. 6. Maximising the opportunities of UK Central and HS2. 7. Increase the supply of affordable and social housing that is environmentally sustainable. 	<p>Good mental health improves life chances, and maximises opportunities to participate in employment</p>
<p>Environment:</p> <ol style="list-style-type: none"> 8. Enhance our natural environment, improve air quality and reduce net carbon emissions. 	<p>Not applicable</p>
<ol style="list-style-type: none"> 9. Promote employee wellbeing 	<p>Mental health support is relevant to all people who live and work in Solihull.</p>

2.2 Consultation and Scrutiny:

2.2.1 Existing strategies and plans have been developed from both national directives and local priorities. They are evidence based and have already had extensive involvement of service users in development. This included:

- Birmingham and Solihull Mental Health Trust – consultation with staff and service users to develop their strategies and plans;
- The ICB (previously the CCG), worked with service users and people with lived experience to develop a model of co-production which enables full involvement in the design, delivery and evaluation of all commissioned services;
- The ongoing involvement of children, young people and parents/carers through work of commissioned providers and attendance at meetings;

- People with lived experience are members of the our two delivery boards (one focusing on adults and the other on children and young people), both of which supported the development of these strategies.

2.2.1 Although it is not proposed to carry out a full public consultation on the Delivery Plan as it builds on existing consultation feedback, wider engagement in the new plan is currently taking place.

2.2.2 Following support and advice from Healthwatch Solihull, we have developed a summary of the plan to enable people to understand the actions we are planning to take, giving them the opportunity to provide feedback on the plan, identify any gaps and provide guidance on delivery elements. We are currently liaising with services users through;

- Solihull Parent and Carers Voice
- Urban Heard (Youth engagement)
- Local headteachers
- Experts by Experience and service user groups through commissioned providers

2.2.3 There is also agreement that we need to build an infrastructure for continuous co production, involvement and listening in the delivery and monitoring of the plan, which the provider collaborative will develop. This is a key enabler in our plan and will include working with the voluntary sector to capture their local intelligence and engage and involve people who have lived experience. We will also work with Healthwatch to ensure that the feedback they receive for service users and non-service users informs developments.

2.3 Financial implications:

2.3.1 Delivery of the plan depends on ongoing funding through existing sources. No new funding is being requested as much of the work is through the transformation of services for example, transformation funding via the Long Term Plan. However, new funding such as national funding for family hubs will support some of these developments.

2.4 Equality implications:

2.4.1 The priorities in our plan focus on addressing inequalities in terms of access and outcomes and therefore supports the broader objectives of Solihull's Health Inequality Strategy and Health and Well-being Strategy.

2.4.2 This includes targeting those who may be more vulnerable, making adaptations to suit the needs of different communities and providing specialist support for vulnerable young people e.g. care leavers. The plan also considers how different plans align, for example, ensuring mental health plans align with the all age Learning Disability and Autism Strategy, as well as a focus on improving awareness of difficulties in access for particular groups (eg younger parents and people from different ethnic backgrounds). In addition, there is attention given to ensuring higher need services, such as crisis support are available in Solihull as well as Birmingham, to ensure care can be provided as close to home as possible.

3. List of appendices referred to

Solihull Mental Health Delivery Plan

Solihull Mental Health Delivery Plan Summary

4. List of Other Relevant Documents

- Birmingham and Solihull Strategic Outcomes Framework, based on the NHS Long Term Plan (Mental Health)
- The BSOL Mental Health Community Transformation Plan
- Birmingham and Solihull Mental Health Foundation Trust's Five Year Strategy (Clinical Services Strategy) 2021
- Solihull Children and Young People's Local Transformation Plan 2021-22
- Solihull Health and Wellbeing Strategy 2019- 2023
- Solihull Health Inequalities Strategy
- Solihull Suicide Prevention Strategy (draft)
- All Age Learning Disability and Autism Strategy