DECISION-MAKER:		HEALTH AND WELLBEING BOARD		
SUBJECT:		FEEDBACK FROM MENTAL HEALTH MATTERS ROUND TABLE EVENT, 4TH DECEMBER 2014		
DATE OF DECISION:		28TH JANUARY 2015		
REPORT OF:		SENIOR COMMISSIONER FOR MENTAL HEALTH SERVICES		
CONTACT DETAILS				
AUTHOR:	**Name:**	**Katy Bartolomeo**	**Tel:**	**023 8083 416**
	E-mail:	**Katy.bartolomeo@southampton.gov.uk**		
Director	**Name:**	**Stephanie Ramsey**	**Tel:**	**023 8029 6923**
	E-mail:	**stephanie.ramsey@southamptoncityccg.nhs.uk**		
STATEMENT OF CONFIDENTIALITY				
None.				

BRIEF SUMMARY

This Paper provides an overview of the first Mental Health Matters round table event which took place on 4th December 2014, along with a summary of the main themes from the event and planned next steps.

RECOMMENDATIONS:

(i) That the report be noted;

(ii) That a Health and Wellbeing Board Champion for mental health be identified; and

(iii) That the Health and Wellbeing Board acknowledges and welcomes Southampton Connect's contribution in championing the issue of mental health and ensuring that it develops into a cross cutting theme in the City Plan.

REASONS FOR REPORT RECOMMENDATIONS

1. To inform the Health and Wellbeing Board of the key outcomes from the Mental Health Matters event in December 2014.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None.

DETAIL (Including consultation carried out)

3. On the 4th December 2014 the Health and Wellbeing Board held Southampton's first 'Mental Health Matters' round table event. The event aimed to highlight key issues and challenges facing service users, commissioners and providers of mental health services and explore the future of mental health in the City.

4. The event was attended by 84 people with representation from NHS and voluntary sector providers, service users, carers and ICU/Public Health Commissioners. The day consisted of key note talks on topics such as the service user perspective, parity of esteem, local and national needs analysis, excluded populations and governance within commissioning along with a number of small group exercises to gather the views and experiences of the

wide variety of individuals who attended the event across all ages.

5.   The key themes from the feedback that was captured on the day include:

<u>What is working well?</u>

- Peer support
- Operation serenity (mental health workers within Police call centres)
- Steps2Wellbeing service
- Specialist employment support and recovery college
- Mental health support for schools including headstart and mental health nurse at Itchen college

<u>What is not working well?</u>

- Acute care pathway
- Dual diagnosis needs not met within one service
- Physical and mental health needs not being met
- Heavy reliance on medical model
- Voluntary sector not always feeling valued
- People not knowing what support and services are out there
- Lack of co-ordination of/between services
- Lack of service user network
- Need to focus on younger people and early intervention

<u>Parity of esteem</u>

- Work as a city to reduce stigma
- Integration of physical and mental health services
- Primary care to increase understanding and skills
- Improve the building environments in mental health services
- Co-production
- Work with schools and universities to educate people
- Embed mental health in generic health consultations and consider how general services should be adapted for people with mental health problems
- Include 'reasonable adjustments' within contracts
- Focus on Time to Change and Mindful Employers

<u>Priorities for change – key themes</u>

- Crisis care – out of hours provision, out of hours hub, prevention and early intervention and local beds.
- Housing – increase in step down beds and services, helping people to maintain tenancies to reduce high cost placements, better quality and affordable housing.
- Carers and service users – support and resources for service user network, listening to carers and service users, person centred care and support planning, peer development.

- Integration – more spending for mental health services, commission as a city, health and wellbeing centres, primary mental health for CAMHS, co-location of services.

- Health and social care – start with a blank sheet and budget and design a new service from scratch, early diagnosis, plan the solution and support around the service user's needs.

- Stigma – city wide/multiagency approach to anti stigma, telling real stories in ad campaigns, maximise publicity – learning from dementia initiatives.

- Education – school education on mental health.

- Employment – education for businesses to understand mental health, early intervention and education around barriers to employment.

6. The first Mental Health Matters event served as a good starting point for what needs to be a process of continued engagement with stakeholders across Southampton.

    Despite representation from service users, and the Southampton Service User Network at the event, more needs to be done to engage with these individuals in ways and environments that are conducive to their involvement. This will be taking place over the coming months.

7. Action plan and next steps:

    - A survey monkey questionnaire is in the final stages of development which will be used to gather feedback from attendees of the event but will also be sent to a wider range of individuals across the city that were not able to attend the event. This will focus on gathering feedback along the same themes as the event:
        1. What is working well within the city?
        2. What is not working well?
        3. How do we achieve parity of esteem so that our mental health services enable us to maintain both our physical and mental health needs and that mental health is valued equally to physical health in other services?
        4. What should our priorities be within the city to improve our services?
    - Use the initial feedback to help shape commissioning priorities for 2014/15, to be developed further with increased engagement

    - Analyse further feedback gathered via survey monkey and service user/carer engagement

    - Follow up focus groups with stakeholders, including separate session for service users, to further develop feedback into ideas and solutions for how mental health services across the city can be improved and re-designed.

    - Refining and using the information gathered to date to redesign provision, services and priorities where appropriate.

RESOURCE IMPLICATIONS

Capital/Revenue

8.   None.

Property/Other

9.   None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

10.   Health and Social Care Act 2012.

Other Legal Implications:

11.   None.

POLICY FRAMEWORK IMPLICATIONS

None.

KEY DECISION?   No

WARDS/COMMUNITIES AFFECTED:	All.

SUPPORTING DOCUMENTATION

Appendices

1.	None.

Documents In Members' Rooms

1.	None.

Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	Yes/No

Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1. None.	