

## BARNSELY METROPOLITAN BOROUGH COUNCIL (BMBC)

This matter is not a Key Decision within the council's definition and has not been included in the relevant Forward Plan.

Report of the Executive Director  
Core Services

### SCRUTINY TASK AND FINISH GROUP (TFG) REPORT ON ADULT MENTAL HEALTH – EARLY INTERVENTION & PREVENTION

#### 1. Purpose of report

- 1.1 To report to Cabinet the findings of the Overview & Scrutiny Committee (OSC) from the investigation undertaken on its behalf by the Adult Mental Health Task & Finish Group (TFG). This work follows on from last year's TFG investigation into crisis care and instead focuses on early intervention and prevention in relation to mental health. This work included considering brain health for the whole population to avoid even needing 'early intervention' services. The group met with the commissioners and providers of a number of local support services and highlight a number of recommendations in support of further improvement.

#### 2. Recommendations

- 2.1 That Cabinet considers the conclusions and recommendations set out in section 6 as a result of the TFG's investigation into Adult Mental Health – Early Intervention & Prevention.

#### 3. Introduction/Background

- 3.1 Further to last year's TFG undertaken on Adult Mental Health - Crisis Care, as part of its work programme the OSC agreed to continue this work and undertake a TFG investigation into early intervention and prevention in relation to adult mental health. Given both the local and national focus on the challenges being faced in relation to mental health issues, Members were keen to find out more about early intervention and prevention services available in Barnsley, as well as consider how we can promote wellbeing and resilience within all our communities.

- 3.2 The members of the TFG who undertook this investigation included the following: Councillor Gill Carr (TFG Lead Member), Councillor Jeff Ennis, Councillor Victoria Felton, Councillor Dorothy Higginbottom, Councillor Kath Mitchell, Councillor Clive Pickering, Councillor Nicola Sumner, Councillor Sarah Tattersall and Co-opted Member Mark Smith, Vice-Chair Healthwatch Barnsley. The group specifically co-opted Mark Smith as he helpfully assisted with the TFG's previous investigation and is involved in a number of forums, both locally and nationally who provide support and challenge to the provision of mental health services. This again provided additional expertise to the group as well as helped to avoid duplication of other work which has been undertaken.

#### 4. What the Task & Finish Group (TFG) looked at

- 4.1 Initially, the TFG met to consider the scope of the investigation. This included discussing all the key challenges they are aware of in relation to adult mental health and ensuring general wellbeing amongst the population, as well as raising concerns for specific groups such as those in-work, veterans and older people. The group felt they had limited knowledge in terms of available services to point people in their communities to. They agreed to meet with officers in Public Health to understand the overarching picture in terms of wellbeing, as well as hold sessions and visits to specific local services involved in this agenda.
- 4.2 The TFG undertook a number of 'check and challenge' sessions with officers regarding the work being carried out, future plans and key challenges. This involved asking questions of them

regarding their work, their involvement and partnership working with other agencies including the impact of this on Barnsley residents. This included:

- Meeting with Council representatives working in Public Health who are involved in the analysis and commissioning of wellbeing initiatives;
- Meeting with officers from the Council's Communities Directorate who commission the 'Umbrella' Service which provides intervention for mild mental health problems, as well as an officer from Humankind, the organisation who deliver the service;
- Undertaking a site visit to 'Men in Sheds' provided by Age UK Barnsley and meeting with service users and volunteer workers;
- Meeting with officers from South West Yorkshire Partnership NHS Foundation Trust (SWYFT) who provide the local Improving Access to Psychological Therapies (IAPT) Service;
- Undertaking a site visit to the Council's Adult Skills and Community Learning Service (ASCL) and meeting officers who deliver a range of courses, including specific ones for wellbeing, as well as meeting with service users;
- Finally, meeting with officers from Barnsley Clinical Commissioning Group (CCG) who commission the 'My Best Life' Social Prescribing Service from South Yorkshire Housing Association (SYHA), as well as officers who deliver the service.

## 5. What the Task & Finish Group found

- 5.1 The TFG received a presentation which gave an overview of mental health, including highlighting that one in four people experience a mental health problem each year. The presentation noted the importance of 'brain health' and that everyone should think about looking after themselves in the same way we do in terms of physical health. It is important that people develop skills to deal with life challenges and one of the key ways to do this is through '5 ways to wellbeing':



- 5.2 By doing these simple, no to low cost activities, everyone can feel better mentally. These are things which are implicit in local community activities such as being part of a group or even doing a local litter pick. The challenge however can be encouraging people to take part or people needing support to attend initially as they lack confidence. A simple reminder for people to do these things is a way to help people improve their wellbeing and avoid the need for accessing more specialist support services.
- 5.3 A key consideration for the TFG was support for people in work, especially to help reduce the stigma in relation to mental health. It was highlighted that this was often not helped by sickness policies where absences are simply recorded as 'mental health' with no distinction between whether this is anxiety, depression, psychosis, or whether the issues are related to problems at work or at home. The TFG were also concerned that this may result in inappropriate support for employees being put in place.
- 5.4 During last year's TFG, the group were made aware of the Council's plans to commission a new service to incorporate a number of previous contracts to provide interventions for mild mental health conditions. The TFG met with the commissioner and provider of the new 'Umbrella' service which offers five different types of support for people with low level mental health problems and or learning disabilities including: befriending; housing support; peer support; counselling; and group sessions. The TFG welcomed that the service had been named by a service-user and felt it was good that 'mental health' wasn't in the title to help avoid putting some people off from using the

service. The TFG were keen to highlight that they felt the term 'mental health' put people off accessing services and preferred the terminology 'emotional health'.

- 5.5 The TFG were pleased that the new contract avoided previous duplication, provided a more holistic service and was focused on performance monitoring of outcomes for individuals. Some group members were aware of some initial problems when the contract changed provider and were keen that the lessons learned are captured and utilised in future to avoid similar issues. At the time of the meeting, the new service had only recently commenced. The group welcomed the initial work done by the service to connect with local groups and agencies and hoped that this would continue, especially to ensure the service was connected with Area Councils and the Primary Care Networks (PCNs). The main concern for the TFG was that the service avoided being over-loaded with inappropriate referrals from other services who may also be struggling with demand.
- 5.6 As part of the investigation the TFG undertook a visit to the Age UK Barnsley 'Men in Sheds' project. This service provides a safe, supportive and friendly place to meet, where men can socialise, do a bit of light work or busy themselves doing a hobby or learn new skills. On meeting with the service users (Shedders), the group learned how some of them just attended to be able to have a chat with others over tea and biscuits. This was a safe space for them, which avoided drawing attention to it being a 'mental health' support service, but in-fact it embodies the principles of the 5 ways to wellbeing. Attending the service for some had been life-saving.
- 5.7 The positives of this particular 'Men in Sheds' service are that it is currently fully-funded which means the service users can attend without any pressure to produce products in order to ensure the service can continue. A number of local support services refer individuals to the project and TFG Members feel it is important that such services contribute financially to ensure that this and similar community groups are able to continue.
- 5.8 The next meeting of the group involved the Improving Access to Psychological Therapies (IAPT) service. This is a national NHS programme to ensure good quality research-based treatment for anxiety and depression. Locally it is commissioned by Barnsley CCG and delivered by SWYFT. Referrals can be made to the service or individuals can refer themselves. Interestingly, self-referrals tend to be the best as it means a person is ready to be treated and to make changes which is a key part of Talking Therapies. The TFG welcomed knowledge of the range of services that IAPT provided including one to one and group sessions as well as support for specific needs such as bereavement. The service had also recently identified a need to support women who had suffered a miscarriage prior to 20 weeks, as in these cases additional support services are offered; however, it is evident that many women are struggling to deal with early pregnancy loss.
- 5.9 The service was keen to support the removal of the stigma attached to mental health and also to help people see that our mental health is something we all have to manage. This includes normalising that people will feel stressed at times as part of everyday life, as well as that it is normal to take over a year to come to terms with a bereavement. Members were supportive of this approach and were also keen that the IAPT service was better linked with Area Council arrangements as well as other local services so that they could further impact on local communities.
- 5.10 The Barnsley IAPT service had recently developed a 'prescription pad' which had been given to GP surgeries and could be utilised by receptionists for patients who may benefit from the service. Alternatively, a list of helpful contact numbers is provided on the back for those who may need to access crisis care, or alternative low-level support services. The TFG welcomed this initiative and recommend expansion of its use as well as additional contacts to be added to the sheet.
- 5.11 TFG Members discussed the performance of the IAPT service and how it has challenging targets to meet. It was evident that mental health services are in high demand and it is important that the CCG are able to identify the baseline budget for mental health services from NHS England (NHSE) to ensure that appropriate funding is ring-fenced and allocated to services, especially given the

needs in Barnsley as well as the priority of mental health within the NHS 5 Year Forward View plans.

- 5.12 As part of the investigation, the TFG undertook a site visit to the Council's Adult Skills and Community Learning (ASCL) Service based in Wellington House. This service delivers adult education courses for work and wellbeing, to empower adults using the power of learning and skills development. The service supports some of our most vulnerable residents, using a person-centred approach, tailoring learning goals to meet the needs of each learner focussing on wellbeing as well as skills development. Having considered local data and intelligence regarding Barnsley having a significant number of people diagnosed with depression as well as low happiness scores, the service identified a need and therefore developed a number of specific wellbeing courses. This includes a 'Positive Thinking' and 'Positive Changes' course to help build individuals' confidence, resilience and self-esteem. The class sizes are small so that tutors are able to identify and meet individual needs and do not have long waiting lists to access them which is the case for some of our clinical services. The length of courses is also mixed as the service recognise that some people need chance to undertake a 1-hour taster session to engage them in the service, as they are likely to be put-off by having to commit to a 12-week course initially.
- 5.13 The ASCL service also promotes wellbeing through its creative subjects such as art, photography and cake decorating classes. These sessions again employ the principles of 5 ways to wellbeing as learners are able to 'connect', 'give', 'take notice' and 'keep learning'. Some courses are free to access to all and others are means-tested. The service however highlighted that even those who have to pay for courses see the benefits and continue to invest in coming, in the same way someone would fund attending exercise classes for their physical health. The TFG were given a tour of the building which included meeting with learners undertaking classes, within which the group were extremely impressed by the high standard of creative work being produced and displayed.
- 5.14 The TFG were also advised of how the service has invested in training its staff to be 'Mental Health First Aiders' (MHFA), so that they can identify and intervene for those who may be having difficulties. Work is being undertaken to identify how this resource can be used to train up key staff in the workforce, both in the Council and partner organisations. Given the front-line role Elected Members play in the community, the TFG were keen for them to access this training.
- 5.15 Finally, the TFG met with the commissioners and providers of the local social prescribing service 'My Best Life'. Social Prescribing is a way of working with people to connect them to non-medical community-based sources of support such as social clubs, volunteering opportunities, exercise programmes and education and learning opportunities. This is often targeted at those with mental health issues such as loneliness, isolation and depression. GPs have highlighted that the 10-minute appointment time they have with someone is not long enough to get to the bottom of underlying issues and can end up prescribing unnecessary medication. The TFG were pleased to hear of the asset-based person-centred focus of this service as well as that visits are undertaken in someone's own home so officers can see a truer picture of a service-user's living environment and the associated challenges.
- 5.16 The TFG questioned the provider and gained an appreciation for a non-medicalised model for this service. Also, that as a Housing Association which has operated in Barnsley for many years, they are familiar with the local community and local services, as well as have expertise in housing which is a critical factor in a person's health and wellbeing. The TFG also queried the extent to which the introduction of social prescribing within PCNs would impact on the service and were advised that work was being undertaken to map out services and avoid duplication. The TFG were positive with regards to the service provision; however, had concerns that no funding was made available to the support groups in the community which they were referring into.

## **6. Recommendations**

- 6.1 The TFG acknowledges that demand for mental health services at all stages on the continuum are increasing both locally and nationally against a backdrop of limited resource. Whilst recognising

that there is evidence of good partnership working amongst local agencies, the TFG makes the following recommendations in support of assisting with the continual improvement of services and support to local communities:

- 6.2 **Recommendation 1: '5 Ways to Wellbeing' should be promoted, with a specific Barnsley version developed to encourage the local audience to engage with it**  
Having discussed the '5 Ways to Wellbeing' the TFG were keen to promote this as a way for people to improve and maintain their emotional wellbeing. The TFG especially liked a poster which had been created with a local Yorkshire twist and felt that something similar should be developed to display across Barnsley, for example on toilet doors in work places, social and community venues, notice boards and online. The TFG also liked that this referred to wellbeing rather than 'mental health' as they feel this terminology acts as a barrier for some people to access relevant information.
- 6.3 **Recommendation 2: '5 Ways to Wellbeing' is incorporated as a consideration when Area Councils and Ward Alliances commission local services**  
Members identified how this simple consideration could assist in further promoting and improving wellbeing in local communities and how prioritising initiatives which positively contribute to this would additionally support spend on certain local services.
- 6.4 **Recommendation 3: BMBC's sickness recording and reporting should distinguish between the source of mental ill health so that issues can be addressed accordingly, and we should encourage other local employers to adopt this approach**  
The TFG are keen to reduce the stigma associated with mental ill health in the workplace. By recording the source of mental health absence, the TFG feel this will also assist in organisations implementing appropriate support mechanisms for employees to aid their recovery depending on the issues identified, for example if stress is work-related or non-work related.
- 6.5 **Recommendation 4: The IAPT Prescription Pad is rolled out to Pharmacists and the list of contacts includes the Council's ASCL Service**  
The TFG felt the prescription pad was very innovative and it would be good to expand its use. Given that IAPT needs to ensure the right referrals, the TFG felt it would be useful to expand the contact list to include the ASCL Service and highlight its wellbeing courses as this may be a more appropriate intervention for some individuals rather than Talking Therapies.
- 6.6 **Recommendation 5: An All Member Information Briefing is held on the Council's ASCL Service so that Members are aware of the services on offer, especially the wellbeing aspects which Members could refer constituents to**  
Having visited the ASCL Service, the TFG were impressed by the person-centred approach adopted in terms of meeting individual wellbeing needs. As highlighted in the session, the most effective referrals to the service come by word of mouth; therefore, it would be helpful to increase knowledge of the services on offer to local members, especially given the recently broadened wellbeing curriculum.
- 6.7 **Recommendation 6: The names of Mental Health First Aiders should be listed alongside Physical First Aiders in all Council buildings, as well as encouraging other organisations to do the same**  
The group were keen to recognise mental health first aid as being as important as physical first aid; therefore, would like to see the contact names visible for each building as you would expect with those trained in physical first aid. As the training is rolled out and Council employees meet with other organisations, the TFG would like to encourage this good practice to be spread.
- 6.8 **Recommendation 7: Elected Members are provided with Mental Health First Aid training**  
Given the role of Elected Members in the community and the vulnerable constituents they come into contact with, the TFG felt that it was essential for members to receive this training.

6.9 **Recommendation 8: Work produced by those undertaking ASCL courses should be displayed in Council buildings, specifically the Cooper Gallery alongside case studies of those who have produced the work**

The TFG felt the art work produced from the classes was of such a high standard it should be displayed in public areas. This would act as both encouragement to those who have produced the work as well as be an advert for the ASCL Service. The art work could be displayed alongside case studies of those who have undertaken courses, many of whom now have improved mental wellbeing and have moved into employment and out of poverty.

6.10 **Recommendation 9: A specific budget is made available as part of the commissioning of Social Prescribing services to ensure community groups and activities which they refer to receive funding to contribute to running costs**

The TFG were complementary with regards to the social prescribing service; however, felt that it was essential that financial support was made available to local community services, especially given that this is the practice elsewhere in the country.

6.11 **Recommendation 10: The Overview and Scrutiny Committee undertakes further investigation specifically on access to early intervention and prevention services in relation to children's mental health and wellbeing as part of its future work programme**

Given this investigation focused on support to adults, the TFG felt it was important to explore and scrutinise services available for children and young people in relation to their mental health and wellbeing. This is especially pertinent given the demand on specialist Child and Adolescent Mental Health Services (CAMHS); thereby it is important to establish what early help support services are available and to what extent they are effective.

The TFG would like to take this opportunity to thank all those who provided information, attended meetings and assisted with the TFG's investigation; it is much appreciated.

**7. Implications for local people / service users**

7.1 The investigation undertaken by the TFG as well as the recommendations made are in support of improving health outcomes for people in Barnsley. The TFG recognises the importance of people's mental health in all aspects of their life and the negative impacts poor wellbeing can have on individuals and communities. The TFG is keen that local communities are aware of the importance of the 5 ways to wellbeing and the relevant services and opportunities they could engage with, most of which are non-statutory services.

**8. Financial implications**

8.1 There are no specific financial implications, although in responding to the recommendations in the report, the financial implications of these would need to be fully assessed by the appropriate services responding.

**9. Employee implications**

9.1 There are no specific employee implications, although in responding to the recommendations in the report, the employee implications of these would need to be fully assessed by the appropriate services responding.

**10. Communications implications**

10.1 It is evident that there is a lack of awareness of the number of support services in local communities which can be accessed. Also, that maintaining positive brain health is something we all need to do; the services which support this are not necessarily medical. It is therefore important that opportunities to share this information clearly and in accessible formats, is maximised. A number of the recommendations included in the report are in support of communicating the variety and access to services/opportunities.

**11. Consultations**

- 11.1 Consultations have taken place with: the Adult Mental Health TFG Members; the OSC; Councillor Jim Andrews; Councillor Jenny Platts; Councillor Tim Cheetham, Council Officers from the Public Health, Communities and Place Directorates; Age UK Barnsley, Barnsley CCG; SWYFT; SYHA; and the Council's Senior Management Team.

## **12. The Corporate Plan and the Council's Performance Management Framework**

- 12.1 As outlined in the Corporate Plan, the three priorities for Barnsley are: a thriving and vibrant economy, citizens achieving their potential, and strong & resilient communities. Positive mental wellbeing is critical to achieving all of these priorities, therefore it is essential the Council and its partner organisations work together to support these aims.

## **13. Promoting equality & diversity and social inclusion**

- 13.1 The TFG is keen to ensure that all Council services and activities are accessible to all its communities. Throughout the TFG's involvement in this work they have specifically referred to making sure that services are accessible to all, particularly given the vulnerabilities of some of those accessing mental wellbeing support. The TFG welcomed knowledge of services being person-centred to ensure that they meet individual needs and enable equality of access. It was also noted that services had appropriate safeguarding practices in place to identify those who are vulnerable and make relevant referrals to other support agencies.

## **14. Tackling the impact of poverty**

- 14.1 A growing body of evidence has shown strong links between those of lower socioeconomic status and an increased likelihood of developing and experiencing mental health problems. Similarly, employment status is linked to mental health outcomes, with those who are economically inactive to be more likely to experience common mental health problems. It is therefore important to acknowledge that increased mental wellbeing support may be required in our more deprived communities. Also, that tackling the impact of poverty will help to improve mental wellbeing amongst our communities.

## **15. Tackling Health Inequalities**

- 15.1 There are large health inequalities between Barnsley and England, and within Barnsley itself. Improving people's mental wellbeing and reducing health inequalities will help local people to reach their full potential. The investigation undertaken by the TFG and recommendations made are in support of improving services across the borough; with recognition that additional work may be required in specific communities to help address health inequalities.

## **16. Risk management issues**

- 16.1 The Council's Strategic Risk Register (SRR) is currently under review; therefore, the reference to specific risks is likely to change. However, it is likely the recommended activities detailed in this report will contribute further to the effective mitigation of risks associated with poor mental wellbeing in Barnsley, and it would be appropriate for any follow-up report to be cognisant of these risks.

## **17. Glossary**

ASCL	Adult Skills & Community Learning Service
BMBC	Barnsley Metropolitan Borough Council
CCG	Clinical Commissioning Group
IAPT	Improving Access to Psychological Therapies Service
MHFA	Mental Health First Aid

NHSE	National Health Service England
OSC	Overview and Scrutiny Committee
PCN	Primary Care Network
SYHA	South Yorkshire Housing Association
SWYFT	South West Yorkshire Partnership NHS Foundation Trust
TFG	Task and Finish Group

## 18. **Background papers & links**

- OSC TFG Report on Adult Mental Health Crisis Care (Cab.17.4.2019/8):  
<https://barnsleymbc.moderngov.co.uk/documents/s48061/Overview%20and%20Scrutiny%20Committee%20-%20Task%20and%20Finish%20Group%20-%20Adult%20Mental%20Health%20Crisis%20Care.pdf>
- Response to the OSC TFG Report Recommendations on Adult Mental Health Crisis Care (Cab.10.7.2019/8):  
<https://barnsleymbc.moderngov.co.uk/documents/s55291/Adult%20Mental%20Health%20-%20Response%20to%20Scrutiny%20Task%20and%20Finish%20Group.pdf>
- Barnsley All-Age Mental Health and Wellbeing Commissioning Strategy 2015-2020:  
<https://barnsleymbc.moderngov.co.uk/documents/s10452/All-age%20Mental%20Health%20Commissioning%20Strategy%202015%20-%202020%20-%20ADOPTED.pdf>
- Barnsley Umbrella Early Intervention & Prevention Support Service:  
<https://www.humankindcharity.org.uk/service/umbrella-early-intervention-and-prevention-support-service>
- Age UK Barnsley Men in Sheds:  
<https://www.ageuk.org.uk/barnsley/our-services/men-in-sheds/>
- Barnsley Improving Access to Psychological Therapies (IAPT) Service:  
<https://www.barnsleyiapt.co.uk/>
- Barnsley Adult Skills & Community learning Service:  
<https://www.barnsley.gov.uk/services/adult-skills-and-community-learning/>
- Barnsley My Best Life Social Prescribing Service:  
<https://www.barnsleyccg.nhs.uk/patient-help/social-prescribing.htm>

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