#### **Public Document Pack**



# Agenda Health and Adult Social Care Scrutiny Board

### Monday, 3 October 2022 at 6.00 pm in the Council Chamber - Sandwell Council House, Oldbury

#### 1 Apologies for Absence

#### 2 **Declarations of Interest**

Members to declare any interests in matters to be discussed at the meeting.

#### 3 Additional Items of Business

To determine whether there are any additional items of business which, by reason of special circumstances, the Chair decides should be considered at the meeting as a matter of urgency.

#### 4 Mental Health Transformation Plans

5 - 20

To consider and comment on the Black Country Healthcare NHS Foundation Trust Transformation Plan and the new model for Community Mental Health in the Black Country

#### 5 Review of Social Isolation and Loneliness

21 - 28

To consider and agree on the scope of the review into social isolation and loneliness in Sandwell

















#### Kim Bromley-Derry CBE DL Managing Director Commissioner

Sandwell Council House Freeth Street Oldbury West Midlands

#### **Distribution**

Councillor E M Giles (Chair) Councillors H Bhullar, Akpoteni, Allcock, Choudhry, E A Giles, S Gill, Fisher, Melia, Randhawa and V Smith

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# Report to Health and Adult Social Care Scrutiny Board

#### **3 October 2022**

Subject:	Black Country Healthcare NHS Foundation Trust
	<ul> <li>Mental Health Transformation Plan</li> </ul>
Director:	Marsha Foster
	Acting Chief Executive
	Black Country Healthcare NHS Foundation Trust
Contact:	Kuli Kaur-Wilson
	Executive Director of Strategy & Partnerships
	Black Country Healthcare NHS Foundation Trust

#### 1 Recommendation

1.1 To consider and comment on the Black Country Healthcare NHS Foundation Trust Transformation Plan and the new model for Community Mental Health in the Black Country.

#### 2 Reasons for recommendation

- 2.1 The Black Country Healthcare NHS Foundation Trust was asked to present its Transformation Plan to facilitate the review of loneliness and social isolation that will soon be launched by the Board.
- 2.2 As the Lead Provider of mental health services in the Black Country, the Black Country Healthcare NHS Foundation Trust is a crucial stakeholder in enabling mental health services in Sandwell to operate effectively and offer services to prevent social isolation.
- 2.3 Members will be able to ask questions and scrutinise the transformation plan and the new model for community mental health, for example, to ensure the public has easy access to information about mental health services available, to consider strategies to match service users and

















residents needing mental health support to a service that is best suited to their needs.

#### 3 How does this deliver objectives of the Corporate Plan?



People live well and age well

Health Scrutiny ensures that health matters affecting the population of Sandwell, including the delivery of healthcare by public bodies, are scrutinised by elected members.

#### 4 Context and Key Issues

The Committee can offer suggestions on how to ensure the Black Country Healthcare NHS Foundation Trust's transformation plan and new model for community mental health in the Black Country works to the maximum benefit of Sandwell residents.

#### 5 Appendices

Appendix 1 – Black Country Healthcare NHS Foundation Trust
Transformation Plan Presentation

#### 6 Background Papers

None

















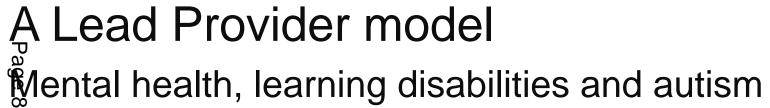




# Mental Health Transformation

3<sup>rd</sup> October 2022







**Black Country Integrated** Care Board (ICB) has entered into a single contract with BCHFT to commission the entirety of the (in-scope) mental health, and learning disabilities and autism pathway for the **Black Country population.** 

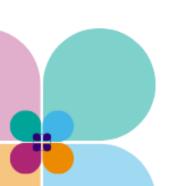
**Black Country ICB retains** its statutory responsibilities including with regards to quality assurance.

As lead provider, BCHFT has clear quality assurance processes in place for the enhanced responsibilities including management of subcontracts, and a clear joint process with the ICB regarding placements.

As lead provider, BCHFT will be accountable for the systems performance with regards to mental health, learning disabilities and autism (transformation and strategic performance).

**Black Country ICB and** BCHFT will agree the 'outcomes' that BCHFT as the lead provider will deliver.

As Lead Provider BCHFT determines the best arrangements to deliver these outcomes, including through collaborative working with system partners, contracting with other providers and driving transformation.



# Case for Change and benefits



#### **Case for change**



Addressing unwarranted variation in access and outcomes driven by legacy of fragmented commissioning and provision



Achieving a more coordinated approach to strategic plans in a complex architecture



Platform to achieve national ambitions e.g. Transforming Care and Long Term Plan – benefitting from scale



Incentivising the front line e.g. elimination of inappropriate out-of-area placements



Breaking down artificial barriers between partners / agencies – making best use of collective strengths



Advancing health equalities through stronger voice/influence and accountability – ensuring needs of under-served communities considered across whole pathway



Workforce development and expansion through collaboration - a one-workforce approach

#### **Benefits**



Better experiences and outcomes for the people we support



Opportunity to develop a shared vision and strategy for services, driving more integrated pathways of care



More engagement and co-production with people with lived experience, communities and the voluntary sector



A direct and mutually beneficial working relationship with partners across health and care, including local authorities and the voluntary sector



More involvement for professionals, managers and teams in driving change for the benefit of our communities

# BCHFT as 'Lead Provider' for Learning Disabilities

- When we became Lead Provider for learning disabilities, the Black Country learning disabilities and autism inpatient rate was 53 people per million population - this is now 36 (national average 41)
- Achieved by embedded, collaborative leadership approach with joined-up working, and more pro-active and innovative community solutions
- Reducing constraints of organisational boundaries increased admission avoidance, improved admission and discharge planning, and reduced delays in decision-making and processes
- Black Country Transforming Care Partnership (TCP) now perform above national average, both for proportion of adults, and children and young people, in inpatient settings (previously poorly performing)





Benefits evidenced in Learning Disabilities

Much richer knowledge of the citizens we support Positive citizen and family feedback

Improved confidence of staff and teams

Achieved shift to an outcomes/ values based approach to contracting

Significant progress against national targets (inc. admission avoidance)

Development of new models of care and support Stronger relationships between Trust and wider partners Common purpose and collective responsibility

### Big conversations across the Black Country

NHS Black Country Healthcare

Who we talked to and what we discussed

During August to November 2020 we talked to people across the Black Country to help us shape our future direction and priorities.

#### Our stakeholders

NHS and local authority; Healthwatch; community groups and organisations; advocates.



What does the very best healthcare look like in three years' time? How do we

How do we at aterodollo make change

What are the hallenges? What do we need to ocus on?



#### Our communities

Service users; patients; families; carers; Trust members; community groups; members of the public.



SURVEY service users' Covic



What if...you could change mental health services? What would you do? How would you do it? Who would you involve?

Tell us about your care!

#### Our staff and governors

Doctors; nurses; psychologists; allied health professionals; healthcare support; governors; Board of Directors.



across our services, including suicide prevention and an event for governors



What does the very best healthcare look like in three years' time? How do we achieve this?

How do we have the greatest mpact?

low can we with local



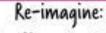


### **Black Country** Mental Health, Learning **Disabilities and Autism**









What if you could change mental health services?



#### Reimagining mental health services...

.. across the Black Country

Join us for a conversation about the future of mental health services over the nexthree years, including:

- A 'pd provider' of mental health services
- · Transforming community mental health services
- Caring for our children and young people's mental health
- Developments such as employment support, providing Black Country hospital stays for those who need one, and support for women who are pregnant and new mothers

We are looking forward to seeing you

for World Suicide Prevention Day

Friday 30 September

10am to 12.30pm zoor

19(1) YOU ARE

NOT

HOPE AND INSPIRATION

A conversation about suicide

#### **OLDER ADULTS THERAPEUTIC SERVICES (OATS)**

#### A NEW SERVICE ACROSS THE BLACK COUNTRY

Our new service for older adults experiencing mental health problems is built on principles of recovery through community connection, and therapeutic and meaningful support (including from peers).

A Black Country hub with support available in Dudley, Sandwell, Walsall and Wolverhampton means people will have a choice about where they access groups.

Join our online launch event to find out more about the new service and those services it now brings together.\*



1-3pm

healthier, happier lives



#### Learning disabilities webinar

Thursday 17 February 10-11.30am on ZOOM

Register: bch-ld-webinar2022.eventbrite.co.uk

more about our learning disabilities services and

**Questions?** 

#### **BLACK HISTORY MONTH CONVERSATION**

Help us

shine a light

dementia

28 October 10-11.30am on ZOOM

Register: bhmregisteroct2021.eventbrite.co.uk



Join our friendly online chat

ork to improve mental health

services across the Black Country

Want to know more or want to get

your experience and ideas with other carers

Register:

1111

5 October

This informal group chat will be a safe space to share

# MS Teams co

Wednesday

6 October

2-5pm

I no longer want and I never thought

SUMMIT 72

0000

'You said, we're doing...'

**CHILD AND** Tuesday afternoons, 5-6pm. or chats and help us to make **ADOLESCENT** ung people living in the Black **MENTAL HEALTH** 

**SERVICES** 

7 June 10.30am -12noon

on MS Teams

To register, please email bchft.pmo@nhs.net What is working well? · What needs to improve? What would you like to

vou could change the

specialist complex mental

for the person you care for?\*

health needs services available

and the community to help support people to improve their wellbeing

**Winter Webinar** 

11am to 12.30pm

All welcome

Join our dementia webinars

or, how we can keep ourselves well and the support vailable across the Black Country. Everyone is

Monday 17 May

10.30am - 12.30pm and 2.30 - 4.30pm

### WHAT IF...

the Black Country?

A place where people can come together and learn about mental health and recovery to help them feel more confident in the self-management of their own mental health. Where you can re-discover you. Where people with lived experies co-design and deliver courses, sharing their stories and experience with others What could this look like for Dudley, Sandwell, Walsall and Wolverhampton

Come along to a friendly chat on Zoom

/ednesday 11 August 6-7.30pm

Hope

Opportunity

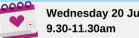
**Ouestions?** 

**Black Country suicide prevention** Black Country Healthcare vorkshop Black Country Disabilities and Autism

#### **IN-REACH TO CARE HOMES SERVICE**

services we are launching a new In-reach to Care Homes Service across the Black Country. This service will help care

At this event you can learn about the service within each Black Country locality (Dudley, Sandwell, Walsall and mpton), as well as network with others.



Wednesday 20 July



NHS ealthier, happier lives

3 February 2022 9.30am-12noon

#### Register:

bcsuicidepreventionworkshop.eventbrite.co.uk

The impact of suicide is felt by all of us. The solution to stopping suicide lies with all of us.

An event

People with

and advocat

Wolverha

Dudley, Sandy

The Recovery College

www.hopeandinspiration.eventbrite.co.uk

Make new connections, learn and get resources. Together we can create hope through action

NHS **Black Country Healthcare** 

COMOTION .

leis good It is NOT the

# to improve the lives of young

on T

MS Teams

people?

What could we do

Young

people.

Join our frie informal cha share YOUR

@nhs.net

Events for aged 18-25

■ Health latters

**Thursday 2 December** ON ZOOM

**COVID AND MENTAL HEALTH** 

... We had a Recovery College for

about our Recovery College dreams

Black Country Healthcar



OUT OF

Advice and support to

prevention, alongside primary care mental health and in partnership with the community

Personalised and responsive support to those that really need it (reduced waiting list and ambition of a four week wait)

2

(SM)

**Transforming mental** health care in the **Black Country** 

Vision and benefits

#### CITIZEN, COMMUNITY AND **PATIENT BENEFITS:**

- · Greater partnership working with communities, citizen, patients, carers; all services towards a common goal
- Reduced wait times
- Responsive, personalised support
- · Range of support over multiple partners
- Local pathways and support

#### **STAFF BENEFITS:**

- Improved MDT working
- Working across multiple partners
- Better communication
- Better options for development and new roles
- · Learning from each other
- System workforce plan for recruitment, retention & training





**Crisis** beds

24/7

Sanctuary hubs

> **Ambulance** response

> > **REDUCE**

**ADMISSION** 



Proactive mitigation development



**AVOID CRISIS** 

Reduce out-of-area beds through enhanced community pathways for assertive engagement rehabilitation and complex emotional needs

Close to home TRE

helpline

### A flavour of what we have been doing



**New maternal mental** health (MH) service launched

Older adult in-reach into care homes clinical model developed and being implemented

First primary care MH practitioners appointed (co-located in Primary Care Networks (PCNs), **PCN MH Hub under** 

Community rehabilitation model developed and being implemented

Recovery College expansion across **Black Country** commenced

Older adult therapy service model developed and being implemented

Community inclusion worker model introduced as part of journey to advance health equalities

**Admiral Nurse model** developed and under implementation

Eating disorders inreach into primary care model developed and being piloted

development

Good progress in developing enhanced approach to supporting 18-25 year olds' transition between CAMHS and adult MH services

Physical health model for people with severe mental illness - good progress in development

Expansion of all-age eating disorder model agreed across Black Country and under implementation

**Single Black Country CAMHS** core model agreed, to achieve best practice standards in all areas and under implementation

**Single CAMHS crisis** model across Black Country agreed, to ensure consistent support in all areas

Further expanded and embedded mental health support teams across educational settings inc. schools

Early Intervention in Psychosis model that meets NCAP standards developed and under implementation across all areas

Continued expansion of employment support across Black Country and wider region- recognised as an exemplar service

Treatment model

Continued strengthening of psychiatric liaison support in line with core 24 standards. ongoing development of Crisis Home

Clear pathways between CAMHS and acute services have mapped, and being agreed and implemented across the Black Country this will reduce variation in practice and provide a quicker and improved response for children and young people

introduction of **Keyworkers for Children and Young** People to work with service users who are inpatients or at risk of being admitted to hospital

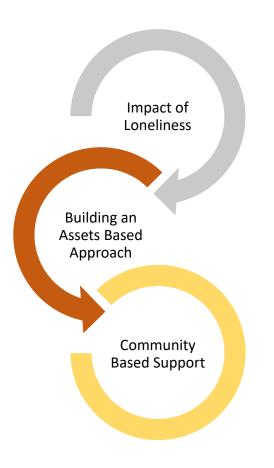




#### **Principles:**

- Developing our services to respond to the needs of our communities in collaboration with them, and our partners
- Seeking to address the needs of those who are out of work and want work, or those that need to retain their employment
- Developing responses and interventions that tackle the wider determinants of health
- Developing prevention strategies and social capital to tackle loneliness









- Developed as a response to the pandemic, utilising Charities Together funding
- Co-produced from patient feedback who requested support through well-being calls from our Employment Specialists
- Collaborative working with community organisations and partners
- Build service users social capital by supporting individuals through walk and talk activities, group sessions, cooking sessions, one to one support, confidence building and befriending opportunities.







- 121 interventions over 6 sessions
- Utilising coffee mornings at community locations or virtual sessions
- Supporting local businesses and their staff with well-being conversations and support, including **SMEs**
- Supporting access to digital devices to promote inclusion
- Guest speakers attending group sessions such as The Samaritans, Diabetes UK, LGBTQ+, or our Community Development Workers
- Facilitate Let's Cook sessions to promote healthy eating and confidence building
- Quiz's, walk and talk, Recovery College sessions, or activities delivered by local football organisations
- Attendance at Health and Well-Being Events







# Thank you — Any Questions



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# Report to Health and Adult Social Care Scrutiny Board

#### **3 October 2022**

Subject:	Review of Social Isolation and Loneliness	
Director:	Director of Public Health – Lisa McNally	
	Director of Adult Social Care – Rashpal Bishop	
<b>Contact Officer:</b>	Senior Democratic Services Officer	
	Stephnie Hancock	
	Stephnie_Hancock@sandwell.gov.uk	

#### 1 Recommendations

1.1 To consider and agree on the scope of the review into social isolation and loneliness in Sandwell.

#### 2 Reasons for Recommendations

- 2.1 The Health and Adult Social Care Scrutiny Board has agreed to carry out a review of loneliness and social isolation in the Borough. The scope document (appendix 1) sets out the rationale and suggested way forward for the review to progress, with the possibility of working group being set up to review and refine the scope further.
- 2.2 The scope document (appendix 1) sets out the proposed areas of inquiry for the loneliness and social isolation review, together with a description of range of methods that could be used to gather evidence including experts by experience and carers interviews, public engagement focus groups, and local and national datasets. Views will also be sought from health partner organisations in Sandwell and voluntary organisations.

















#### 3 How does this deliver objectives of the Corporate Plan?



People Live Well and Age Well

The review will enable the Board to gain an understanding of the issues faced by residents in terms of social isolation. The Board will be able to analyse data and evidence considered through the review process to make informed recommendations.



Best Start in Life for Children and Young People

Young people are one of the groups at greater risk of suffering with social isolation and depression.



Strong and Resilient Communities

Addressing any barriers people have to accessing community resources will contribute towards creating stronger and more resilient communities.



Quality Homes in Thriving Neighbourhoods

Housing is one of the wider determinants of health and housing conditions and security of tenure can significantly impact on people's feeling of isolation.



A Strong and Inclusive Economy

Social isolation has enormous impact on people's mental health. It is essential that people are provided with support to remain in employment even when facing crisis due to social isolation.



A Connected and Accessible Sandwell

Access to walkable and cyclable places in green spaces, where group activities take place, is crucial to tackling the problem of social isolation.



















#### 4 Context and Key Issues

- 4.1 The review aims to gather evidence to inform service shaping and future provision of services provided to help people with social isolation and loneliness. Recognising and protecting the future of these valuable services is important for the residents of Sandwell, but it is also important to note an environment of increasing demand.
- 4.2 The review will gather evidence from stakeholders, the Council and partners, evaluate findings and options and make recommendations to influence strategies with regard to preventing social isolation in the borough.

#### 5 Consultation

5.1 There is no content within this report that requires any further consultation at this stage.

#### 6 Alternative Options

6.1 The purpose of the review is to develop an understanding of the prevalence of social isolation and isolation in the Borough and devise strategies to provide support to people suffering from these issues.

#### 7 Implications

Resources:	There are no specific financial implications arising	
	from this report.	
Legal and	The National Health Service Act 2006, as amended	
Governance:	by the Health and Social Care Act 2012, confers	
	health scrutiny functions to local authorities.	
Risk:	There are no associated risks with this report.	
<b>Equality:</b>	There are no current considerations.	
Health and	Ind Effective and efficient mental health services	
Wellbeing:	contribute to the wellbeing, cohesion and resilience of	
	Sandwell's communities.	



















Social Value	There are no specific social value implications arising	
	from this report.	

#### 8. Appendices

8.1 Appendix A – Loneliness and Social Isolation Review Scope Document Draft



















#### **Scrutiny Review - Scoping Document (DRAFT)**

Review Title:	Review of Loneliness and Isolation
Scrutiny Board:	Health and Adult Social Care Scrutiny Board
Date of Review:	Commencing October 2022

#### Reasons for undertaking the review:

There is an extensive evidence base about the impact of loneliness and social isolation on people's lives, their relationships and their wellbeing. It is also a serious public health concern. It is known to adversely affect health, thus increasing demand on health and social acre services and also leads to higher rates of premature mortality comparable to those associated with smoking and alcohol.

The covid-19 pandemic and resultant lockdown resulted in further isolation. A report published in July 2021 by the Campaign to End Loneliness found that Covid-19/lockdown had exacerbated existing inequalities, meaning that groups already at risk of loneliness – such as those who were poorer, in worse health or from ethnic minorities or LGBTQ+ communities – were at greater risk during the pandemic. Research by the Local Government Association has also found that adults most at risk of being lonely, and increasingly so during lockdown, have/had one or more of the following characteristics: they are young, living alone, on low incomes, out of work and, or with a mental health condition.

#### **Key Lines of Enquiry identified:**

- a) Are Sandwell residents more or less isolated and lonely when compared to previous years?
- b) Are Sandwell residents more or less isolated and lonely when compared to residents of other areas?
- c) What groups/demographics are disproportionately affected by feelings of loneliness and Isolation?
- d) How are people at risk of/suffering from loneliness and isolation identified?
- e) What services/local programmes/community assets exist within Sandwell (Council/NHS/Third Sector) to help assist those suffering from loneliness and isolation; are these services adequately promoted? Data on those accessing these services?
- f) How is the impact of these services measured?
- g) What impact does loneliness and isolation have on quality of life and life expectancy?

[IL0: UNCLASSIFIED]



h) Are decisions, that are made by Council considering social concerns such as loneliness and isolation?

#### **Intended Outcomes:**

## Officer Group (including partners):

Lisa McNally (Director Public Health)
Anna Blennerhassett (Consultant in PH for
Healthy Lives, (incl social isolation))
Lina Martino (Consultant in PH for Intelligence
(incl public mental health))
Black Country Healthcare NHS Foundation Trust –
officer TBA)
Healthwatch Sandwell – contact TBA

### Links to Corporate Plan and Vision 2030:

**Ambition 1:** Sandwell is a community where our families have high aspirations and where we pride ourselves on equality of opportunity and on our adaptability and resilience.

**Ambition 2:** Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for.

**Ambition 3**: Our workforce and young people are skilled and talented, geared up to respond to changing business needs and to win rewarding jobs in a growing economy.

**Ambition 4**: Our children benefit from the best start in life and a high-quality education throughout their school careers with outstanding support from their teachers and families.

**Ambition 5** Our communities are built on mutual respect and taking care of each other, supported by all the agencies that ensure we feel safe and protected in our homes and local neighbourhoods.

**Ambition 8**: Our distinctive towns and neighbourhoods are successful centres of community life, leisure and entertainment where people increasingly choose to bring up their families.

**Ambition 10:** Sandwell now has a national reputation for getting things done, where all local



	partners are focused on what really matters in people's lives and communities.
Scoping undertaken by:	Ant Lloyd Stephnie Hancock Lina Martino
Council Chief Officer (or partner equivalent):	Lisa McNally (Director Public Health)

#### Existing data available for consideration:

Residents Survey Data Public Health data

NHS data

https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/adhocs/1440 9trendsinpersonalwellbeingandlonelinessbyageandsex

https://www.campaigntoendloneliness.org/

Potential witnesses	SCVO/Third sector groups Campaign to End Loneliness
Activities	Desk top research

