



Health and Social Care Scrutiny Board (5)

Time and Date

10.00 am on Wednesday, 23rd June, 2021

Place

This meeting will be held remotely. The meeting can be viewed live by pasting this link into your browser: <https://youtu.be/SHDI1hD34eY>

Note: This meeting is not being held as a public meeting in accordance with the Local Government Act 1972

Public Business

1. **Apologies and Substitutions**
2. **Declarations of Interest**
3. **Minutes** (Pages 5 - 10)
 - (a) To agree the minutes of the meeting held on 16th December, 2020
 - (b) Matters arising
4. **Emotional Wellbeing and Mental Health Support to the Population of Coventry** (Pages 11 - 20)

Joint Briefing Note

Representatives from Coventry and Warwickshire Partnership Trust and Coventry and Warwickshire CCGs have been invited to the meeting for the consideration of this item.

Members of the Education and Children's Services Scrutiny Board (2) have also been invited to attend for this item along with Councillors P Seaman and B Gittins, Cabinet Member and Deputy Cabinet Member for Children and Young People and Councillor K Sandhu, Cabinet Member for Education and Skills

5. **Community Mental Health and Transformation - Adults and Suicide Prevention** (Pages 21 - 30)

Joint Briefing Note

Representatives from Coventry and Warwickshire Partnership Trust and Coventry and Warwickshire CCGs have been invited to the meeting for the consideration of this item.

6. **Work Programme 2021-22** (Pages 31 - 34)

Report of the Scrutiny Co-ordinator

7. **Any other items of Public Business**

Any other items of public business which the Chair decides to take as matters of urgency because of the special circumstances involved

Private Business

Nil

Julie Newman, Director of Law and Governance, Council House Coventry

Tuesday, 15 June 2021

Notes: 1) The person to contact about the agenda and documents for this meeting is Liz Knight Tel: 024 7697 2644 Email: liz.knight@coventry.gov.uk, alternatively information about this meeting can be obtained from the following web link: <http://moderngov.coventry.gov.uk>

2) Council Members who are not able to attend the meeting should notify Liz Knight as soon as possible and no later than 9.00 a.m. on Wednesday, 23rd June, 2021 giving their reasons for absence and the name of the Council Member (if any) who will be attending the meeting as their substitute.

3) Scrutiny Board Members who have an interest in any report to this meeting, but who are not Members of this Scrutiny Board, have been invited to notify the Chair by 12 noon on the day before the meeting that they wish to speak on a particular item. The Member must indicate to the Chair their reason for wishing to speak and the issue(s) they wish to raise.

Membership: Councillors J Birdi, J Clifford (Chair), T Khan, R Lancaster, G Lloyd, A Lucas, A Masih, E Ruane and D Skinner Mr D Spurgeon Co-opted Member

By Invitation: Cabinet Members/ Deputy Cabinet Member – Councillors K Caan, B Gittins, M Mutton, P Seaman and K Sandhu
Scrutiny Board 2 – Councillors F Abbott, P Akhtar, J Blundell, J Innes, S Keough, R Simpson, R Thay, C Thomas and A Tucker Mrs S Hanson and Mrs K Jones (Co-opted Members)

Liz Knight

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Coventry City Council
Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 10.00
am on Wednesday, 16 December 2020
This meeting was held remotely

Present:

Members: Councillor J Clifford (Chair)
Councillor M Ali
Councillor J Birdi
Councillor L Harvard
Councillor R Lancaster
Councillor C Thomas, substitute for Councillor Innes

Co-Opted Member: Mr S Linnell, Coventry Healthwatch and substitute for Mr D Spurgeon

Other Members: Councillors K Caan and M Mutton, Cabinet Members for Public Health and Sport and Adult Services

Other Representatives: Simon Gilby, Coventry and Warwickshire Partnership Trust
Andy Hardy, University Hospitals Coventry and Warwickshire
Andrew Harkness, Coventry and Rugby CCG
Philip Johns, Coventry and Warwickshire CCGs
Rose Uwins, Coventry and Rugby CCG

Employees: V Castree, Law and Governance
L Knight, Law and Governance
G Quinton, Deputy Chief Executive

Apologies: Councillors J Innes, E Ruane and D Skinner
Mr D Spurgeon, Co-opted Member

Public Business

19. Declarations of Interest

There were no declarations of interest.

20. Minutes

The minutes of the meeting held on 11th November were agreed as a true record. There were no matters arising.

21. Restoration of Non-Covid Services in Coventry

The Board received a briefing note of Andrew Harkness, Coventry and Rugby and Warwickshire North CCGs which provided an overview of the monitoring, recovery and restoration plans for non-Covid services in Coventry. The Board were also provided with a presentation from Andrew Harkness and Simon Gilby, Coventry and Warwickshire Partnership Trust. Andy Hardy, University Hospitals Coventry

and Warwickshire provided an update from the perspective of the hospital. Philip Johns, Coventry and Warwickshire CCGs, and Rose Uwins Coventry and Rugby and Warwickshire North CCGs also attended the meeting along with Councillor K Caan, Cabinet Member for Public Health and Sport and Councillor M Mutton, Cabinet Member for Adult Services.

The briefing note indicated that on 31st July, 2020, NHS England wrote to Trusts and Clinical Commission Groups in indicate the start of Phase 3 of the Covid response and the need to restore services following the first wave of the pandemic. The letter outlined the national expectations for the restoration of services within the NHS under the following headings:

- i) Accelerating return to 'normal'
- ii) Preparation for winter alongside possible Covid resurgence
- iii) Reflecting Covid lessons-learnt and embedding positive change.

The briefing note detailed these expectations.

As a system the local health service was recovering services well and, as of the week commencing 25th November, the majority of services were now coming close to or even exceeding the levels from the same period the previous year. In particular, a restoration plan was in place in respect of Community Mental Health Services; levels of diagnostic activity were back at or exceeding levels normally expected for the time of year, with referrals returning to previous pre-Covid levels; all elective surgery services had been restarted and GP services were being restored in line with the guidance; A and E attendances were lower than the same period last year and dental services were being restored in line with national guidance.

The briefing note provided data on outpatient, day case and electives activity for Coventry and Warwickshire along with specific details of the two week wait pathways and the sixty two day wait pathways for cancer services. Assurances were provided about the recovery progress. The Board were reminded that a lot of patients chose to defer cancer treatment in the first Covid wave, thus extending the period of time before treatment.

Further information was also provided on the restoration and supporting access to GP services in the city. The Board were informed of the significant changes to the delivery of primary care introduced to protect the health and wellbeing of both patients and staff. All practices moved to a 'total triage' model, along with a digital first approach. Reference was made to the CCG campaign to help ensure that the public in all demographics understood that GP services were available to them which included media campaigns. The treatment routes for patients with potential Covid-19 or confirmed positive patients was highlighted.

With respect to Dental Services, most practices were providing face to face care and 90% could offer aerosol-generating procedures through the use of enhanced infection control measures and PPE, however capacity to see patients was still very restricted. The management of urgent patients and those in vulnerable groups was still the priority for many practices. The Board noted that there were 93 Urgent Dental Centres across the Midlands providing urgent care for patients without access to a practice.

Andrew Harkness commenced the presentation for the CCG with a summary of the Phase 3 restoration which also included statistical details for the following service areas: cancer; diagnostics; outpatients; elective; and urgent and emergency care. The current situation regarding GP appointments was highlighted and an update was provided on the Community Covid-19 vaccination, in particular the wider roll out by the GP led Primary Care Network. There were currently 5 PCNs across Coventry and Warwickshire vaccinating those 80 and over, care home workers and vulnerable NHS staff. Coventry's first site was the Keresley Green Medical Centre with more sites to follow during December and into 2021.

Simon Gilby, CWPT, presented on the issue of mental health, with key issues being that demand was returning to 2019 levels at a slower rate than anticipated after the first wave; referrals received were complex cases; significant use was being made of digital video platforms to sustain service delivery; and modelling had been undertaken to provide some guidance on future Covid generated demand from the first two waves.

Statistical information was provided for the referrals to the Mental Health Community Services including comparison data and details of the contacts undertaken. Crisis referrals had shown an upward trend at the start of the pandemic, followed by a fall which was probably due to transformational changes implemented during this time. CWPT was still accepting a greater proportion of referrals indicating that changes had been having a positive impact with inappropriate referrals being signposted to an appropriate service at an earlier stage. CAMHS referrals had also shown an upward trend since the start of the pandemic.

Andy Hardy, UHCW, reported on the background to Margaret Keenan being given the first Pfizer Covid vaccine in the world at the city's hospital. He reported that the hospital had now vaccinated over 2,000 people in the three priority groups which included 1,000 care home staff. A second vaccination centre was about to be opened on the hospital site. Currently there were 107 patients with Covid at the hospital, with 14 in intensive care. Whilst numbers were rising they weren't near the high numbers of the first peak of the pandemic. Attention was drawn to the lessons learnt from treating earlier patients which meant that less people were now requiring intensive care support. Additional information was provided on the work to reduce the backlogs of patients requiring treatment that had arisen over the spring/ summer months.

The Board were informed of the excellent partnership work across the local health and care system.

Members questioned the representatives on a number of issues and responses were provided, matters raised included:

- Support for all the excellent work undertaken by the partner organisations present since the start of the pandemic
- What work was being undertaken by CWPT to ensure people with mental health issues accessed services at an earlier stage to prevent them from presenting with complex problems
- Clarification and further details about the waiting times for CAMHS appointments

- Were there any areas where there were gaps in service provision which were giving cause for concern from the CCG perspective
- What was happening about weigh-in services in the community
- Information about the success of hospital discharge and the use of blue beds and support for the work of the Adult Social Care teams
- An acknowledgement of the need to protect and support the mental health of staff working across the health and care system
- A concern about local residents being advised that they can pay for some medical treatments when they should be available on the NHS
- A concern that patients are deferring treatments/ appointments because of fears about catching Covid-19 and what happens when this occurs
- Clarification about how the local podiatry service was operating and emergency eye clinics
- Clarification about the roll out of Covid-19 vaccinations across the city and details of the communications campaign to encourage take up with particular reference to the BAME communities, including assurances that the vaccine is safe
- Support for the voluntary care workers across the city for all they have done during the pandemic
- What lessons had been learnt to date during the pandemic that would help the health and care system to cope if further problems arose after Christmas and was there enough resilience to maintain services
- Were there any concerns that Brexit might impact on the supply chains for the vaccine

Members placed on record their thanks and support for all the work being undertaken by all the staff in the health and care system during the current pandemic, including the voluntary sector.

RESOLVED that the content of the briefing note, presentation and oral update be noted.

22. Work Programme 2020-21 and Outstanding Issues

The Board considered their work programme for the current municipal year. It was proposed to submit a report on Child, Adolescent and Adult Mental Health Services to the March meeting of the Committee.

RESOLVED that:

(1) A report on Child, Adolescent and Adult Mental Health Services to be submitted to the meeting of the Board scheduled for 24 March 2021.

(2) The work programme for 2020-21 be noted.

23. Any other items of Public Business

There were no additional items of public business.

(Meeting closed at 11.25 am)

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Briefing note

To: Health and Social Care Scrutiny Board (5)

Date: 23rd June 2021

Subject: Mental Health and Wellbeing Paper A - Emotional Well-being and Mental Health support to the population of Coventry

1. Purpose of the Note

- 1.1. This paper is a supplementary briefing to compliment the paper for community mental health provision for adults (all ages) and focuses on the emotional well-being and mental health support for children and young people.
- 1.2. The purpose of the briefing note is to provide an update to Scrutiny Board 5 on the Community based mental health and emotional well-being services for the population of Coventry with a particular emphasis on restoration and recovery from Covid-19.

2. Recommendations

2.1. It is recommended that Scrutiny Board 5:

- Notes the progress to date and endorses the plans to further progress the mental health and emotional wellbeing support available to Coventry

3. Context/Background

- 3.1. In March 2020, Government initiated national lockdown measures to control the spread of Covid-19 virus. This meant services had to rapidly adapt and embrace virtual and remote working to ensure support continued to be provided to local people during these challenging times.
- 3.2. The Covid-19 pandemic has had an impact on everyone's emotional wellbeing and mental health, in particular children and young people. Although services have continued to provide a virtual support offer during Covid, not all children and young people have had the equipment, support or confidence to access support through a digital platform. This has meant some children and young people have become more isolated, which is likely to have a negative impact on their emotional wellbeing. YoungMinds surveyed more than 2,100 children and young people in March 2020 to understand the impact national lockdown has on their mental health. A report *Coronavirus: Impact on young people with mental health needs: Survey 1 (2020)*¹ revealed that 83% of respondents said the Covid-19 pandemic has made their mental health worse. The report also concluded there is a need to have funding and resources available to NHS, Schools,

¹ https://youngminds.org.uk/media/3708/coronavirus-report_march2020.pdf

Charities and other providers to enable services to be delivered, including digital, virtual, text-based and telephone therapies.

- 3.3. A further survey of 2036 children and young people was conducted by YoungMinds between June 2020 and July 2020. The outcome published in *Coronavirus: Impact on young people with mental health needs: Survey 3 return to school (2020)*² found an increase in children and young people who felt their mental health had got worse since returning to school.
- 3.4. A more recent report has been published by NHS Digital, *Mental Health of Children and Young People in England (2020)*³ in July 2020. This report evidences the rates of probable mental health disorders have significantly increased to 1 in 6 children aged 5 to 16 a being identified as having a probable mental disorder, which is evident across males and females. In Coventry, as of 2020, this could be around 9,000 children and young people, which is a significant proportion of our population. The report also evidences the likelihood of a probable mental health disorder increases as children and young people age, which is likely to affect females more than males.

4. What is working well?

- 4.1. The detail below outlines the initiatives that have been led by health and social care as part of the suite of support available for emotional wellbeing and mental health needs during the Covid pandemic.
- 4.2. Coventry City Council in partnership with Coventry and Warwickshire Clinical Commissioning Group (CWCCG) have commissioned Kooth, an online virtual support offer for emotional wellbeing and mental health, for children and young people aged 11 to 25. Kooth, which went live in Coventry on 12 April 2021, will:
 - Enhance Coventry's early intervention mental health support offer
 - Widen accessibility through an open referral process for children and young people aged 11 to 25.
 - Enable children and young people to gain quicker access to mental health support.
 - Give children and young people more choice and control, when accessing support
 - Provide additional support to care leavers

A significant amount of communication and engagement has taken place around Kooth including via newsletters and social media. Additional targeted messages were also promoted with all educational facilities in June 2021 to support those school leavers following this year's GCSE and A level assessments.

- 4.3. As a consequence of national lockdown and school closures, a system wide working group, known as the mental health surge working group, has been developed to monitor and review referral data into mental health services. The purpose of the group is to ensure a co-ordinated system wide response to supporting children and young people with emotional wellbeing and mental health issues. The working group provides an opportunity for services to come together to build working relationships, understand each other services, and to help avoid duplication across the system.
- 4.4. In January 2021, the mental health surge working group developed a children's and adults' mental health service offer leaflet which was circulated to all schools across Coventry. Please see appendix 1 below. Schools have been asked to share this with their staff and with parents/

² <https://youngminds.org.uk/media/4119/youngminds-survey-with-young-people-returning-to-school-coronavirus-report-autumn-report.pdf>

³ <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2020-wave-1-follow-up>

carers to ensure people are aware. The leaflet was also shared across social media through a public health led initiative the #Take5 campaign, which was to encourage people to look after themselves using the 5 ways of wellbeing; Be active, Connect, Give, Keep learning, Take notice.

- 4.5. In September 2020, the Government launched a Wellbeing for Education Return training programme as a response to providing mental health and emotional wellbeing support to schools and colleges. Coventry Educational Psychology Team took the lead on the local roll out of this programme and hosted a number of webinars during November 2020. The training programme focusses on developing a whole school approach to managing mental health and emotional wellbeing and building resilience, which had over 120 nominated leads within education settings (primary and secondary schools, colleges and specialist provision) attending the initial webinar. From January 2021 onwards, Educational Psychologists will also be providing 1:1 consultation sessions to all education settings who attended the webinars to focus on: the onward cascade of the training programme, strengths and needs of developing a whole school approach, and to identify any specific training needs (anxiety and low mood, bereavement and loss, and stress and trauma). Information collated from the 1:1 sessions will provide data around what the local education setting needs are.
- 4.6. On 07 and 14 June 2021 system wide mental health webinars were delivered to School leads. The webinars, which were hosted by commissioners and delivered by a range mental health providers and Early Help, focused on the local emotional wellbeing and mental health offer available in Coventry. The webinars were recorded so other school professionals are able to access following the events alongside Frequently Asked Questions (FAQs).
- 4.7. Coventry and Warwickshire Mind have adapted their offer during the Covid-19 pandemic, involving the move to a digital platform. This has seen the development of:
 - 6-week webinar programme, designed to build resilience and help them identify and regulate emotions. This is a rolling programme for ages 7-11, 11-14, and 15-18.
 - Digital youth groups and quizzes, whilst parents have been able to access a parent forum for support.
 - Continuation of counselling support during Covid moving to an online virtual platform
 - Weekly virtual education staff peer support sessions were launched in December 2020, each week focussing on five ways to wellbeing; safety online, how to talk about mental health, self-esteem and confidence, supporting family wellbeing, guilt, grief, boundaries, and growth mind-set.
 - Resource packs and themed newsletters which have been circulated to all schools, parents and carers, children and young people and professionals. These documents provide information, advice, and guidance on how to manage emotional wellbeing at home, during the Covid crisis.
 - Pre-recorded webinars were produced and are accessible to children and young people on the waiting list for the Reach service since August 2020.
 - Back to School Resource Booklets for primary and secondary schools were created and sent to schools in August 2020, to support all children and young people in preparation for returning to school in September 2020. These resources were adapted and re-sent to schools in February 2021.
- 4.8. Coventry has received NHS England funding to develop and implement two mental health support teams (MHSTs) in schools. MHSTs are made up of Educational Mental Health Practitioners (EMHPs) who have a new qualification developed by Health Education England. The teams are equipped to provide low level Cognitive Behavioural Approaches that can be accessed directly. The staff trained via a university course which ran from September 2019 to September 2020.

- 4.9. The MHST service has continued to provide support during lockdown. EMHPs were providing support to 8 schools pre-Covid however for the period of the first lockdown provided an optional service to all schools across Coventry for an interim period. The project has returned to its normal development plan and will grow the access to up to 31 schools as per the project brief.
- 4.10. The Primary Care service has continued to offer support and consultation to schools and those professionals reaching out the service via the Rise Navigation Hub. Rise delivered a series of training sessions to professionals on self-harm to support those professionals who were dealing with distress. These were delivered across Coventry and Warwickshire and reached more than 1000 people working with and supporting children and young people.
- 4.11. In March 2020 the Rise mental health service for children and young people made rapid changes to the Crisis Team, moving it to a new location at Whitestone Clinic, Nuneaton, where it could access clinical space to see children and young people away from acute hospitals, given the expectation they would be running at maximum capacity in response to Covid 19. The Navigation Hub was supported with additional capacity for consultation should this be needed.
- 4.12. In response to the request by NHS England to support children and young people during the pandemic, the service introduced a 24/7 Crisis Telephone contact service. This freephone number (08081 966798 Select Option 2) allows direct contact with NHS staff for support advice and guidance. This was put in place in less than 10 days from request. Additional support has been provided by the Neurodevelopment team for those families where the loss of structure and routine has caused distress and difficulties for families with a child with a neurodevelopment or autistic spectrum condition, who have reached out to the navigation hub or have been in contact the Crisis telephone line.
- 4.13. The digital offer of Rise was significantly enhanced with the introduction of the NHS secondary care solution for digital consultation platform. Other advances include the redevelopment of the CW Rise Website www.cwrise.com, and the enhancement of social media activity for Rise providing positive messages and support. The service developed the #thankskids to recognise the acts of kindness and support made by children and young people in the pandemic. This has been further supported by the Jimmy Hill Legacy Fund of the Sky Blues Football Club.
- 4.14. As part of recovery planning activities, additional investment has been made by the Clinical Commissioning Group for the recurrent growth of the children and young people Eating Disorder service and the children and young people Crisis Team.
- 4.15. NHS England released short term winter pressures and specialist commissioning investment from December 2020. This funding has been used to develop the skills of the Eating Disorder workforce with specialist high intensity training, additional capacity was created by embedding Neuro development staff in the Crisis team to support and consult on cases being referred.
- 4.16. This additional short-term investment was also used for those in crisis and for those with an eating disorder and saw the development of a multi-agency 'Think Family support Service'. The Think Family Support Service is a partnership model between health, social care (Coventry and Warwickshire LAs), and NHS Trust provider, that will deliver in-reach (to help support children and young people back into the community) and outreach support (to provide intervention within the community to help avoid hospital admission) to children and young people in crisis and with eating disorders across Coventry and Warwickshire.
- 4.17. The rapid changes to the crisis offer and the instalment of telephone service happened with such pace there was no time to consult with children and young people and families on this. Additional investment has been provided by NHS England which has been utilised to commission PeopleToo, an independent voluntary sector organisation. PeopleToo commenced in January 2021 and undertook a detailed consultation and engagement exercise to seek views

from children and young people and parent carers around their support needs to ensure the service is accessible and. A final report will be concluded in June / July 2021.

- 4.18. Throughout the Covid pandemic all services across the system have continued to operate and deliver emotional wellbeing and mental health service to meet the needs of our local children and young people, during this difficult time.

5. What are we concerned about?

- 5.1. National Lockdown restrictions for children and young people has prevented normal access to support from school, friends, clubs and the activities that children and young people utilised to help support their emotional wellbeing. Early indications have identified that children and young people have experienced increased levels of anxiety and separation distress without the ability to normalise this in the way they would have done before restrictions. There are some specific areas where there are increased levels of complexity and demands for services, in particular eating disorders and children and young people presenting in crisis.
- 5.2. Overall referrals into the navigation hub dropped by 55% in the in the first 3 months of the pandemic as schools changes their admission criteria which resulted in the majority of pupils being at home, and as the usual exam pressures were removed with the cancellation of school exams.
- 5.3. The Eating Disorder service is an area of concern. Despite the general trend of a reduction in referrals to services at the outset of the pandemic, eating disorders referrals increased in quantity and complexity.
- 5.4. Referrals increased by 18% to the Eating Disorder service in 2020/21 compared to 2019/20. The complexity of referrals resulted in an increase in the need for a comprehensive eating disorders assessment. On average, during 2019/20 there were 100 children and young people on the caseload compared to 128 for 2020/21. As of the 7th May 2021 there were 160 children open to the team for assessment and/or intervention. This complexity growth has also resulted in a greater number of children and young people being referred to at acute settings with needing physical stabilisation of their eating disorder. While additional investment has been provided against increased demand during the pandemic, the increased levels of need alongside more complex cases, further investment is required to provide additional resources, and this is being planned for. In addition, as a system we are working closely with NHSE to support the development and capacity of this service offer.
- 5.5. As stated in 5.2 the local and the national picture shows a significant drop off in all referrals for mental health services following the first national lockdown. However demand for the Rise crisis resolution and home treatment team has grown, with the team seeing 42% more referrals in 2020/21 than it was anticipated it would at its launch in October 2019 (1432 referrals received in 2020/21 against an anticipated demand of 1000 referrals at the launch in October 2019).
- 5.6. Locally and nationally, there has been a surge in demand for support for children and young people who are in a state of crisis in both the community and presenting at acute hospitals. Locally, the services established to support these children and young people experienced demand beyond their capacity which resulted in the need to use capacity from elsewhere in the system. Nationally, with increased demand accompanied with a lack of capacity in the NHS England specialist commissioned beds (known as Tier 4 beds) this has resulted in children having to wait in hospital for longer periods of time before moving into a tier 4 bed, when available.
- 5.7. An established multi-agency system protocol has been utilised to escalate and co-ordinate a multi-agency response to this issue. This has followed with a structure of oversight and decision

making established via accountable officers in a Gold command supported by a silver command team, a bronze command development meeting and a Bronze multi-disciplinary team to ensure that all agencies are engaged at all levels of problem solving. Alongside the Gold, Silver and Bronze command calls, there are also daily multi-disciplinary team meetings to review all the children and young people who are in hospital and to mobilise discharge plans in a co-ordinated way when children and young people are medically fit for discharge.

- 5.8. While the crisis demand has started to reduce, the nature of this problem and the risk that exists when capacity limits are exceeded means that additional work is taking place to ensure safety of children and young people in the community and in hospital. An example of this has been deploying additional mental health staff to the acute ward settings and coordinating a system wide staffing and capacity update each weekend.
- 5.9. There is additional work taking place to gain the current local context and deploy the most appropriate additional support model. This to manage includes scoping of a multi-agency day support or drop in facilities for children in crisis. All agencies are engaged in understating the needs in our systems and working to a solution.
- 5.10. Data collected suggests social isolation is a growing problem. Children and young people who rely on school or activity groups to prevent this are left with increased vulnerability which can't be mitigated against without face to face contact/ support. Where previously school acted as a protective factor, this has been removed due to closures or changes in access criteria (vulnerable and keyworker children only) and therefore the needs of these children and young people have escalated. With restrictions now easing there will be an ongoing need to support children and young people with a reintegration to new relationships and societal norms.
- 5.11. The pandemic limited the amount of face to face contact that could be achieved in normal clinical spaces. Those in urgent need were seen face to face by our Crisis Team however in line with other areas we have enabled a digital consultation solution to allow Children and Families to engage via Attend Anywhere which is the NHS secondary Care Digital consultation platform. This has supported our ongoing contact with children and young people during this pandemic.

6. What are the next steps?

- 6.1. There is an extension of the Think Family Support Service for children and young people in crisis with eating disorders who are presenting at acute settings. Additional funding to expand this service is being sought. A review is underway to determine the impact of the service and to help shape the future offer.
- 6.2. Mental health surge working group continues to monitor the mental health referrals coming into the system to understand the needs and demand. An action is being developed to utilise the data to enable targeted work to be done around particular issues where there are high numbers of referrals being presented into mental health services.
- 6.3. Further roll-out of the Kooth programme to ensure children and young people (aged 11 to 25), parent carers and professionals are aware of the offer. The data provided by Kooth on a quarterly basis will feed into the mental health surge working group, to develop a greater understanding of our local needs. The data collated will also identify the geographical location (based on Coventry Wards) of where support is being accessed. Data can then be analysed to develop a greater understanding of need within Family Hub areas. The first quarterly data is due in July 2021.
- 6.4. The children in crisis working group will continue to meet to implement interventions to help support children and young people in the community and prevent crisis. One of the actions was

to implement Kooth which has been mobilised across Coventry and Warwickshire. Further work is being explored, via Gold, Silver and Bronze command

- 6.5. PeopleToo are in the process of finalising their report around the crisis offer within Coventry and Warwickshire. The finding of this report will help inform the focus of the crisis offer across the Coventry and Warwickshire.
- 6.6. Significant resources have been made available from national transformation monies from NHSE service in April 2021, across Coventry and Warwickshire, to support the development of CAMHS provision / services. This additional resource will help to meet the increased demand across the CAMHS system, to support the growing demand caused by the pandemic. Currently across the CAMHS partnership, proposals are being developed which have been submitted to NHSE in early May 2021. Some of the plans include:
- Expanding the Eating Disorder service to accept referrals for young adults up to the age of 18 years and 364 days.
 - Expanding the Eating Disorder workforce to help manage the increased demand and complexity.
 - Introducing an intensive community-based eating disorder support service to support increased complexity in the community.
 - Developing a treatment pathway for restrictive eating disorders (these are a different clinical presentation and intervention model to an eating disorder) as part of the children and young people's eating disorder service
 - Expanding the Crisis and Home Treatment team to allow additional clinical capacity for therapeutic support flexibly in the community, engaging with any day or drop support that is developed and supporting the acute sector.

Authors

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Are you worried about a child, young person or their family?

Here are some useful numbers and links for services that can provide support

24/7 Crisis line

For urgent calls for children and young people who are experiencing a mental health crisis contact the 24/7 Rise Crisis team on

Freephone 08081 966798
(select option 2)

Coventry City Council Early Help

Families, children and young people can get information, advice, guidance, and family support through Early Help. We will make sure children and young people get the right help at the right time.

0800 887 0545

www.coventry.gov.uk/earlyhelp

Family Health and Lifestyles Service

Helping children and young people take responsibility for their own health and adopt a healthy lifestyle through: School Nurses, Health Visitors, Stop Smoking Services, the Be Active Be Healthy team, Infant Feeding Team Family Nurse Partnership and MAMTA.

There is also **ChatHealth**, a free confidential text service **07507 331 949** for 11-18-year-olds.

024 7518 9190

www.swft.nhs.uk/our-services/children-and-young-peoples-services/coventry-family-health-and-lifestyle-service-0-19-years

Positive Choices

A free confidential service for young people aged between 5 and 24 to talk about drug and alcohol issues, relationships and sexual health. The service helps young people make positive choices and changes, with support is through groups, one-to-one or online – or even through the new Ecotherapy allotment project.

Kelly: 07776 963938

Craig: 07741 900799

Sharon: 07741 900829

coventryyp.info@cgl.org.uk

www.changegrowlive.org/positive-choices-coventry

Children and young people MH Service

If you would like to talk about a child or young person, you can have a consultation with a mental health clinician within the Navigation Hub. You can also talk to the Primary Mental Health Team, who can provide wider training for professionals around identifying and supporting mental health needs in children and young people.

Rise Navigation hub
0300 200 2021

cwrise.com

Primary Mental Health Team
024 7696 1476

Virtual School

Is the child a Looked after Child (LAC) or previously looked after (PLAC)? The virtual school can offer support and advice to schools, nurseries and colleges.

024 7697 5535

virtualschool@coventry.gov.uk

www.coventry.gov.uk/virtualschool

CAMHS Looked After Childrens (LAC) Services

Children Looked After service offers therapeutic interventions to children and young people aged 5-18, who are currently looked after by Coventry local authority and are living within a 20-mile radius of Coventry. Support includes Attachment difficulties, breakdown of relationships, Self-harm, early trauma, and behavioural difficulties Therapeutic parenting PACE, DDP. Referrals from Professionals sent to Rise Navigation hub on

0300 200 2021

www.cwrise.com

Coventry and Warwickshire Relate

We are part of the Reach service in Coventry providing counselling support for children and young people aged 5-18 years of age experiencing poor mental health, bereavement and loss and family change.

We offer the Wish service supporting children and young people that have witnessed / experienced Domestic violence and abuse. All referrals to this project need to come via social care.

Services are provided remotely during COVID-19.

024 7622 5863

Our office is open 9-5 but the delivery of our appointments include evenings and Saturday mornings

info@relatecoventry.org

www.relatecoventry.org

Coventry SEND Support Service

Coventry SEND Support Service continues to offer support to schools through their link SEND professionals. This includes work with families, children and young people and setting staff; this support is usually agreed through the setting SENCo or other members of the leadership team. In the event of 'critical incidents' including sudden or unexpected deaths, members of the school leadership team can contact the Educational Psychology Service to seek advice and support - please ring 024 7678 8400 and an EP will get back to you as soon as possible and where possible on the same day.

024 7678 8400

BSCLimbrickWoodCentre

@coventry.gov.uk

www.coventry.gov.uk/recoverycurriculum

NSPCC National Services

As part of the NSPCC's fight for every childhood, we work directly with children and families in our service centres across the UK and Channel Islands and give support to thousands of adults and young people in need through the NSPCC Helpline.

We work with primary schools up and down the country through our Speak Out Stay Safe programme, helping children to keep themselves safe.

Our projects such as Together for Childhood help children who've experienced abuse, support parents, and work to transform the way communities come together to prevent child cruelty.

Do you know how to keep your kids safe online? In partnership, NSPCC and O2 have developed Net-Aware, a great guide to the latest and most popular social networks, apps and games kids are using.

www.net-aware.org.uk

0808 800 5000

Childline Tel: 0800 1111

● NSPCC Local services

The Coventry Service Centre provides targeted support to children and families living in Coventry and Warwickshire. During the pandemic, we are able to offer support virtually as well as face to face within our service centre.

The services we offer at the Coventry service centre are currently:

InCtrl

Keeping children aged 9 to 13 safe online to prevent technology-assisted child sexual abuse (TA-CSA)

Turn the Page

supports children and young people overcome feelings that have made them display harmful sexual behaviour

Building blocks

creative, home-based programme for parent and carers of children under 7 who may need support in gaining the skills and knowledge they need to care for their child.

If you wish to enquire about our local services in Coventry, please contact us to speak with one of our practitioners.

02476 222 456

coventry.servicecentre@NSPCC.org.uk
Monday, Tuesday, Thursday or Friday 9am – 1pm

● CW Mind – Reach Service

Coventry and Warwickshire Mind have the Reach service for children and young people living in Coventry, aged 5-18, who are experiencing poor mental health, for example low self-esteem, anger or anxiety. During COVID-19, all provision of support from this service continues remotely.

To make a referral following the link

www.cwmind.org.uk/children-and-young-peoples-service/

024 7663 1835

Monday to Thursday from 9am until 4.30pm and Friday from 9am until 4.00pm.

Reach@cwmind.org.uk

www.cwmind.org.uk/reach/

● CW Mind – Community Children's Autism Support Service (CCASS)

Coventry and Warwickshire Mind offer Community Children's Autism Support Service, which offers various (digital) support for children and young people up to 18 years with Autistic Spectrum Disorder (ASD) in Coventry and Warwickshire and training or drop in sessions to parents/carers and professionals. Referrals for social clubs made directly to CW Mind please email vibes@cwmind.org.uk, referrals for CCASS will be accepted from education provision (SENCo, Educational Psychology etc) and must include the Dimensions Tool report

www.dimensions.covwarkpt.nhs.uk

● Buddy Service

The Buddy Service helps reduce social isolation and loneliness - expected to be a growing concern due to COVID - alongside anxiety, new phobias, and OCDs. The service helps those aged 13-18 to build their social connections, confidence, happiness and independence and overcome barriers to accessing support.

www.cwmind.org.uk

● Young Black Men's Project

An early intervention and prevention mental health programme run by black men, for young black men. The service works to raise awareness of mental health and tackle stigma within the community.

024 7655 2847

ybm@cwmind.org.uk

www.cwmind.org.uk/young-black-men-2

● Positive Youth Foundation

The Positive Youth Foundation (PYF) is a registered charity that provides a wide range of high-quality programmes and opportunities for some of the most vulnerable young people in Coventry aged 8-25.

Our work offers a valuable early intervention for children and young people experiencing lower-level mental health problems such as stress, anxiety, or depression. We offer a range of interventions for young people depending on their needs, including very flexible one-to-one support; alternative learning for those struggling at school; open access youth work; sports and physical activity sessions; tailored short programmes and on-line and home-based support.

To refer a young person or to find out more about our services,

info@positiveyouthfoundation.org

www.positiveyouthfoundation.org/our-work/

● Grapevine Coventry and Warwickshire

Teenvine plus (COVID Next Steps) is an intensive programme available for young people with learning disability or autism who are struggling with school/service engagement. They may also face additional barriers like mental health needs, isolation or cultural barriers to support. A formal diagnosis is not required to access the project. Each young person will receive between 6 and 12 months help where they will be supported to develop a plan for a better future and self identify ways to engage with support available to them. They will be supported both one to one in in groups to help develop confidence, friendship and make connections to the wider youth community.

07984 160840

nmadden@grapevinecovandwarks.org

www.grapevinecovandwarks.org/

Coventry Youth Activists (CYA) are a campaigns group changing young lives in Coventry. CYA members decide on the issues that matter to them and set about making positive change for themselves and others.

sgreener@grapevinecovandwarks.org
candrew@grapevinecovandwarks.org

www.grapevinecovandwarks.org/what-we-do/shifting-power/

● Adult MH Support

A wide range of support including one-to-one, mental health courses to help people better understand and manage their own mental health.

www.cwmind.org.uk

● Pathfinder One-to-Ones

024 7622 9988

pathways@cwmind.org.uk

www.wbc.cwmind.org.uk/pathfinder

● Recovery Wellbeing Academy

www.recoveryandwellbeing.co.uk

● Community Support

024 7601 7226

www.cwmind.org.uk/community-support-service

● Coventry Safe Haven

A drop-in available to anyone aged 18+ for out-of-hours mental health support. A welcoming, safe, comfortable, non-judgmental and non-clinical environment, that provides information and emotional support.

07921 876 065

coventryhaven.mhm@nhs.net

www.mhm.org.uk/coventry-safe-haven

● Improving Access to Psychological Therapy (IAPT)

Helping those aged 16+ with symptoms of anxiety or depression.

024 7667 1090

www.covwarkpt.nhs.uk/IAPT

● Other useful websites:

cwmind.org.uk/get-help/

www.coventry.gov.uk/adultmhs

www.coventry.gov.uk/sendiasmhw



www.coventry.gov.uk



Briefing note

To: Health and Social Care Scrutiny Board (5)

Date: 23rd June 2021

Subject: Mental Health and Wellbeing Paper B - Community Mental Health Transformation – Adults and Suicide Prevention

i. Purpose of the Note

- 1.1 This paper is a supplementary briefing to compliment the paper for children and young people (Paper A) and focuses on community mental health provision for adults (18 to 65).
- 1.2 The purpose of the briefing note is to provide an update to Scrutiny Board 5 on the Community based mental health and emotional well-being services for the adult population of Coventry with an emphasis on restoration and recovery from Covid-19.
- 1.3 This paper also provides an update on Suicide and Suicide Prevention work in Coventry.

ii. Recommendations

2.1 It is recommended that Scrutiny Board 5:

Notes the progress to date and endorses the plans to further progress the mental health and emotional wellbeing support available to Coventry.

iii. Context/Background

3.1 Community Mental Health Transformation

- i. Improving the Mental Health and Emotional Wellbeing of our communities is a key priority both nationally and at a Coventry and Warwickshire level. We are working together across the health and social care system to deliver the ambition of the NHS long term plan in the context of understanding the needs of our local populations. By 2023/24 the Long-Term Plan states 'All ICSs will have received funding to develop and begin delivering new models of integrated primary and community care for adults and older adults with severe mental illness'. The constraints of Covid-19 have placed additional challenges on delivery, but we have remained able to offer our services throughout the last year, albeit using different ways of engaging with our service users.
- ii. Primary Care and Community Mental Health services have been under considerable and increasing pressure. Some people referred to specialist mental health services could have been helped more quickly and effectively if our system was better integrated. People have told us that this means that their emotional and mental health needs are not always responded to in the right place or at the right time.

- iii. Colleagues in general practice are reporting seeing more people with mental health issues as they have come out of isolation as COVID restrictions have been relaxed. As a system we are now seeing patients previously not known to services presenting with mental health needs which is contributing additional pressure within existing services.
- iv. Coventry and Warwickshire Health and Care Partnership (HCP) were informed in January that we had been successful in accessing non recurrent NHSE transformation funding to help transform community mental health services in line with the Long-Term Plan. This is in addition to agreed increases in baseline funding:

Table 1. Community Mental Health Transformation Funding

Year	CCG Baseline Funding	Transformation Funding
2021/22	£2.0m	£1.8m
2022/23	£4.0m	£4.5m
2023/24	£6.0m	£5.6m
2024/25	£6.0m	£0

- v. The community mental health funding is specifically to support adults with severe mental illness. It is known that people struggling with severe mental illness have on average 20 years less life expectancy than the general population (Schizophrenia Commission, 2012)
- vi. The funding will be used in support of the Long Term Plan’s objectives to have new and integrated models of primary and community mental health care i.e. a community based offer that will include access to psychological therapies; improved physical health care, employment support, personalised and trauma-informed care; medicines management and support for self-harm and co-existing substance abuse. This funding is expected to maintain and develop new services for people with the most complex needs; and proactive work to address racial disparities and other health inequalities.
- vii. The funding provides a once-in-a-generation opportunity to boldly transform the community mental health offer in Coventry and Warwickshire, resulting in an enhanced experience of easily accessible (‘no door’), integrated and seamless pathways for people with severe and enduring mental illness.
- viii. Outline proposals were submitted to NHS England to help secure the funding, which had been developed by a multi-agency team made up of NHS service providers and commissioners; local authority colleagues including social care, housing and public health; and partners from the voluntary care and social enterprise (VCSE) sector. The proposals were also based on engagement that had taken place with local citizens including users of mental health services.
- ix. Whilst the proposals set out key principles of what the future model will look like, it also set out our commitment to working with local communities across Coventry and Warwickshire to develop the future model and services.
- x. For the next three years, we will work together to re-design and re-organise mental health services and how people can access them. This will include re-organising core mental health teams to work at a “place” based level, and to have an integrated offer across health, social care and VCSE – aligned to Primary Care Networks – with the aim of giving adults and older adults more choice and control over their care, and empowering them to live well in their communities.

- xi. The principles illustrated below underpinning the transformed model have been user and carer-guided and co-designed by a multi-sector alliance of partners including experts by experience, health, local authorities and VCSE colleagues.

Figure 1 Our Principles of Transformation



- xii. The new model will be a shift in the focus from ‘what’s wrong with me’ to ‘what’s happened to me’. Inequality will be tackled by reducing barriers to accessing help; and increased delivery of psychological interventions, Individual Placement and Support (IPS) and health checks to people with SMI.
- xiii. Existing community teams will be consolidated and aligned to Primary Care Networks (PCNs). New pathways will be integrated across sectors and settings to allow seamless delivery of appropriate interventions, targeting a range of difficulties and wider determinants of mental health (debt management, housing, relationship support, psychological interventions and specialist health pathways). Movement along the pathways will be simplified by conversations and co-working rather than bureaucratic referrals and processes.
- xiv. Transformed services will include new roles to support needs with housing, advocacy, finances, employment, social isolation and education. These roles will include paid peer recovery workers, people who have experienced mental health and/or service users taking up paid roles to support our understanding from the perspective of somebody with lived experience (CWPT are a trailblazer site for these roles) and new clinical staff including therapy roles and specialist pharmacy roles who will review medication within PCNs. For service users. Through working with people with lived experience our new model should

feel responsive and caring, offering seamless care by avoiding silos and gaps between services.

3.2 Urgent and Acute Care

- i. Coventry and Warwickshire Health and Care Partnership (HCP) have identified that by supporting people earlier on in mental health crisis, in the community helps to avoid inpatient admission which is more effective and beneficial to patients for their recovery thereby improving outcomes and patient experience.
- ii. Following funding from NHSE, the services below have come online over the last 2 years and we have been able to strengthen and transform our urgent and acute care pathway to enhance inpatient gatekeeping and facilitate early discharge into the community.
 - Psychiatric Clinical Decision Unit operating 27/4 implemented in February 2019 as an assessment area which provides an environment for assessment and development of treatment plans for more complex service users who are in crisis.
 - In December 2019, a Safe Haven in Coventry was commissioned to provide an out-of-hours mental health support service for individuals.
 - In April 2020 Warwickshire County Council commissioned a Safe Haven to provide an out-of-hours service based in Nuneaton.
 - 24/7 Mental Health Access Hubs (MHAH) were implemented in September 2020 where all mental health referrals are rapidly triaged in new locality-based Hubs by robust and skilled multi-disciplinary mental health professionals. The MHAH incorporates the Crisis and Home Treatment provision.
 - The MHAH has streamlined home treatment provision which has supported the facilitation of early discharge from inpatient wards.
 - All admissions are now gatekept by the MHAH's and early discharge is integral to the admission process.
 - The implementation of CORE 24 standards in early 2020 for the Mental Health Liaison Services aligned to our Acute Hospitals in University Hospital Coventry and Warwickshire and Warwick Hospital and 24/7 mental health cover at George Elliot Hospital. This will support adults and older adults presenting with a mental health crisis in EDs and general hospital wards, and their families and carers, will benefit from 24/7 access to liaison mental health services, more specifically a swift and compassionate assessment of their mental health needs and ongoing support.

In addition:

- Community MH Service have implemented locality hubs which are aligned to the MH Access Hubs. This transformation programme is ongoing over the next 18 months as part of the transformation programme for Community Mental as described in section 3.1
 - From August 2020 the Street Triage service has been expanded into South Warwickshire with the service operating between 5pm-2am, Tuesday to Friday each week.
 - Due to COVID19, Inpatient wards have introduced an admission ward for all patients strengthening gatekeeping across the service.
 - Peer Support Workers and Wellbeing Navigators have been introduced to support the urgent care pathway.
- iii. For 2021/22 to 2022/23 Coventry and Warwickshire Health and Care Partnership (HCP) have been successful in obtaining funding from NHS England/Improvement to strengthen the mental health crisis pathway by establishing alternative forms of provision. The

purpose of the funding will be to increase the range of local alternatives to A&E, mental health inpatient care and mental health crisis teams.

- ii The transformation work will develop alternatives which will increase the capacity and range of options for people when they are in mental health crisis. Across Coventry and Warwickshire, a “Crisis Plus Initiative” will be developed which will include the implementation of:
 - **Collaborative Intensive Outreach** Team which will establish a Multi-Disciplinary Team (MDT) to work with people who frequently need to use mental health crisis services.
 - **Social Intervention Collective** which will offer support to people whose mental health crises come about as a result of a variety of social issues.
 - **Crisis House** provision which will offer short-term overnight accommodation for people who are in crisis. The facility will offer intensive support to help manage a mental health crisis over a short period of time, usually as an alternative to hospital admission.

3.3 Suicide and Suicide Prevention

- i. In November 2016, the Health and Wellbeing Board signed off the Coventry Suicide Prevention Strategy for 2016-2019. The strategy was designed to harmonise with the aims and approaches of the West Midlands Combined Authority WMCA mental health commission and with the strategic aims of our neighbouring authority Warwickshire.
- ii. Whilst the strategy, vision and strategic priorities remain current, the original action plan to November 2019 was refreshed by the steering group and developed into a forward plan for 2020 - 21. This was signed off by the Coventry Health and Wellbeing Board in January 2020.
- iii. The Coventry and Warwickshire Health and Care Partnership received suicide prevention funding for 3 years from NHSE. This programme is now complete, and an evaluation report will be published in the Autumn. Key aspects of this programme around crisis support, inpatient safety, real time surveillance, bereavement support and community resources will continue as legacy programmes.

iv. What is working well?

4.1 Community MH Transformation

- i. Waits for initial assessment in community mental health services were on average 18 weeks, in September 2020, we implemented a new way of managing referrals into services, on the back of a new development in the ‘front door’ triage process. Learning from the hub models that we implemented through the pandemic, we utilised a new process called Locality pathway allocation which allows all referrals to be managed in a timely way, and ensures that people are seen by the right professional at the right time and in the right place, this new process has successfully reduced initial waits for assessment down to 4 weeks on average from 18 weeks.
- ii. Year one of delivery for the transformation programme is in full flow and the Programme Board of all system partners has been established to oversee delivery and implementation.

- iii. Work Streams have been established are working to scope and develop new pathways. This includes a co-production steering group to oversee an ambitious plan to establish a service user design authority which will directly input into the clinical work streams for the programme.
- iv. A local co-production strategy has also been approved, so work is now starting with the support of the national charity Rethink in conjunction with the local VCSE organisation, Grapevine, who work closely with local citizens to engage, support and increase resilience.
- v. The new model with more innovative, integrated and proactive ways of working is already being phased in. In early 2021 new Access Hubs and Community Locality Hubs were established to deliver more localised care; PCN liaison workers are in three PCNs across Coventry and Warwickshire (selected on their state of readiness) to support seamless links between mental health and social interventions; and primary and secondary mental health care.
- vi. In 2021/22 there will be further roll out of these new roles, further development of psychological interventions, IPS and physical health checks in SMI. A consolidation and realignment of existing community teams to deliver Place-Based Services, new Personality Disorders and community rehabilitation pathways will all start in the first year and roll out in 2022/23; followed by new models of care for Eating Disorders.

4.2 Urgent and Acute Care

- i. For Crisis Alternatives governance for the programme has been established which incorporates system partners to oversee delivery and implementation.
- ii. As part of the new model multi-disciplinary team working has been established and weekly meetings in place for professionals from health and social care to collaborate on care treatment plans for individuals.

4.3 Suicide and Suicide Prevention

- i. Coventry and Warwickshire's real time surveillance system of deaths by suicide has been established, and a Coordinator has been based within the Coroners team since January 2021. Notifications are sent weekly to Warwickshire and Coventry public health teams to enable the monitoring of trends, clusters and the identification of emerging risk factors
- ii. Network Rail/Samaritans data shows a 3% decrease in deaths on the local rail network over the previous 12 month rolling period and an increase in network and station-based interventions.
- iii. A successful 3-year funding bid for a Coventry and Warwickshire postvention suicide bereavement service was awarded by NHSEI in January. The service is being commissioned by Coventry City Council, Warwickshire County Council and Coventry and Warwickshire Clinical Commissioning Group working in partnership. The service is currently out to tender and will be available as an all age support service to Coventry and Warwickshire residents by September 21.
- iv. Free CWPT, Papyrus and commissioned forward for life courses on suicide awareness have been delivered to stakeholders and front-line staff were delivered throughout 2020/21.

- v. Suicide safer university plans have been developed by Coventry and Warwick Universities. A multi-disciplinary mental health support group has been set up between the Universities, CCC adult social care mental health team and CWPT. The Pod has also received funding for this year to support 18–25-year-olds, particularly university students, impacted by COVID reaching secondary mental health
- vi. In October 2020, as part of local action for World Mental Health day, the HCP launched the local Dear Life website. In May 2021 videos of local, male survivor stories produced for the HCP by Coventry University were launched on the Dear Life site.

5. What are we concerned about?

5.1 Community MH

- i. We are seeing an increase in demand and acuity across our community mental health services for referrals and caseloads in recent months compared to the pre-pandemic period.
- ii. We are making particular reference to The NHS 'Advancing Mental Health Equalities Strategy', (Sept 2020) which highlighted the social and economic impacts of the Covid-19 virus are disproportionately impacting specific groups, including black, Asian and minority ethnic (BAME) communities.
- iii. There are likely to be challenges in recruitment and retention of staff, particularly in qualified roles, as services expand.

4.3 Urgent and Acute Care

- i. We have seen an increase in demand on acute psychiatric inpatient admissions and wider crisis services and the acuity of patients has increased over the period of the pandemic.

5.3 Suicide and Suicide Prevention

- i. There is still a high male prevalence in local and national suicide rates. Between September 2018 and March 2021 circa 70% of deaths by suicide across Coventry and Warwickshire were male. Recent case profiling has also identified an increased risk in the student population in Coventry.
- ii. Access to real time data to aid responses and learning from deaths by suicide to support prevention has been a gap. In January 2021 a dedicated coordinator (based in the coroner's office) was appointed. Routine data collection direct from the coroner's system has now been established. Funding for this dedicated resource ends in December 2021, an exit strategy will be required to be developed in order to sustain the surveillance function in the future.
- iii. There are gaps in support for families and close contacts bereaved by suicide. Group based support is currently provided via the non-commissioned charitable and voluntary sector. The Coventry and Warwickshire Health and Care Partnership scoped the additional support required in the system through a commissioned research project that took place between December 2018 to March 2019. The research identified that although there is group support for people bereaved by suicide across Coventry and Warwickshire, there is no formal

process of referral. A gap also exists in trauma informed practical and emotional support to those affected in the immediate aftermath following a death by suspected suicide which itself is a risk factor for suicide.

- iv. Awareness raising and training of frontline workers should continue as a priority. Critical moments such as the point of job loss, contact with healthcare professionals or the criminal justice system are often not taken advantage of to assess the risk of suicide, particularly where these factors affect men. Services often only become involved when men are a risk to themselves or others. Statutory services dealing with issues such as substance misuse, housing issues or employment also have an opportunity to engage at risk populations and work with other services to manage suicide risks.
- v. COVID impact and suicide risk. Because of the time it takes to register suicides, it's too early to know the effect of the pandemic on national suicide rates. Evidence from the National Confidential Inquiry (NCISH) and the University of Manchester suggests that suicide rates during the first national lockdown in England have not been impacted. The effects of the pandemic are however being disproportionately felt by the most vulnerable people in society and are exacerbating factors we know are related to suicide.
- vi. The multi-agency Coventry and Warwickshire Suicide Prevention Steering Groups led by Public Health will continue to oversee this work going forward and will make recommendations as and when appropriate.

*The above data has been pulled through the draft MH Needs assessment for the Coventry and Warwickshire JSNA 21/22 (Public Health Coventry and Warwickshire)

v. **What are the next steps?**

6.1 Community Mental Health Transformation

- i. Programme management will be fully established in the next few months including recruitment and establishment of a programme team and the governance framework for the programme.
- ii. The programme will develop the pathways for Eating Disorders, Personality Disorders, Community Rehabilitation with a view to mobilisation and implementation in the second part of the year.
- iii. Mobilisation of the co-production strategy will continue which is a core to this programme and includes the establishment of a design authority who will work the above workstreams to ensure patient, service users and carers lived experience is embedded into design and delivery of the implementation.

6.2 Urgent and Acute Care

The programme team is working to:

- i. Implement Phase 2 of the MHAH and CORE 24 standard for the Mental Health Liaison Services.
- ii. Develop a co-production action plan which is aligned to the Community Mental Health co-production strategy.

- iii. Implement of the Warwickshire Social Intervention Collective Model.
- iv. Procure the Crisis House provision working with VCSE providers.

6.3 Suicide Prevention

- i. An audit of Coventry and Warwickshire coroner records is underway to compare deaths during the lockdown period with previous years. A joint area learning panel and case review process is in development
- ii. A Coventry and Warwickshire mental health joint strategic needs assessment including suicide will be produced by June 2021 for Health and Wellbeing Boards to consider recommendations
- iii. An all age suicide bereavement support service for Coventry and Warwickshire residents will be in place by September 2021
- iv. A partnership event to present the projects and evaluation of the NHSE funded suicide prevention programme will take place in September 2021.

Authors

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Agenda Item 6

Health and Social Care Scrutiny Board Work Programme 2021/22 23 June 2021

Please see page 2 onwards for background to items

23rd June 2021
<ul style="list-style-type: none">- Emotional Wellbeing and Mental Health Support to the Population of Coventry- Community Mental Health Transformation
14th July 2021
<ul style="list-style-type: none">- NHS Restoration- Access to GP Services
22nd September 2021
<ul style="list-style-type: none">- Adult Social Care; Annual Report (Local Account) 2020/21 and Adult Social Care Performance
3rd November 2021
<ul style="list-style-type: none">- Director of Public Health and Wellbeing Annual Report
8th December 2021
-
2nd February 2022
-
23rd March 2022
-
2021/2022
<ul style="list-style-type: none">- NHS Long Term Plan- Primary Care- Health and Wellbeing Strategy Priorities Refresh- Adult Safeguarding Annual Report 2020/21- Drugs and Alcohol Overview- Social Prescribing- Coventry and Warwickshire Maternity, Children and Young People Programme (MCYP) (Joint with SB2)- Child and Adolescent Mental Health (Joint with SB2)

Date	Title	Detail	Cabinet Member/ Lead Officer/ Organisation
23rd June 2021	- Emotional Wellbeing and Mental Health Support to the Population of Coventry	To scrutinise the emotional wellbeing and mental health support to the Population of Coventry with a focus on the emotional well-being and mental health support for children and young people.	Coventry and Warwickshire Partnership Trust/ Coventry City Council
	- Community Mental Health Transformation	To scrutinise community based mental health and emotional well-being services for the adult population of Coventry with an emphasis on restoration and recovery from Covid-19.	Coventry and Warwickshire Partnership Trust
14th July 2021	- NHS Restoration	Changes were made to NHS services to enable the management of the pandemic. This item will outline the process by which services will be restored across the sub-region.	Coventry and Warwickshire CCG
	- Access to GP Services	To scrutinise access to GP services. This includes appointment booking process and access to face to face care.	Coventry and Warwickshire CCG
22nd September 2021	- Adult Social Care; Annual Report (Local Account) 2020/21 and Adult Social Care Performance	To scrutinise the Adult Social Care Local Account 2020/21 and Adult Social Care Performance.	Cllr M Mutton/ Pete Fahy (CCC)
3rd November 2021	- Director of Public Health and Wellbeing Annual Report	To present information on the annual report for and feedback on progress from previous reports.	Liz Gaulton
8th December 2021	-		
2nd February 2022	-		
23rd March 2022	-		

Health and Social Care Scrutiny Board Work Programme 2021/22

Date	Title	Detail	Cabinet Member/ Lead Officer/ Organisation
2021/2022	- NHS Long Term Plan	A further report on the NHS Long Term Plan be submitted to a future meeting of the Board with particular reference to the £139m of savings already achieved including how these had been secured; the impact on current services; any services that had been discontinued; details of anything that had been outsourced and staffing levels	Sir Chris Ham
	- Primary Care	An item to look at Primary Care, including the recruitment and retention of GPs, Supporting Self Care and changes to service delivery post Covid-19.	Coventry and Warwickshire CCG
	- Health and Wellbeing Strategy Priorities Refresh	To look at the updated Health and Wellbeing Strategy and the actions to progress the refreshed three priorities.	Liz Gaulton
	- Adult Safeguarding Annual Report 2020/21	This is an Annual Report received by the Board on Adult Safeguarding.	Rebekah Eaves
	- Drugs and Alcohol Overview	The Drug and Alcohol Strategy is due to end in 2020. Following the outcome of the CLear Assessment, the strategy will be revised and Members will feed into the revised strategy. Outcome of CLear Assessment and service user feedbacks (May/ June 2020).	Sue Frossell,
	- Social Prescribing	This item will explore the concept of social prescribing and feedback on the evaluation of the pilot which has taken place in the City.	Liz Gaulton
	- Coventry and Warwickshire Maternity, Children and Young People Programme (MCYP) (Joint with SB2)	Looking scrutinise plans to develop and deliver joined-up services commissioned for babies, children, young people and their families being developed as part of the Coventry and Warwickshire Health and Care Partnership work programme.	Anna Hargrave, South Warwickshire CCG

Date	Title	Detail	Cabinet Member/ Lead Officer/ Organisation
	- Child and Adolescent Mental Health (Joint with SB2)	To include referral pathways, wait times, support whilst waiting for diagnosis and the impact of diagnosis on families and educators.	Coventry and Warwickshire CCG

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