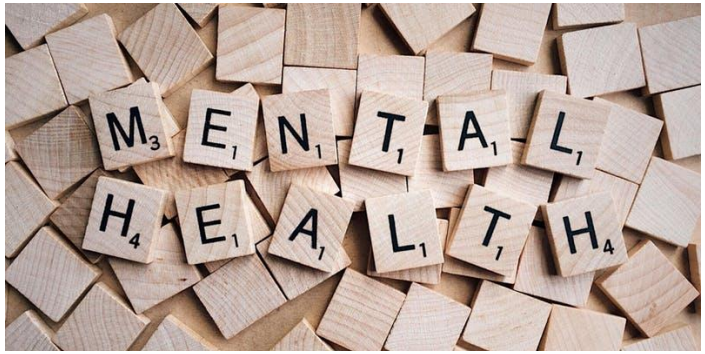
NHS Croydon Clinical Commissioning Group

NHS South London and Maudsley NHS Foundation Trust

healthwatch Croydon



Adult Mental Health

Meet the changemakers… and get involved

18 July 2018

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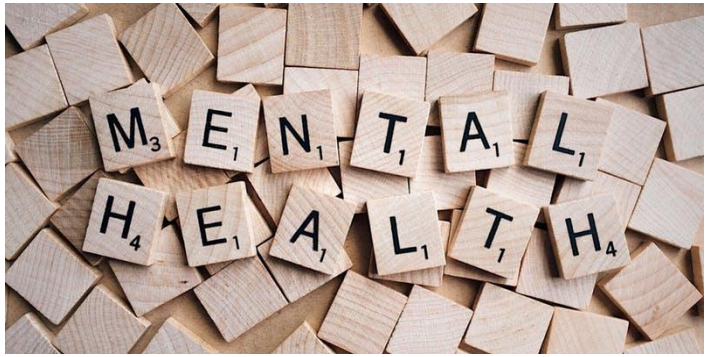

Welcome

Gordon Kay

Healthwatch Croydon Manager

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Introduction

Dr Agnelo Fernandes

Clinical Chair, NHS Croydon CCG

Longer, healthier lives for
all the people in Croydon

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In 2016 there were

382,300 people in Croydon

This is the 2nd highest in London

Source: 2016, Mid Year Population Estimates, ONS

By 2031 there will be

434,448 people in Croydon

a 12% increase in the next 15 years

Source: 2016 Round SHLAA based projections, GLA

Source: Census 2011, ONS

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94,434 0 to17 year olds

237,663 18 to 64 year olds

50,206 Aged 65 and over

Croydon has one of the largest populations of all the London boroughs

Longer, healthier lives for all the people in Croydon

- 47,978 Adults have a common mental health problem at any one time
- 4,506 People diagnosed with Severe Mental Illness

- Over half of Croydon's population are from Black, Asian and minority ethnic groups, and the proportion is increasing over time.
- Croydon has 6,000 to 7,000 new immigrants from outside the UK per year and at least 3,000 emigrants
- 2,285 Croydon residents are recorded as homeless or in temporary accommodation
- Croydon is more deprived in the north of the borough than in the south. Many of the risk factors for poor physical and mental health are associated with deprivation
- It's estimated 10,041 older people are lonely and 5,522 experiencing intense Loneliness; 17,227 residents aged 18-64 are estimated to be socially isolated

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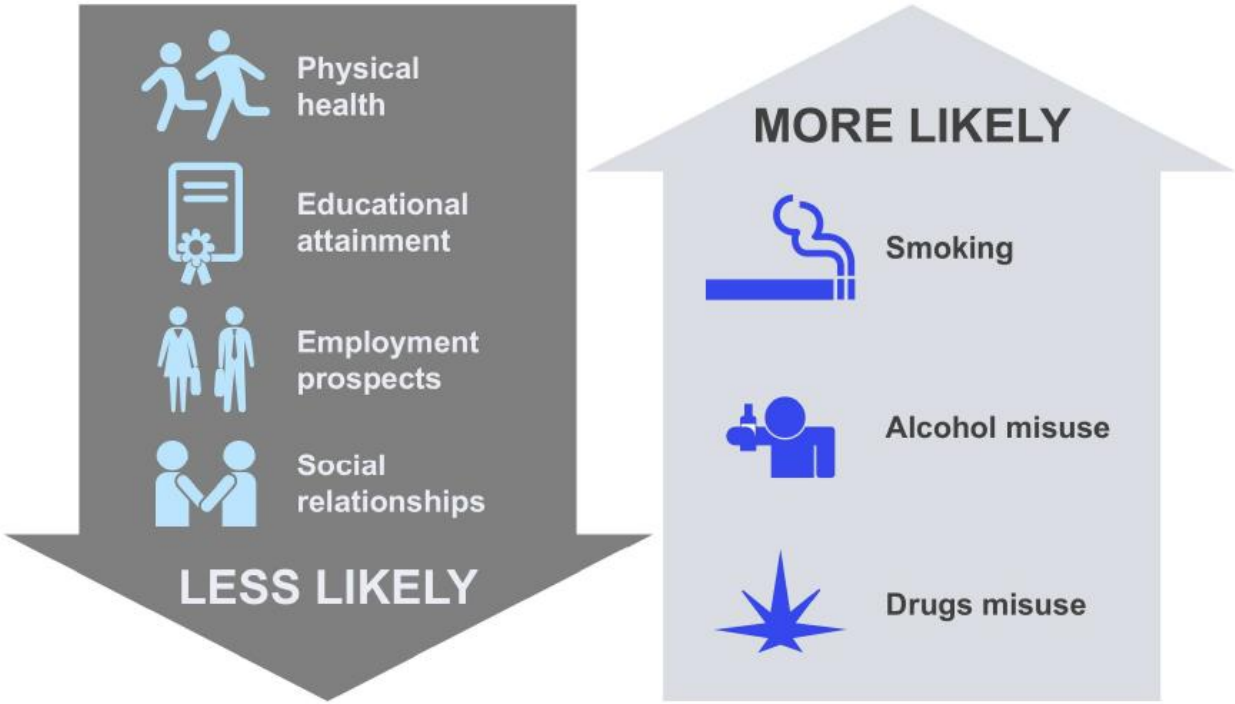
Mental ill-health increases risk of other illnesses and risky behaviour



New models of care and priorities for the next five years and beyond

- Croydon is on a journey to sustainably transform health and care services in the borough
- Initial discussions have been held with our partners to develop our vision, current plans and gaps in the system
- Today's event is an opportunity to share and discuss these plans with you. We would like your feedback to help develop the plans.

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We need help in making services better to help our diverse communities

- We need people with lived experience to share their knowledge to make services more accessible and culturally appropriate
- Identifying barriers to accessing mental health services; to improve and develop effective care pathways in community and statutory services
- Raising mental health awareness through the promotion of social inclusion and positive well-being
- Challenging the stigma of BME mental health amongst statutory, voluntary and community sectors
- Making opportunities to create timely needs assessments with BME communities to identify gaps in service provision

Croydon's vision for mental health services

Our plans need to focus on supporting local people to:

- live longer, healthier lives
- make healthier choices
- look after themselves and those they care for
- access high quality, joined-up physical and mental health and care services when they need them
- have better health and care outcomes
- be happy with the care they receive

Croydon's vision for mental health services

We want services in Croydon to:

- focus more on preventing people from becoming unwell in the first place
- be centered around the individual, easy to navigate and joined up
- provide more care in general practice and in the community to reduce pressure on Croydon Health Services
- keep people out of hospital and support them to go home when they are well enough
- be affordable within the budget available to us

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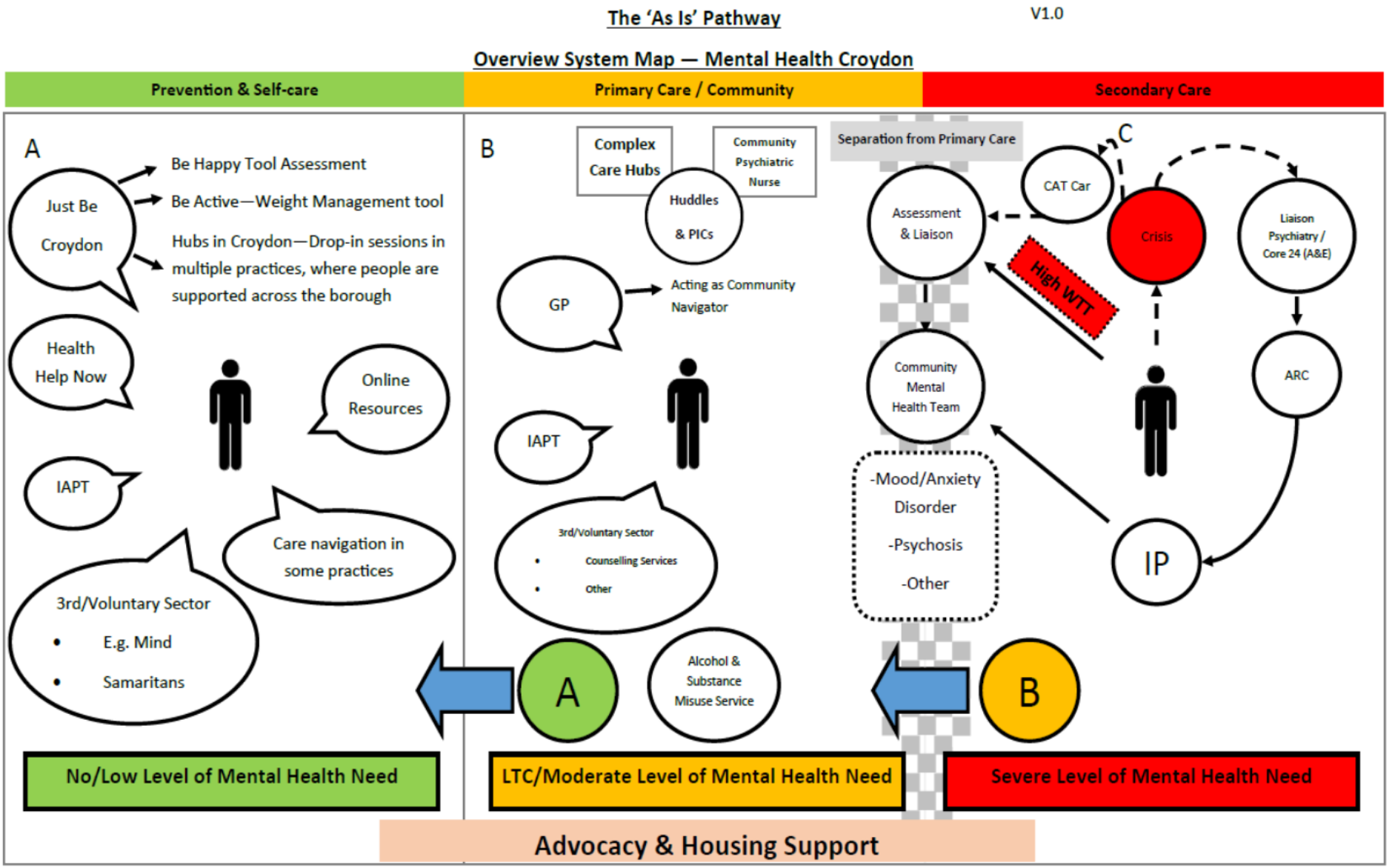
Overview of the current system

Marlon Brown

Head of Mental Health Commissioning

Longer, healthier lives for
all the people in Croydon

Current System: The 'As Is' Pathway Map



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Feedback - Issues and gaps

- Lack of awareness of existing services
- Croydon Talking Therapy
  - Low referrals
- Voluntary/Third sector counselling:
  - not all free to access
  - accessed more by those with higher mental health need
  - Capacity and waiting times issues
  - Oversubscribed Welfare Benefit support services
  - High demand from asylum seekers and migrants
  - Waiting times for bereavement and trauma counselling
- Personal motivation required to manage long term conditions, requires encouragement and support
- High waiting times for assessment and liaison
- High A&E attendance
- Lack of housing options, the demand does not meet supply. Gap in short and long term solutions.
- Increase in homelessness
- Lack of crisis support
- Lack of capacity for GPs
- BME access and over representation in admissions
- Dual diagnosis mental health and substance misuse

2018/19 CCG and SLaM Initiatives

- Continuing work on reducing outpatient bed days, OBDs, working with SLaM, housing services and providers
- Review of primary and community care pathways
- Crisis Action Team, CAT, diversion scheme
- Core 24 service
- SEL and Croydon Mental Health Task and Finish Group

Transformation Programme: Mental Health

1 – 2 Year Plans

The 4 Identified Priority Areas

Apr 2019 to Mar 2021

Connecting Communities

- Stocktake of services and support options currently available
- Improve awareness of what is available to patients, public and health professionals
- Enable Social Prescribing
- Address capacity issues in community and voluntary sector. Needs to be considered as part of a wider pathway review.
- Promote use of a Directory of Services (e.g. Mind Services Directory)
- Ensure people are connected/activated and that they are supported to remain so
- Galvanise communities
- Explore opportunities for MH Awareness training
- Consider PICS support options

Enhanced Primary Care

- Speedy telephone advice needs to be available to GPs from SLaM Clinicians, which will increase opportunities for managing MH needs in Primary Care
- Primary Care MH Support Workers to provide additional support/capacity for GPs
- Post discharge support is vital and can provide a means for escalating needs that may arise that may lead to crisis if unchecked
- Upskilling & training in MH opportunities for GPs & practice staff
- Tackle the stigma of MH care.
- Consider strategies to address recruitment and retention issues in the borough

Community MH Hubs

- The current Assessment & Liaison service is struggling with demand. The current A&L caseload is not limited to MH issues
- There would be benefit in considering Hub options, which could be across 1 or multiple locations in the borough for improved coverage
- Consider widening the range of support services within the Hub, which could include a wide range of staff, including support for housing issues.
- The solution has to be affordable, practical and sustainable
- The new service must be linked with ICNs and other existing services – it is critical it's an integrated service
- There needs to be adequate sign-posting and personalised support when required in order to ensure that care is progressed

Integrated Housing

- There are a lack of housing support options in the borough, for both short & long term solutions.
- There are barriers and interdependencies that affect the effective discharge of patients from secondary care
- Increase access to Mental Health beds
- There are initiatives that are taking place to try to create new solutions to the housing problem. The Shared Lives Scheme is one example.
- Progress the development of enhanced care plans for individuals to promote more robust support to prevent relapse
- Do something different – Crisis Plan
- Build community a response to prevent Crisis and increase housing options.

Transformation Programme: Mental Health

3 – 5 Year Plans

Population Segment Programmes

Apr 2021 to Mar 2024

Well

- Advice & support about health and well-being is easy to access
- Non health agencies & organisations actively contribute to enabling resilience
- Social marketing in Croydon delivers key messages such as “five ways to well being”
- Schools, Community advisors and employment advisors understand their role in promoting emotional resilience
- Stress is reduced through good quality debt advice/welfare benefits advice/food banks etc
- Integrated, borough-wide model of care across ALL providers
- Responsible employers – spotting signs of poor MH and directing to occupational Health

Managing Well

- We enable GPs to be confident in providing support for patients with existing MH conditions & those stepping down from acute care
- New models of care and enhancements in primary care planning are embedded to reduce deterioration in conditions
- We ensure patients are able to identify signs of deterioration and access support easily and promptly
- We enable well developed relationships between the different providers of mental health services in Croydon and ensure accurate information about them is available and easy to use
- Patients have care plans and crisis plans that they help create which provide a range of appropriate & effective options.
- Care is provided closer to home

Vulnerable

- Health and social care system picks up & responds to early warning signs of health deterioration & other problems promptly reducing the incidence of crises
- “Floating” support proves housing support alongside health care.
- Patient records are shared to enable continuity with GPs and a personalised approach.
- Support is available to patients 24/7
- Proactive reviews are held to prevent crisis- improved early warning
- Effective mechanisms are established which allow all, including voluntary & housing sectors to report concerns easily.

Cross cutting

- Homelessness is reduced & access to appropriate local housing is increased
- Good quality debt advice/welfare benefits advice is easy to access
- We are able to keep patients in work, in health, in their homes & in relationships
- Patients’ contact card directs them to appropriate services & early intervention.
- Successful transitions between CAMHS and Adult services