

LONDON BOROUGH OF CAMDEN	WARDS: All
REPORT TITLE Coproducting a new mental health day support service in Camden	
REPORT OF Managing Director, Camden Division, Camden and Islington (C&I) NHS Foundation Trust	
FOR SUBMISSION TO Health and Adult Social Care Scrutiny Committee	DATE 12 th September 2023
<p>SUMMARY OF REPORT</p> <p>The purpose of this paper is to update Camden's Health and Adult Social Care Scrutiny Committee on the progress of coproducing a new mental health day support service in Camden.</p> <p>Local Government Act 1972 – Access to Information</p> <p>No documents that require listing have been used in the preparation of this report.</p> <p>Contact Officer:</p> <p>James Fox Senior Policy and Projects Officer Adults and Health London Borough of Camden 5 Pancras Square London N1C 4AG James.fox@camden.gov.uk</p>	
<p>RECOMMENDATIONS</p> <p>The Committee are asked to note and comment on the report.</p>	

Signed:



Peter Cartlidge, Operation Director C&I NHS Foundation Trust on behalf of Alice Langley, Managing Director, Camden Division, C&I NHS Foundation Trust

Date: 30th August 2023

1 Purpose

- 1.1 The purpose of this paper is to update Camden's Health and Adult Social Care Scrutiny Committee (HASC) on the progress of coproducing a new mental health day support service in Camden.

2 Background

- 2.1 Non-residential support for people in mental health crisis is typically provided by NHS crisis resolution teams (CRTs), which provide care to people in their own homes. Acute Day Units (ADUs) offer an alternative whereby people attend a unit during the day to receive care. ADUs offer opportunities for peer support from other people attending the unit, and more contact time with staff during the day than crisis resolution teams can offer.
- 2.2 The Camden ADU based at the St Pancras Hospital site in Camden was suspended in April 2020 due to the Covid-19 pandemic and has not since reopened. Since the suspension of the ADU, work to implement the Community Mental Health Framework in Camden has significantly progressed. Through the adoption of this Framework, people with mental health problems are enabled to:
- Access mental health care where and when they need it, and move through the system easily, so that people who need intensive input receive it in the appropriate place, rather than face being discharged to no support.
 - Manage their condition or move towards individualised recovery on their own terms, surrounded by their families, carers and social networks, and supported in their local community.
 - Contribute to and be participants in the communities that sustain them, to whatever extent is comfortable to them.
- 2.3 Partnership working in Camden has flourished since the onset of the pandemic with partners across the NHS, the Local Authority, the Voluntary and Community Sector (VCS) and experts by experience working collaboratively to advance the relationships, culture and structures required to deliver the transformation of mental health services. Transformational developments include the implementation of Core Community Mental Health Teams aligned to Neighbourhoods and Primary Care Networks (PCNs) and the recommissioning of Local Authority mental health VCS provision under a single Alliance contract (the 'Resilience Network Alliance').
- 2.4 While community-based support for people with mental health needs has been significantly enhanced, there remains a service gap for people requiring intensive support outside of hospital.

2.5 Current mental health day support provision in Camden comprises The Greenwood Mental Health Service (provided by Camden Council) and the Phoenix Wellbeing & Recovery Service (provided by Mind in Camden and commissioned by Camden Council). These services provide invaluable support for residents requiring mental health support during the day, but they can't fully provide for the needs of people experiencing acute mental illness in the same way the ADU did previously. There is therefore an opportunity to:

- Coproduce a new service that is based around individual needs, including those of people with acute mental health needs.
- In doing so, integrate mental health day support provision, strengthening the overall offer, increasing flexibility, and removing duplication.
- Strengthen the link between mental health day support and other community-based mental health support, removing barriers to access and promoting opportunities for people to participate in their local communities.

3 Coproduction of new service

3.1 Towards the end of 2022, partners came together to develop a high-level proposal for a new service that:

- Addresses gaps that currently exists in the borough e.g., intensive support outside of hospital and support for people who have experienced trauma (including people experiencing social instability).
- Provides evidence-based interventions (including peer support) in an environment that is trauma-informed and psychologically safe.
- Retains the elements of the ADU which the research shows result in better outcomes in terms of service user experience and satisfaction, wellbeing, depression, reduced usage of acute services and reduced overall health costs.
- Maximises access and links to wider community support.
- Improves integration with community teams, the crisis pathway including the Crisis Sanctuary and the Mental Health Crisis Assessment Service, the Resilience Network, individuals' existing support networks and wider community assets.
- Achieves efficiency and removes risk of duplication in overall provision by bringing together overlapping and complementary offers into a single service within the overall borough mental health offer.
- Progresses the commitment shared by Camden and Islington NHS Foundation Trust (C&I) and borough partners to advance joint working and improve integration of services at the 'place' level.

3.2 In April 2023, Camden Council and C&I began working with service users and carers to shape this new mental health day support service. Verve, a specialist communications and engagement agency, were commissioned to support the engagement and codesign process and provide a summary report including feedback and recommendations.

3.3 Phased engagement and codesign approach

3.4 At the start of the process, a phased engagement and codesign approach (outlined below) was agreed with service users and carers:

3.5 *Pre-engagement phase:* This included one online session with service users, carers, and stakeholders, three focus groups with service users of the Greenwood Mental Health Service and Phoenix Wellbeing & Recovery Service, and one focus group with autistic adults who have mental health needs.

3.6 *Engagement phase:* This included four workshops and one focus group (including one session dedicated to capturing insights from ex-service users of the previous ADU and one focus group with autistic adults who have mental health needs).

3.7 During both phases, service users and carers gave feedback regarding their ideas for a new mental health day support service. This was collated into a report which enabled the team to develop possible options for elements of the new service.

3.8 *Codesign phase:* This consisted of two face-to-face workshops with service users and carers. There was also one online information sharing session with some service users who were unable to join the face-to-face codesign sessions and a session with a senior manager responsible for mental health inpatient service provision and previously responsible for the ADU.

3.9 At the face-to-face codesign sessions, service users and carers worked in groups on the different areas proposed for the new service with the aim of enabling the team to refine the components of the model. As part of the codesign process, the team shared limitations in relation to the achievement of specific areas of the feedback and where appropriate, service users discussed possible mitigatory actions.

3.10 Participation

3.11 Service users and carers were recruited by C&I and Camden Council by email invitation, and through recruitment led by staff at the Greenwood Mental Health Service and Phoenix Wellbeing & Recovery Service. Registration to events was via Eventbrite and email. The engagement and codesign activities were complemented by information on the website and an online survey.

3.12 170 people registered to attend the various sessions.

3.13 A desk-based Equality Impact Assessment identified the following groups as pertinent to the previous Acute Day Unit as well as the new integrated service:

- Adults of working age (18 – 64) (age)

- People with a diagnosis of serious mental illness (disability)
- Those who are unemployed (socio-economic status)
- Previously admitted to an inpatient ward (disability)

3.14 Most of the service users who took part in the engagement and codesign process fell into a minimum of two of the identified priority groups.

3.15 To support participation in events, the following steps were taken:

- Engagement with Camden Disability Action.
- Representation from individuals with a neurodiverse perspective.
- Providing a combination of online and face to face events.
- Providing options for 1:1 sessions.
- Ensuring an accessible presentation style.
- Sending materials to participants in advance to allow time for review and reflection.

3.16 Feedback and potential service options

3.17 Feedback was grouped into six themes:

- Accessing services and referrals
- How services work together
- Interventions and activities
- Duration of services and opening hours
- Staff and communication, and,
- Areas of feedback with limitations.

3.18 Service options were proposed based on the feedback gathered during the pre-engagement and engagement phases. There was support for a flexible approach to accessing future services, with good communication and promotion of services available as well as consistency of key workers seen as essential. Service users also favoured a service that retained elements of the former ADU and emphasised the need for it to provide an alternative to hospital-based care and treatment as well as community and social activities for people with a range of support needs, at a location that is central to the borough with good transport links.

3.19 For further detail regarding the engagement and codesign work please see the Verve report in appendix A.

4 Next steps

- 4.1 The engagement and codesign sessions have collected valuable feedback from a wide range of current and past service users, carers and people working within services, which will inform the development of the new integrated mental health day support service in Camden.
- 4.2 There are a number of models currently being considered with partners which will be developed into an options appraisal and taken through the various governance processes within Camden Council, C&I and the North Central London Integrated Care Board (ICB), with the aim to establish a new service in Spring 2024. Camden Council and C&I have committed to keeping service users informed and getting their input on plans as they develop.

	Task	Timeline	Lead
1	Service model finalisation	1 st September	Poppy Green/Project Team
2	Delivery options appraisal	7 th September	Poppy Green
3	Governance and sign-off <ul style="list-style-type: none"> • Local Authority • NLMH Partnership • NCL ICB CAG • NCL MH Governance Group, if required 	19 th September 20 th September 20 th September (tbc) (September)	Alice Langley/Debra Holt
4	Specification and outcomes agreed	29 th September	Poppy Green
5	Provider selection and contracting commences, subject to option agreed	1 st October	Poppy Green
6	Go live	April 2024	

5 Questions for Committee discussion:

1. Comments on the coproduction and codesign approaches, underpinning change to the service offer
2. Discussion and views on the benefits of an integrated and streamlined model

6 Finance Comments of the Executive Director Corporate Services

- 6.1 The Director of Finance has been consulted on the content of this report and has no comment to make.

7 Legal Comments of the Borough Solicitor

7.1 The Borough Solicitor has been consulted and has no comments to add to the report.

8 Environmental Implications

8.1 There are no environmental implications from the contents of this report.

9 Appendices

9.1 Appendix A - Post Engagement and Codesign Report – Camden Mental Health Day Support Services

REPORT ENDS