London Borough of Hackney Health and Wellbeing Board

Community Mental Health Transformation

24 March 2021







Introduction

These slides set out how mental health transformation in City and Hackney is making a reality of the vision in the Community Mental Health Framework for Adults and Older Adults

We started out transformation work in autumn 2019, building on the Neighbourhoods Programme. We were due to go live in March 2020 with the new care model but this was delayed due to the pandemic. We re-started the work in the summer and went live in our 3 pioneer sites in Hackney Marshes, Clissold Park and Well Street Common, between Oct 20- Jan 21.

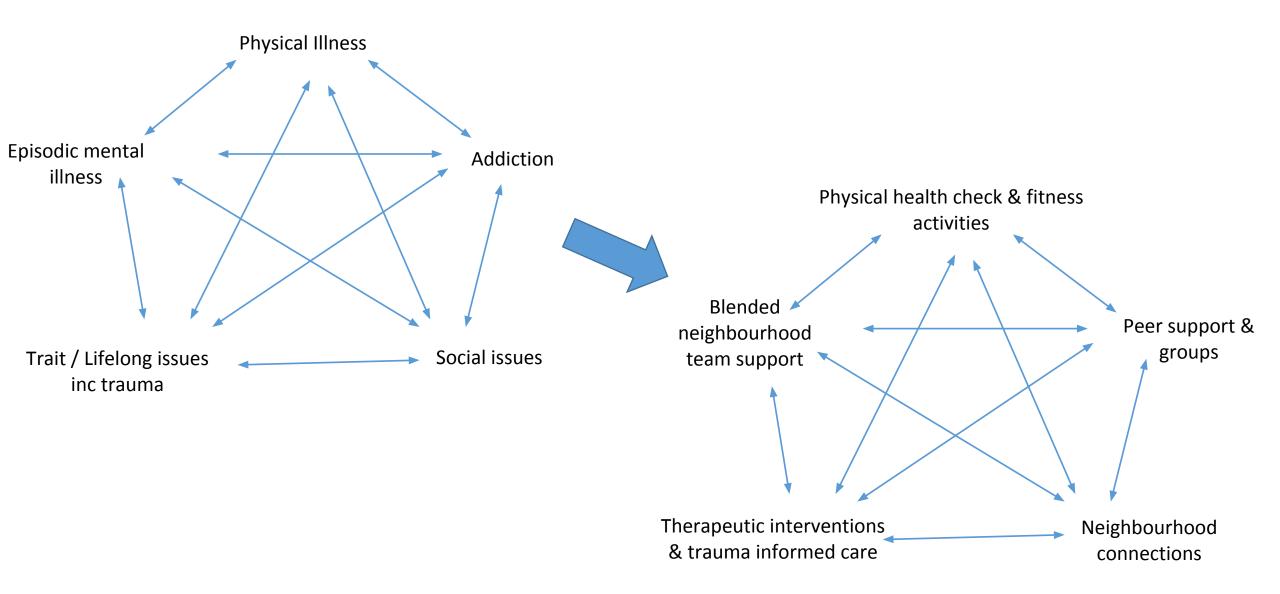
The slides highlight what's different in the new approach, looking at:

- 1. A focus on what matters to the resident
- 2. A new flexible model of care focused on social factors
- 3. An increased offer of community support
- More support and blended team working
- 5. A more responsive service

The next 2 slides describe the neighbourhood vision for mental health, moving from a web of complex factors that impact on people's mental health to a web of support, provided through neighbourhood teams involving voluntary sector, primary and mental health colleagues.

Slides 5 - 9 focus on what's different and the final slide captures some feedback.

Our Aim – Moving from Web of Complexity to Web of Support



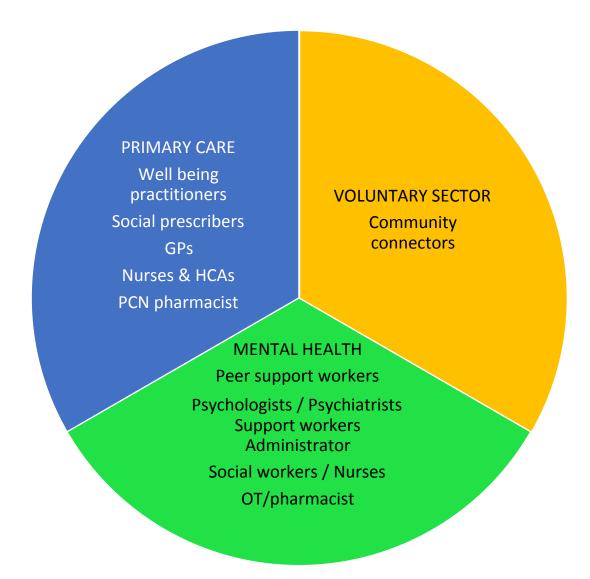
By creating Neighbourhood Mental Health Teams

The Neighbourhood Mental health team brings together colleagues in primary care, the voluntary sector and mental health in one blended team.

We have 3 pioneers sites: Hackney Marshes, Clissold Park & Well Street Common and plan to roll out to all neighbourhoods by July 2021.

The Health & Wellbeing Network is our voluntary sector partner, providing community connectors and wider links.

Turning Point, Core Arts, Riverside Housing and the Portman & Tavistock NHS Foundation Trust are all members of the team also.



1. A focus on what matters to the resident



- Resident innovation club formed so that residents co produce changes with services
- Residents co producing information, videos, pathways etc
- A range of neighbourhood based activities and clubs are being set up including cycling, football,
 table tennis, gardening and cookery
- Dialog+ outcome tool being used to ensure a focus on what matters to the resident
- Co produced recovery focused care plan will be used in the neighbourhood teams
- A new web and app based resident held record, called Patient Knows Best, being developed

2. A new flexible model of care focused on social factors

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- Focus on complexity and wider social factors that impact on mental health as well as diagnosis
- Trauma informed care approach and more psychological therapies in neighbourhoods
- Moving away from culture of closing cases so that people don't have to be re-referred but can access support quickly when it's needed
- No rejection culture the team will try to find support and solutions
- People are offered support tailored to their strengths & needs rather than a rigid set of 4 contacts a
 year
- A wider and more flexible range of support, where people can be flexed up into higher or lower levels of care

3. An increased offer of community support

- Community connectors supporting people to make links in their neighbourhoods and access community and voluntary sector support
- A range of new groups led by connectors, peer support workers, social workers, OT and psychology staff
- Plans to hold activities in community halls and spaces once Covid restrictions permit
- Forming more partnerships with the voluntary sector to co-design and deliver new services
- More integrated support available with health and social care partners via the Neighbourhood
 Programme e.g. the Neighbourhood Conversations, which bring together the community, voluntary
 and statutory sector partners

4. More support and blended team working



- Blended neighbourhood team includes voluntary sector, primary care, mental health and colleagues
 from other partners
- Daily and weekly meetings, as well as using MS Teams, encourages team members to talk to each other for support and joint solutions
- The ethos is about the team working together to come up with formulations and support packages rather than handing off to an individual professional
- A wider range of support is available such as pharmacy input

5. A more responsive service



- Residents are getting faster and more responsive service
- Daily meetings have regular input from wide range of team members including community connector, psychologists and doctors
- GP able to drop into daily and weekly meetings to discuss a referral for either supporting in the practice or accessing the team for more support
- Professionals from the wider virtual neighbourhood team, such as housing or substance misuse, can
 drop in

Feedback

'I thought the patient we discussed today in the daily blended team meeting was a good example of the blended team/neighbourhood doing a great job — in the past this man would simply have been 'rejected' by the secondary psychology service (SPS) and sent back to GP; but now with the new way of working I phoned him and discovered someone at risk of suicide in the near to medium term; we formed a plan, and I phoned him just now.

He was immensely grateful at having been thought about and for the plan we put in place. His mood has improved considerably as a result.

Worth it!'