

# A Mental Health and Wellbeing Commissioning Strategy for Halton

2013 to 2018



  
Halton Clinical Commissioning Group

  
HALTON  
BOROUGH COUNCIL

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Poor mental health is one of the biggest social issues in the UK today representing up to 23% of the total burden of ill health and is the largest single cause of disability. The North West has a higher prevalence of mental illness, dementia and depression than the national average, with Halton recording the highest rate of depression in the North West. Mental health problems are the single largest cause of ill health and disability in the Borough.

At least one in four people will experience a mental health problem at some point in their life, and around half of people with lifetime mental health problems experience their first symptoms by the age of 14. By promoting good mental health and intervening early, particularly in the crucial childhood and teenage years, we can help to prevent mental illness from developing and mitigate its effects when it does.

Deprivation is linked to poor mental health and 26% of Halton’s population reside within the top 10% most deprived Super Output Areas. Poor mental health can be distressing to individuals, their families, friends and carers. It affects local communities and has a significant impact on national prosperity and wellbeing. It is inextricably linked to causes and consequences of many major public

policy issues including poverty, social exclusion, unemployment, chronic illness, low educational attainment, anti-social behaviour, crime and lack of social cohesion.

The challenges are enormous but the rewards of meeting them are great. Halton's Health and Wellbeing Board has set the "Prevention and early detection of mental health conditions" as one of five priority areas to address to achieve its vision for the Borough. To progress this, Halton Clinical Commissioning Group and Halton Borough Council have developed this joint health, public health and social care strategy which sets key objectives and priorities to improve mental health in the Borough.

Only a sustained approach across all ages and all agencies, organisations and the wider public will equip us to meet the social, economic and environmental challenges we face and deliver the short and long-term benefits we need to promote and improve the overall health and wellbeing of the residents of Halton.

## Like Minds For better mental health in Halton

“

My name is Anne,  
I'm 78, from Ditton and  
I used to **feel lonely**.

I lost my husband 3 years ago.  
It devastated me. I had never felt  
so lonely. I was bad for a good  
few months and cried every day.  
One day I told my daughter about  
how I felt and now with her help,  
I am busy and have new friends  
to have a laugh with. I no longer  
feel lonely and on my own.

”



# Why do we need a mental health strategy?

Mental health problems have been identified as the highest single cause of ill health in the borough and can impact on a person's ability to lead a full and rewarding life.

In Halton:

- **One in four people attending GP surgeries seek advice on mental health**
- **The number of people suffering from depression is 12,471 (12.4% of the GP population who are aged 18 and over)**
- **Deaths from suicides & undetermined injuries have reduced but remain higher than national averages (Rate 8.2 per 100,000 population compared to England (7.2), and the North West (9.07) (2008-10)).**
- **The rate of hospital admissions due to self-harm for under 18s is high.**
- **Halton has an estimated prevalence of 1143 people aged 65+ with dementia compared to 690 people identified on the GP register in 2011-12.**
- **More than 1 in 5 of Halton's population live with a limiting long term condition (2011 Census).**
- **Research has shown that mental illness and harmful/dependent alcohol consumption are very closely linked and over a quarter of all alcohol-related admissions are those conditions caused by mental and behavioural disorders due to alcohol (dual diagnosis). Halton's admission rate is significantly higher than both England and North West averages.**

Halton has previously implemented "The Primary Care Mental Health Strategy 2009-2012" which has been reviewed and refreshed to inform and influence the development of this strategy. The Mental Health Strategic Commissioning Group has been established with a remit to develop and oversee the implementation of this strategy and action plan. The group is responsible for developing actions that will feed into the Health and Wellbeing Board who will, in turn, co-ordinate commissioning activity to address identified needs.

Halton Council and Halton Clinical Commissioning Group (CCG) have worked in partnership and established joint commissioning agreements for specific services areas. Aspects of integrated commissioning structures are developed with both formal and informal arrangements in place for Halton. It comprises of experienced commissioners across health and social care services who have delivered improved outcomes for service users.

The partnerships as a whole have delivered on a number of key ambitions, aided by having forward thinking commissioners working in an integrated manner, and the aim of this joint approach is to co-ordinate needs assessments, strategy development, service specification and procurement, monitoring and evaluation and to further develop the integrated commissioning landscape for Halton.

The promotion of positive mental health and wellbeing, prevention activity and the early diagnosis and provision of appropriate information and support can mean that a good quality of life is possible. While the costs associated with responding to the challenges of mental health and wellbeing are expected to rise in coming years because of growing numbers of people affected, there is significant scope for spending money more efficiently and effectively and for changing how we respond to local need.

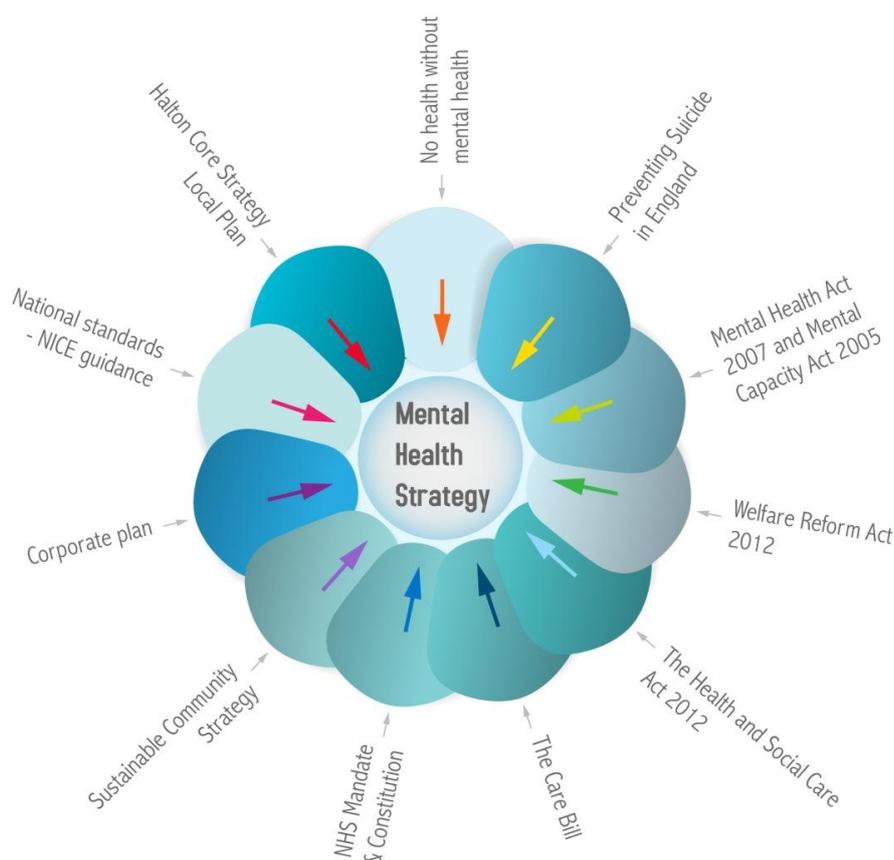
By promoting good mental health and intervening early, particularly in the crucial childhood and teenage years, we can help to prevent mental illness from developing and mitigate its effects when it does. Only a sustained approach across the life course will equip Halton to meet the social, economic and environmental challenges it faces and deliver the short- and long-term benefits needed.

This strategy promotes recovery<sup>11</sup> so that individuals will be empowered to define the outcomes they desire based on their own experiences and aspirations and be supported to achieve their own recovery and gain a meaningful life.

This strategy also adopts a life course approach that recognises that the foundations for lifelong wellbeing are already being laid down before birth, and that there is much that can be done to protect and promote wellbeing and resilience through early years, into adulthood and then on into a healthy old age.

This strategy has been developed within the context of a range of national, regional and local policies, strategies and plans as summarised in the diagram below. Further details of how these influence the strategy can be found in the supporting evidence paper.

*Only a sustained approach across the life course will equip Halton to meet the social, economic and environmental challenges it faces and deliver the short- and long-term benefits needed.*



<sup>11</sup> “A deeply personal, unique process of changing one’s attitudes, values, feelings, goals, skills and/or roles. It is a way of living a satisfying, hopeful and contributing life, even with limitations caused by the illness. Recovery involves the development of new meaning and purpose in one’s life” - No Health Without Mental Health (2011)

This strategy is for people of all ages – children and young people and older people, as well as working age adults. It underlines the importance of providing equal access to age appropriate services for everyone. It applies to the full range of services, from public mental health promotion through to suicide prevention, forensic mental health services, services for people with personality disorders, severe and enduring mental illness, people with learning disabilities and people detained under the Mental Health Act or subject to the Mental Capacity Act.

The strategy and associated action plan complements other work programmes, including the local Dementia Strategy and the Suicide Prevention, Loneliness and Child & Adolescent Mental Health (CAMHS) Strategies which are currently in development, and should be read in conjunction with these pieces of work.

In demonstrating the importance of mental health outcomes, it is the intention of this document to explicitly recognise the importance of putting mental health on a par with physical health.

Halton is committed to a focus on individual people, their health and wellbeing and supporting the communities in which they live. The major local concerns relating to mental health and wellbeing which have influenced this Strategy are examined in detail in the Mental Health and Wellbeing 2013-2018 Strategy Evidence Paper and are summarised under three themes as illustrated below.

## Consultation

In developing this strategy the views of Halton residents and other interested parties were sought to help shape local mental health and wellbeing services over the next five years. 132 people responded to an online survey while Healthwatch co-ordinated a response on behalf of the 80 attendees at their 'Fact or Fiction' workshop. The key themes from open comments received are:

- **Education:** Of the general public, in schools, colleges and the workplace. Health professionals trained to give the correct advice. Everyone should understand that mental health can affect anybody.
- **Consistency:** of messages to the public about mental health to increase understanding and in service provision/aftercare.
- **Provision of service:** Out of hour's provision, support for families and carers. More service provision for children and young people. Early intervention services are important.
- **Access to services:** Better access to services, the waiting lists is too long. Clear information about service provision should be provided.
- **Promotion:** Of a healthy lifestyle, healthy eating, leisure and activities to reduce isolation, loneliness and stigma.

A full analysis of the consultation can be found as an Appendix to the Evidence Paper.

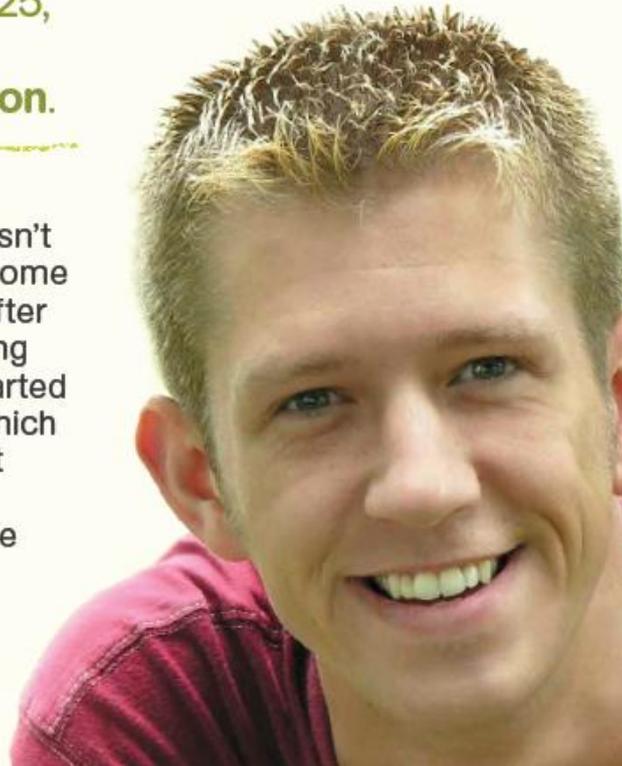
## Like Minds For better mental health in Halton

“

My name is James, I'm 25, from Runcorn and I've suffered from **depression**.

I knew I needed help when I split up with my girlfriend, wasn't able to see my son, lost my home and had to stay in a hostel. After talking to my Uncle and getting help from a local service I started doing things that I enjoyed which kept me busy! I have now got myself a house, see my son and have made sure that I see people regularly.

”



# Local Concerns

## People

Mental health is the single highest cause of ill health in the Borough

Number of people suffering with depression slightly higher than national rates

Deaths from suicides and undetermined injuries higher than national rates

Hospital admissions rates due to self-harm for under 18's is high

Mental wellbeing of children who have been in care tends to be worse than children who have not been in care

Estimates of people aged 65+ with dementia are significantly higher than those identified with a diagnosis on GP registers

## Health & Well-being

One in four people attending GP surgeries seek advice on mental health

Mental health is the single highest cause of ill health in the Borough

Mental and emotional wellbeing has a high impact on a persons ability to lead a full and rewarding life

Current economic climate and welfare reforms likely to increase levels of people suffering from mental illness

Amenable to change through a range of evidence-based interventions to promote mental and emotional wellbeing

## Communities

Local people have identified mental health as a local priority

People with mental health problems have the lowest employment rate of any disability group

Support to access independent or supported housing

Access to employment opportunities

Utilisation of parks and green spaces to promote health and wellbeing

Impact of stigma on the ability of those with mental ill health to contribute to their community

# Our vision, objectives and priorities

Our vision for improved mental health in Halton is:

*People of all ages living in Halton will have a high level of self-reported wellbeing, having happy and fulfilling lives, being able to contribute economically and socially to their own networks and the community as a whole.*

*Those who do experience mental ill health will not feel any stigma attached to the condition and be able to easily and quickly access appropriate levels of professional support to help them recover.*

To help achieve this vision this joint strategy is based upon the national mental health strategy, “No health without mental health - A cross-government mental health outcomes” (HM Government, 2011)<sup>2</sup>

Through the work of this strategy, Halton aims to ensure the **objectives** outlined in the national strategy and those identified in the Halton Health and Wellbeing Strategy 2013-2016, and the Halton Clinical Commissioning Group Strategic Plan are realised for local people.

## **(i) More people will have good mental health**

More people of all ages and backgrounds will have better wellbeing and good mental health. Fewer people will develop mental health problems – by starting well, developing well, working well, living well and ageing well. We will improve the mental health and wellbeing of Halton people through prevention and early intervention. We will increase the early detection of mental health problems which will lead to improved mental wellbeing for people with mental health problems and their families

## **(ii) More people with mental health problems will recover**

We will improve outcomes for people with mental health problems through high quality accessible services. More people who develop mental health problems will have a good quality of life – greater ability to manage their own lives, stronger social relationships, a greater sense of purpose, the skills they need for living and working, improved chances in education, better employment rates and a suitable and stable place to live.

## **(iii) More people with mental health problems will have good physical health**

Fewer people with mental health problems will die prematurely and more people with physical ill health will have better mental health.

## **(iv) More people will have a positive experience of care and support**

Care and support, wherever it takes place, should offer access to timely, evidence-based interventions and approaches that give people the greatest choice and control over their own lives, in the least restrictive environment, and should ensure that people’s human rights are protected.

## **(v) Fewer people will suffer avoidable harm**

People receiving care and support should have confidence that the services they use are of the highest quality and at least as safe as any other public service.

<sup>2</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/213761/dh\\_124058.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf)

**(vi) Fewer people will experience stigma and discrimination**

Public understanding of mental health will improve and, as a result, negative attitudes and behaviours to people with mental health problems will decrease.

This strategy identifies five **priority** areas for work to meet the needs of local people.

*The number of people suffering with depression in Halton is slightly higher than the national rates*

**Priority 1 - Improve the mental health and wellbeing of Halton people through prevention and early intervention**

**Priority 2 – Increase the early detection of mental health problems which will lead to improved mental wellbeing for people with mental health problems and their families**

**Priority 3 - Improve outcomes for people with identified mental health problems through high quality, accessible services**

**Priority 4 - Broaden the approach taken to tackle the wider social determinants and consequences of mental health problems**

**Priority 5 - Optimise value for money by developing quality services which achieve positive outcomes for people within existing resources**

This strategy aspires to meet the needs of the whole population and by using the best evidence of what works to increase the effectiveness and value for money of mental health services.

This will be achieved by:

- Improving the quality and efficiency of current services;
- Radically changing the way that current services are delivered so as to improve quality and reduce costs;
- Shifting the focus of services towards promotion of mental health, prevention of mental illness and early identification and intervention as soon as mental illness arises; and
- Broadening the approach taken to tackle the wider social determinants and consequences of mental health problems

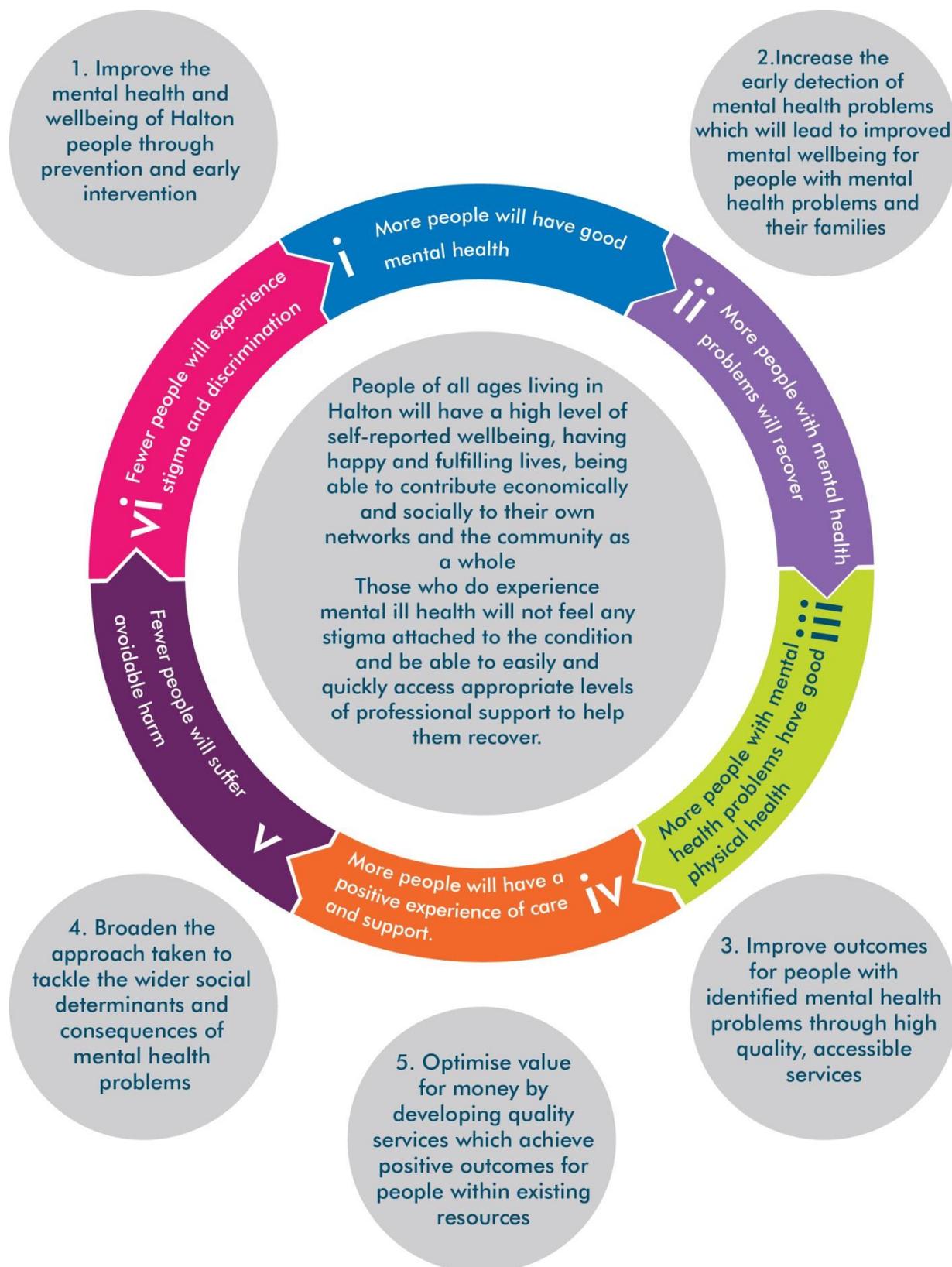
The accompanying evidence paper shows that current investment in mental health services is primarily focussed on long term support and acute care. This is not sustainable against a backdrop of treatment costs expected to double in the next twenty years and the current economic climate.

This strategy places an emphasis on whole population mental health promotion and prevention alongside early intervention to prevent mental illness developing and mitigating its effects when it does.

By clearly defining prevention and early intervention in this way we can begin to consider how through addressing people's low-level needs and wants we can begin to shift service provision from high cost complex care to more cost effective low-level support.

Mental health and wellbeing services along with preventative support and earlier interventions are essential in meeting Halton’s priorities. Whilst this strategy covers a five year period it is organic and will evolve in response to changes in national and local drivers and emerging issues.

## Our vision, priorities and objectives





## Implementing our priorities

At a time of financial and demographic pressure, improving quality while increasing productivity and effectiveness is vital for any improvements in care. The national strategy advocates local areas to consider the importance of mental health services and the resources that are allocated to provide them.

It suggests that each local area should focus upon three work streams when considering the development of local strategies:

The **acute care pathway** – avoiding hospital admissions through effective joined-up community care and ensuring that hospital inpatient care itself is effective and that unnecessarily long stays are avoided (for example, by action to tackle delayed discharges);

**out of area care** – getting better quality and better value through ensuring that appropriate in-area care is available where this is a better solution and commissioning effectively so that care is managed well, in terms of both care pathways and unit costs; and

**physical and mental health co-morbidity** – getting better diagnosis and treatment of mental health problems for those with long-term physical conditions, and getting identification and treatment of anxiety or depression for those with medically unexplained symptoms.

As the Government's policy of deficit reduction continues, the impact on the public sector is significant and with the public sector having to make unprecedented decisions about the services that it continues to deliver, this ultimately impacts on service delivery and residents expectations.

The success of the Strategy will depend upon partnership working in its broadest sense, if we are to achieve the best possible outcomes for everyone who lives or works in Halton. Local residents, statutory, voluntary, community and commercial organisations all have an important role to play in the delivery of the health and wellbeing agenda. This is even more imperative given the challenges brought about by the current economic climate.

The successful implementation of the strategy may mean staff working in new ways and all partners will need to ensure that the local workforce is trained and enabled to do this. In addition, the Health and Wellbeing Board in partnership with Halton Borough Council, has developed the concept of

Wellbeing Areas based on the existing seven Area Forum boundaries. This is in recognition of the fact that, whilst there are common issues across the borough, there are different needs across communities and one approach does not necessarily meet the needs of all.

The aim of Wellbeing Areas therefore is to work alongside local communities to address specific issues and wherever possible, tailor services to meet the needs of that particular community. This approach will move away from the traditional approach of delivering health and wellbeing services and instead will focus upon a 'grass roots' community development approach.

This approach is complemented by the development of the Well Being Practice model by NHS Halton CCG and their commissioning intentions to focus provision around local communities. GP Practices working as part of the Health and Wellbeing Practice approach will seek to deliver a culture change by enabling their patients to improve their health by accessing local services and facilities, using self-help tools, accessing training and participating in the local community.

**Like Minds**  
**For better mental health in Halton**

[HOME](#) [ABOUT US](#) [WHAT IS MENTAL HEALTH?](#) [WHERE TO GET HELP](#) [LOCAL PEOPLES STORIES](#) [LIKE MINDS RESOURCES](#)

My name is Bob, I'm 65, from Norton and I've suffered from depression

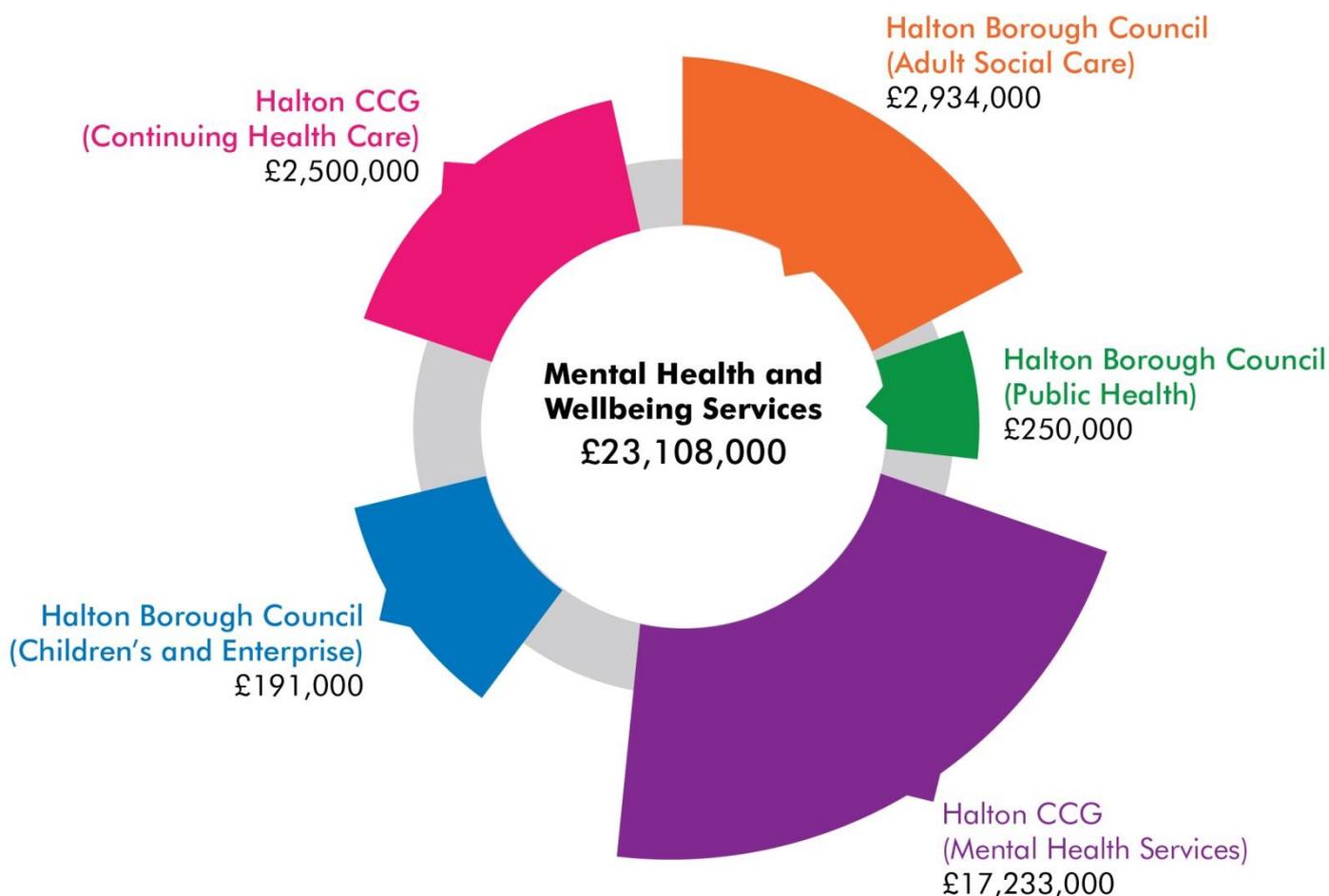
Becoming a full time carer for my mother-in-law left me feeling isolated and alone. I was at my lowest when I made contact with a local support group, it opened up doors to lots of things to keep me busy and active...  
...Click here to read Bob's Story

Your opinions are important to us. Please complete our survey! [CLICK HERE](#)

## How will it be paid for?

The following financial breakdown is based upon current direct expenditure in mental health and wellbeing services and does not reflect all of the wider universal and targeted activity that is commissioned locally. Such expenditure, on areas such as Primary Care (GPs, etc), general health promotion, weight management, or voluntary and community sector activity, all have a direct impact upon the mental health and wellbeing of local communities, but does not fall within the direct influence of the mental health and wellbeing strategy and action plan.

Further financial analysis across the range of activities and interventions can be found in the evidence paper.



## How will we know if we have been successful?

**When we have achieved our aims there will be a high level of self-reported wellbeing, with people having happy and fulfilling lives, being able to contribute economically and socially to their own networks and the community as a whole.**

**Those who do experience mental ill health would not feel any stigma attached to the condition and be able to easily and quickly access appropriate levels of professional support to help them recover.**

**Those who do and have experienced mental illness would be able to contribute fully to the community, have good levels of employment in fulfilling jobs.**

**Hospital admissions and deaths due to mental ill health and emotional distress would be much rarer than they are now.**

**People with dementia would have good levels of support.**

**People would live in healthy homes and communities that do not result in them experiencing mental ill health.**

The Overarching Outcome for the Strategy is to improve the health and wellbeing of Halton people so they live longer, healthier and happier lives. This will be achieved by focussing efforts on delivering against the priorities and achieving the five priorities.

It is important to make sure that real health and wellbeing improvements are delivered through the implementation of this strategy. The best way to achieve this is to use recognised measures to monitor the benefits arising from agreed priority actions and five high level targets have been set as a measure of success:

	<b>Priority</b>	<b>Target to measure success</b>
<b>1</b>	Improve the mental health and wellbeing of Halton people through prevention and early intervention	<b>Increase of 1% in self-reported wellbeing (Feeling Worthwhile) (Baseline 2012 = 17.6%)</b>
<b>2</b>	Increased early detection of mental health problems leading to improved mental wellbeing for people with mental health problems and their families	<b>Improved access to Psychological Therapies – 10.5% of people with depression or anxiety disorders will receive psychological therapies.</b>
<b>3</b>	Improve outcomes for people with identified mental health problems through high quality, accessible services	<b>100% of commissioned services working towards compliance with NICE guidelines for “Patient Experience of Mental Health”.</b>
<b>4</b>	Broaden the approach taken to tackle the wider social determinants and consequences of mental health problems	<b>100% of commissioned services taking up anti-stigma / mental health awareness training.</b>
<b>5</b>	Optimise value for money by developing quality services which achieve positive outcomes for people within existing resources.	<b>Improved outcomes relative to spend – shift in Spend and Outcomes Tool (SPOT) from Lower spend, Worse outcomes to Lower spend, Better outcomes.</b>

An 'Outcomes Framework' provides a template of how measures can be used to monitor different priority areas. There are currently a number of recognised outcomes frameworks covering the NHS, Adult Social Care and Public Health. We will use these to inform our overall outcome measures and our performance indicators. As we achieve our desired outcomes we will review our priorities and change them if appropriate. More detail on these indicators can be found in the evidence paper.

It is also important that the quality of what we are delivering is monitored to make sure people have a positive experience. On-going customer feedback as well as activities such as local surveys and focus groups will be used to monitor current services and see where any improvements need to be made. The discussions that have taken place during the development of this framework should continue throughout the lifetime of the Strategy and to help in the development of the next JSNA and Strategy.

