



Mental Health Summit Update Report

Friday 23rd November 2018

Presented by: Assistant Director of Health Integration

Summary:

The purpose of this report is to provide an update to the Health and Wellbeing Board following the Mental Health Summit the Board hosted on 30th May 2018.

Which of the themes and/or enablers in the North Yorkshire Joint Health & Wellbeing Strategy are addressed in this paper?

[Please tick as appropriate]

Themes	✓
Connected Communities	✓
Start Well	✓
Live Well	✓
Age Well	✓
Dying Well	✓
Enablers	
A new relationship with people using services	✓
Workforce	✓
Technology	✓
Economic Prosperity	✓

How does this paper fit with other strategies and plans in place in North Yorkshire?

Mental Health and Wellbeing is a key priority for action in the North Yorkshire Health and Wellbeing Strategy.

What do you want the Health & Wellbeing Board to do as a result of this paper?

That the Health and Wellbeing Board discuss and note the full summary report of the Mental Health Summit and associated action plan.



Mental Health Moving in the Right Direction

Summit Report

#MHRD

INTRODUCTION

This report summarises the key issues, ideas and themes generated during the Health and Wellbeing Board Mental Health Summit – ‘Mental Health Moving in the Right Direction #MHRD’ on 30th May 2018.

This Summit was to recognise that mental health is one of the biggest health issues facing the people of North Yorkshire and to promote understanding and greater awareness. It was also the first time the Health and Wellbeing Board, members of the public and leaders from the public, private and community sectors had come together, to identify what could be done together to tackle mental ill-health and to improve outcomes.

THE SUMMIT

The Summit brought together almost 100 people for a full day, to focus on mental health and wellbeing across North Yorkshire. This included people working in statutory, community and voluntary sector agencies, as well as people accessing services or with a special interest in mental health.

Participants in the Summit heard from a wide range of speakers during the morning including:

- Rob Webster, Chief Executive from South West Yorkshire Partnership NHS Trust
- Alison Iliff, Health and Wellbeing Programme Manager, Public Health England
- Eden-Maia Shackleton and Jazz Parkinson, North Yorkshire, Youth Voice Executive
- Gareth Atkinson, North Yorkshire County Council

They shared the following insights:

Shared vision: we are
a guest in people's
lives

It's ok not to be
ok

Services need to be
underpinned by
strong values to
support people to
reach their
potential and live
well in communities

Leading from
Every seat

Structure last,
people first

Mutual accountability
and improvement

Aligned shared ambition
between partners

Focus on people and
place

Collaboration

1 in 10 children experience a
mental health problem

1 in 5 adults has considered
taking their life at one point

Good mental health is a vital asset for
dealing with the different **stresses**
(physical and mental) and problems in life

Mental illness means
– your life chances
are poorer, your
potential is wasted
and you will die much
sooner than others –

Put people first and
in the centre and
know that families
and carers matter

Youth Voice

Youth Parliament

1 in 6 adults have had a common mental health problem in the last week

9 in 10 people with mental health problems experience stigma and discrimination

Good mental health is associated with better **physical health, increased productivity** in education and at work and **better relationships** at home and in our community

Consider **How** to support mental health across:

Whole population approaches

- strengthening individuals eg mental health literacy
- strengthening communities and healthy places eg housing, social networks
- addressing wider determinants eg mentally healthy policy

Life course approaches

- family, children and young people
- working age
- older people

Targeted prevention approaches

- groups facing higher risk eg criminal justice
- individuals with signs and symptoms eg suicidal behaviour
- people with mental health problems eg recovery

Youth Voice

Are you a young person aged 11 - 18 who needs some help with your mental health?

North Yorkshire County Council

Do you need some more information?

- Talk to family, friends or an adult you trust.
- Teen Mental Health: teenmentalhealth.org
- NHS Mental Health Support Hub: www.nhs.uk/Livewell/youth-mental-health/Pages/youth-mental-health-help.aspx
- NHS Mood Self-Assessment Quiz: www.nhs.uk/conditions/stress-anxiety-depression/mood-self-assessment
- Young Minds: www.youngminds.org.uk
- Rethink Mental Health: www.rethink.org/diagnosis-treatment

Would you like to talk to someone?

- Compass BUZZ US: 07520 631168. Support is available 9am - 5pm Mon-Thurs, 9am - 4.30pm Fridays
- 5-19 Healthy Child Service - call 01609 780780 Press 2 and ask to speak to a Healthy Child Nurse
- Mind Discussion Group: www.mind.org.uk
- The Mix: Call 0808 808 4994 for advice and support between 11am and 11pm
- Book an appointment with your local GP
- Childline: Call 0800 1111 to talk to anyone at any time for free <https://childline.org.uk/get-support/1-2-1-counsellor-chat/> for confidential counselling <https://www.childline.org.uk/get-support/message-boards/> talk to young people who may be feeling the same as you

Do you need urgent support or help?

- If there is immediate danger of serious harm or risk to life call 999
- If you need someone to talk to and the problem isn't immediately life threatening call 111
- HopeLine UK: 0800 068 41 41
- Childline: 0808 808 4994
- If you're over 18 you can call the Samaritans: 116 123
- CAMHS Crisis Number (Child and Adolescent Mental Health Services): Hambleton and Richmondshire 0300 0132000 (Option 6), 7 days a week, 24 hours. Whitby and Scarborough & Ryedale 01723 346502, 7 days a week, 10am-10pm. Harrogate and Ripon 01423 544335, 7 days a week, 10am-10pm. Craven 01274 221181, 7 days a week, 24 hours. Selby 01904 615348, 7 days a week, 10am -10pm

Email: nyyouthexecutive@gmail.com

THE PLEDGES, MARKET PLACE AND MINDFULNESS



During lunchtime there was an opportunity through a 'marketplace' for people to talk, network and learn about each other's services and experiences, as well as discuss how to move mental health and wellbeing in the right direction across North Yorkshire. People were also invited to make a 'pledge' to commit to taking positive action to support either their own mental health or on behalf of others. There was also an opportunity to practice 'Mindfulness' during a session led by Dr Paul Bernard from Tees, Esk and Wear Valleys NHS Trust.

THE WORKSHOPS

The afternoon was full of energy and there were lots of ideas generated during 3 workshops focused on children and young people; working age adults and older people. As mental health is one of the biggest health issues facing the people of North Yorkshire, discussions in the workshops considered how to promote greater awareness of mental health and wellbeing and identify what can be done together to tackle mental ill-health and to improve services across North Yorkshire.



The outputs of the 3 Workshops are outlined at Appendix 1.

Appendix 2 contains some quotes from the day.

Appendix 3 contains feedback from the Bright Ides Wall.



WHAT NEXT?

The Summit was aimed at all partners coming together to think about how mental health and wellbeing across North Yorkshire moves in the right direction. From the Summit this means:

- Raising awareness of mental health and wellbeing and promoting ways in which to support people to have good mental health.
- If people need help and support it is about making sure that help is available early and people know where to seek help.
- If people need more bespoke support and access to services, that this is available and is accessible, tailored to their needs.

The Health and Wellbeing Board hosted the Summit because the Board identified mental health and wellbeing was something all partners could influence and work together on and take action.


During the workshops there was lots of discussion and ideas shared that can be broadly grouped into the following themes:

- Access to information and signposting
- Access to services
- Comprehensive service offer – 24/7
- Employment support
- Housing
- Enablers

The page overleaf is a high level action plan, outlining what could be done across the 6 themes. It is acknowledged there is a lot of work already happening on the themes and this action plan is not intended to duplicate this but complement it:

High Level Action Plan

Theme	Action	Progress
Access to Information and Signposting	<ul style="list-style-type: none"> • Review the information and sign posting processes used by all HWB partners and identify ways to ensure consistency. 	
Access to services	<ul style="list-style-type: none"> • Review existing pathways and access routes into services to identify if they can be simplified. • Options appraisal to explore a single point of contact for mental health services. 	
Comprehensive 24/7 Service Offer	<ul style="list-style-type: none"> • Map the spectrum of preventative services and ensure they are publicised and accessible. • Develop an integrated primary, community and social care mental health service offer based on the principle of care close to home. • Develop an effective secondary and tertiary service to meet identified need. • Map transitions between children and adult services to identify areas for improvement. • Develop support to support for carers 	



Theme	Action	Progress
Employment Support	<ul style="list-style-type: none"> • HWB partners will review their own organisation's approaches to supporting people to maintain good mental health. • Integrate employment into a wider preventative offer across all pathways of care. 	
Housing	<ul style="list-style-type: none"> • Develop supported housing options • Explore options for a dementia village • Identify housing needs of people with complex –multi morbidity cases • Deliver the Transforming Care Programme 	
Enablers	<ul style="list-style-type: none"> • Maximise the use of digital solutions such as video consultations 	

FEEDBACK FROM WORKSHOPS

Children and Young People

Issue	Solutions
Information	<ul style="list-style-type: none"> • Clarity about services available for children and professionals – possible use of chat box. • Self-help material
Workforce	<ul style="list-style-type: none"> • Compass Buzz across the County • Support teachers • Scarce workforce in the future • Buddy systems in schools • Is there an untapped workforce? • Do we need a different workforce for transitions? • Workers in workforce to support families
Services	<ul style="list-style-type: none"> • Referral to CAMHS from schools • One number, one site, one app • Services can be difficult to navigate • Need to support children with disabilities • Children's MAST for mental health • 24/7 access to CAMHS • Mindfulness • Social support is needed as well as specialist services • Rationalise numbers for services • Simplify access, one number, one access point. • Work with families, Surestart, perinatal, attachment and bonding • Work in primary schools as well as secondary schools. • 'Crucial Crew' mental health module • Peer support - young people helping young people
Transitions	<ul style="list-style-type: none"> • What does good look like? • All age service based on need. • Link between drugs and mental health
Technology	<ul style="list-style-type: none"> • Practitioners toolkit could be online • Develop a sponsored app to deliver level 2 training • Validation of existing website or do we need our own? • Equity across County of phone / digital signals and access

Working Age Adults

Issue	Solutions
Housing	<ul style="list-style-type: none"> • Help for homeless people • Affordable houses in communities
Services	<ul style="list-style-type: none"> • Hook in GPs and primary care • Multi-disciplinary meetings • Smooth transitions processes between children's services and adult services and agencies. • Tailored activities and services that work for people e.g. walking, running, art classes, photography Start with blank sheet of paper and do not just add onto existing services. • Handover points need to be flexible and responsive • Services for carers • GP with special interest • Community mental health services need capacity • Brave enough to stop doing things as well as starting • Build knowledge into primary care – Harewood pilot • Monitor transitioning of services between primary IAPT, primary and secondary care • Consistency across geographies • Focus on strengths and assets • Peer support workers within community mental health services • Peer support networks supported by health and social care organisations • Walk in one stop shop services • Open access point in pathways that is not A&E • 'Life rooms' – Liverpool model • Service user involvement group • Service user liaison workers • Peer support • Create safe spaces – hubs • Maximise green spaces – more green gyms • Join up commissioning • Pooled budgets • Social prescribing by GPs • Voluntary services to be recognised as they matter to 'deliver on the ground' services • First response service 'one call fits all'. • Getting the front door offer right • Simple menu of services • Clear pathways for crisis services • Use of faith based organisations • Cinnamon network • Helplines • More dual diagnosis support



	<ul style="list-style-type: none"> • Assist training for public • Mindfulness • ‘teabag scheme – Selby’ • Outreach workers • Early interventions • Out of hours services • Living Well Co-ordinators thinking about mental health issues – signposting • Men in Sheds initiative • Fruit and vegetable projects • Scarecrow Festivals • Simple process self-referral and GP referrals • Insomnia – peer support • Mental health friend badge <ul style="list-style-type: none"> • Lunch clubs • Youth cafes • Trains with meditation carriages • Self-referral to IAPT • Music festivals to raise awareness • ‘pub as the hub – classes, IT, job search • Service in schools
Employment	<ul style="list-style-type: none"> • Mental health support in job centres • Support to keep people in work • Employers giving people opportunities to volunteer outside of work as a team • Employers giving people time off to learn a non work skill – permission to have time out and be honest about mental health issues. • Mental health first aid for managers • Agile working • Look at how employers recruit – see skills and resilience of people with mental health issues • Access to mental health support at work. • Employers need to make reasonable adjustments • Think about work design and mental health • Work life balance • Informal walks and talks with colleagues • Employer mental health and wellbeing policy • Employers sign up to disability confident • Cycle to work, cycle at work • Embed mental health into organisational culture – ‘not an add on’ • Mindful employer • Need to identify ways to work with micro employers • Find ways to keep people in work and provide support to managers to look after themselves and the people they are responsible for

Workforce	<ul style="list-style-type: none"> • Skilling up first response providers and core workers
Digital technology	<ul style="list-style-type: none"> • Make available online applications that work • Use technology such as text, email etc.
Business	<ul style="list-style-type: none"> • Look at examples such as ‘Communi – lec- selby’

Older People

Issue	Solutions
Information	<ul style="list-style-type: none"> • Consistent, sensitive language in relation to mental health and wellbeing • Focus on needs not chronological age • Not all just online – make use of community hubs, GP practices
Workforce	<ul style="list-style-type: none"> • Social workers in over 65 year old team
Services	<ul style="list-style-type: none"> • Develop a long term vision • Use of volunteers – new ways of working ‘Hull coin’ • More low level support options for people who do not have an eligible social care need • Invest in prevention • Dementia villages • Multi-generational work in hub and spoke model

QUOTES FROM THE WORKSHOP

'not to medicalise lives'

'Don't pathologies'

'Work together'

'Do what you say'

'Staying safe in services'

'Start with person – what do they want not what do we think they need'

'No acronyms for services'

'Can feel like pushing a boulder up a hill'

'Cross party working'

'Right care right time'

'One size doesn't fit all'

'The small things matter'

'Simple menu of services as you don't know what you haven't been told'

'People in crisis can't cope with current system'

FEEDBACK FROM THE BRIGHT IDEAS WALL

Below is the feedback from the bright ideas wall:

- *Twitter: follow these accounts! #inspiring*
 - @imwtclothing*
 - @CUnderwoodUIT*
 - @AidenHatfield*
- *Love Rob Webster's idea that services are guests in people's lives. IDEA: promote NY connect website so people can access connections independently.*
- *Skype consultations for young people to access earlier mental health referrals.*
- *Check out In Music We Trust on Twitter @Imwtclothing.*
- *Flowchart for Adult Mental Health Services.*
- *Some form of progress feedback to delegates in x months.*
- *Look at bringing the Mental Health Agenda and LD agendas closer together.*
- *I'M GOING TO HAVE A CHAT WITH GARETH!*
- *Mental Health literacy... good but also addiction literacy (exploring its links to mental health) at school age to prevent young people, protect them from addictive/destructive/self-harming behaviour e.g. sugar, fizzy drinks, devices, food, drugs.*
- *1 map that shows all the organisations involved and what they do and how to access it! ← Great idea, link them all together. Think "Heads together".*
- *'CAF' type of form for adults.*
- *Tools to help service users transition from youth to adult mental health services. This can be scary for service users and their families.*
- *3rd sector involvement.*
- *Family therapy more widely available.*
- *With dedicated long term funding! "We can't do it for nothing!"*