LONDON BOROUGH OF CAMDEN

WARDS: All

REPORT TITLE

Follow Up report to the Full Council Themed Debate on Mental Health

REPORT OF

Cabinet Member for Health, Wellbeing and Adult Social Care

FOR SUBMISSION TO

DATE

Full Council

20th November 2023

SUMMARY OF REPORT

This report provides an overview of the Full Council themed debate on 18th September 2023 that focused on how we are taking a population health approach to mental health and wellbeing in Camden.

The report summarises the key points made by the speakers, and the subsequent debate at Full Council.

Local Government Act 1972 – Access to Information

No documents were used in the development of this report.

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RECOMMENDATIONS

The Council is asked to note the report.

Signed:

Councillor Anna Wright, Cabinet Member for Health, Wellbeing and Adult Social Care

Date: 2nd November 2023

1. CONTEXT AND BACKGROUND

- 1.1 Mental health and wellbeing is a significant and rising challenge in Camden which has been amplified and brought into sharp focus through our experience of the Covid-19 pandemic and ongoing pressures from the cost-of-living crisis. The scale of the challenge cannot be overstated and demands for a collective response whereby we work in partnership with the NHS and local communities, reaching across service, organisational and political boundaries. Addressing rising mental health challenges is everyone's business and essential if we are to achieve our ambition of making Camden the very best place to start well, live well and age well.
- 1.2 Mental health services are a vital and effective means of supporting residents to address their needs; however, we know that local provision does not always meet the high demand we experience in Camden, nor can mental health services alone meet the needs of those who draw upon them. It is important, therefore, that we understand mental health and wellbeing in its broadest sense and take collective action to prevent mental health problems from emerging or worsening in the first place. Together with our NHS partners, local organisations and communities, the council is committed to taking a population health approach, focusing on collaboration and innovation to intervene early to bring about good mental health and wellbeing across our population, building resilience for those with diagnosed conditions and ensuring that those with the poorest health outcomes receive additional support. Only by taking a population health approach can we expect to create a sustainable system meanwhile reducing the stark health inequalities that continue to blight our borough.
- 1.3 A report to accompany the Full Council themed debate was produced and outlined the scale of the challenge and provided clarity on what we mean by mental health. It also outlined our local population health approach and reinforced the importance of a collective and unified response, working with our partners and communities to address the social determinants of health, such as poverty, unemployment and education. The report also provided a deep dive into work underway in Camden to understand and address mental health in its broadest sense, placing a spotlight on the range of ways that we can meet this challenge together.
- 1.4 This report provides an overview of the Full Council debate on mental health on 18th September 2023 and summarises the views of speakers and the subsequent debate. The report provides further details on the issues raised and sets out an update on some of the actions the Council is taking to address mental health issues in Camden.
- 1.5 The Council was grateful to have external speakers join the debate, including representatives from local voluntary and community organisations and NHS providers of mental health services.

2. SUMMARY OF FULL COUNCIL DEBATE

- 2.1. The debate was introduced by Councillor Anna Wright, Cabinet Member for Health, Wellbeing and Adult Social Care. Cllr Wright highlighted how the continued impact of Covid-19 and the cost of living crisis have created huge demands on people's lives and on services. Cllr Wright also highlighted that despite funding for mental health services being insufficiently funded, in Camden we have been successful in working creatively in building partnerships to make use of the resource we have.
- 2.2. Cllr Wright highlighted that when people think of mental health, they often think about clinical services delivered by the NHS and of diagnosed mental health conditions. However, the landscape of mental health and mental wellbeing is much wider, we should think about all opportunities we have as a council and as a wider community to increase resilience and get traction on the social determinants of health that make people more susceptible to poor mental health, for example poverty, job insecurity, trauma and housing.
- 2.3. Cllr Wright explained this is why we are taking a population health approach to address mental health and wellbeing challenges, by focusing on the wider determinants, and on prevention, early intervention and reducing inequalities. Cllr Wright explained that this enables us to focus on strengthening protective factors, which help people to build resilience such as physical activity, social support and family connectedness, and local services such as substance misuse services and employment support as well as the more traditional clinical mental health services.
- 2.4. Cllr Wright highlighted that mental health was everyone's business and requires the council services to work with the community and build partnerships. Cllr Wright welcomed the external speakers and invited them to address the council.
- 2.5. Krystal Donaldson, Service Manager and Katie Clayton, Technical Clinical Lead from the Hive, described the one stop shop model of the services provided at the HIVE for young people aged 16 to 24 years old. Several accessible services were provided in a flexible environment of co-production that ensured that young people were at the heart of decisions being made. The HIVE worked in partnership with the NHS and were part of Mind the Gap. A large focus of the work was aimed at the reduction of social isolation and connecting people, with most of their work based around social inclusion and dealing with the issues caused by loneliness. The HIVE was a welcoming environment open to all, with a culture of breaking down barriers.
- 2.6. Alice Langley, Managing Director and Nil Sunar, Peer Coach from Camden and Islington NHS Trust (C&I), spoke about being a peer support worker, how it was based on lived experience, knowledge of using mental health services and using personal experience to support others. Nil had benefitted from multi-agency work and as a peer support worker and was excited to help others and build on the work that had taken place. Alice Langley explained how C&I's focus over the recent years has been on strengthening community

services in line with a preventative and population health approach, a key part of this has been developing new roles such as peer coaches and community development workers. In the development of C&I's services, the benefits of multi-agency working have become clear. This has helped to highlight the interconnectedness of the wider determinants of health with mental and physical health, this will be built on further with the development of Integrated Neighbourhood Teams.

- 2.7. Sarah Anderson from the Listening Space, a registered charity, spoke about the work of the charity and how they helped to support those that had fallen through the gaps in statutory mental health services. Of those attempting suicide who were seen in Accident and Emergency, only 5% of them would be admitted as in-patients and the others would be discharged to the care of their GPs and receive treatment comprised of medication and or talking therapies. There was a 6-week waiting list for talking therapies. There was a gap in the service because people with personality disorders, addiction issues or who were at high risk of suicide did not receive talking therapy. Working with the NHS the Listening Space provided a free listening service that was able to respond to NHS referrals within 24hrs with a first appointment within a week. One of the three Listening Place sites in London was based in Camden and Sarah explained the structure of amazing professionals and volunteers that dealt with on average 150 mental health appointments each day. There was close working with the NHS and Sarah said that she was grateful to have met Alice Langley at this meeting, which would provide more opportunities to work together.
- 2.8. Kate Dallas, Camden Services Manager and Alicia Rubin Peer Mentor/Service User from Change Grow Live (CGL) spoke about the work of the CGL as an integrated drug and alcohol service, working with Camden residents aged 18 years, individually or in family groups. The clinical team provided a range of psychosocial interventions, with mindful emotional support for the links between trauma and substance misuse. Kate explained the importance of working in partnership to meet the needs of service users and how the CGL with the probation and prison services had helped to meet the needs of their service users. Change Grow Live worked to identify major issues of isolation and loss and helped service users to actively engage, connect and create communities that supported their wellbeing.
- 2.9. Following the speakers, members of the Council then commented and asked questions related to:
 - How health services and health trusts can be held to account
 - Mental health provision should feature prominently within new neighbourhood arrangements
 - The need for attitudes and funding for mental health to reach parity with physical health
 - That key dates, such as suicide prevention week, should be used to promote information and training.
 - It is essential for service users to be involved in the design and planning of their care.

- 2.10. The speakers made the following comments in response:
 - Sarah Anderson commented that they regularly received feedback about the speed of the services that the Listening Space could offer, which demonstrated that there was a place for the voluntary sector in the services that were provided.
 - Alice Langley remarked that the co-production and co-design of services had enabled service users to be involved in the planning of their own care. There was huge demand for services and resources were never enough to meet the demand.
 - Krystal Donaldson spoke about the range of co-production work by young people at the HIVE that had shaped the services and provided support at a strategic level. The range of work that the young people had been involved in had been important in helping them to tackle social isolation and provided a sense of purpose.
 - Kate Dallas remarked that Change Grow Live had a service specification co-production group, whose work was embedded in the organisation and this had helped to hold the service providers to account.
 - Nil Sunar remarked that so much had been learnt from services users who had been part of co-production decisions.
 - Alicia Rubin commented on the training that was provided for operational managers to work with service users and how meaningful the coproduction work had been at Change Grow Live.
- 2.11. Cllr Wright thanked all those who had contributed to the debate for the interesting discussion that had taken place. She remarked on the lack of parity between Mental Health with physical health and that this was partly due to pressures on the health service. Mental Health was everyone's business and the voluntary sector was helping to meet the needs of service users. Suicide Prevention training had been offered to Camden staff, and Councillors should also be taking part in training if offered the opportunity.

3. NEXT STEPS

- 3.1. In Camden we are aware of the scale and complexity of mental health challenges in the borough and recognise that peoples' experiences of the Covid-19 pandemic and cost-of-living crisis have compounded and magnified local need. No one organisation has the levers to protect and support the mental health of Camden's residents alone and it's essential that we continue to build effective partnerships, such as the multi-agency Mental Health Partnership Board, that are capable of taking a whole-system response. We will therefore continue to take a population health approach. This means recognising that many of the main drivers of health outcomes fall outside of our health and care services but are rather determined by the social determinants of health, places and communities in which we live, and, often related, behaviours.
- 3.2. Work is underway to understand and develop our partnership response to improving employment and economic activity for people living with long term

conditions, including mental health and substance misuse. As part of this work, a rapid needs assessment was recently completed to build an initial picture of the current employment and health landscape within Camden. Following on from this, a multi-stakeholder workshop, to be held towards the end of 2023, will use population health thinking to:

- Reflect on the current challenges in the health and employment space, and the work we are currently doing to address these
- Identify challenges we may not be addressing or could be doing more to address
- Jointly produce opportunities to better address the above challenges
- 3.3. The Community Connectedness and Friendships Working Group will continue to bring together partners to collectively work to promote community connections to reduce social isolation and loneliness, a key driver of mental health challenges. An update on progress against the Health and Wellbeing Strategy 2022-30 priority on community connectedness and friendships will be presented at the Health and Wellbeing Board on 20th December. Here, partners from the VCS will showcase the valuable work they are doing in communities to reduce loneliness and therefore build resilience and improve mental health outcomes for residents. Upcoming Community Connectedness and Friendships Working Group meetings will focus on progressing actions within the group's three priorities;
 - Improve identification and engagement of people who are chronically lonely and isolated
 - Undertaking a borough wide communications campaign to increase awareness and reduce stigma
 - Explore service area specific opportunities to help reduce social isolation and loneliness
- 3.4. Ensuring that staff who work in the borough and our communities are mental health literate and able to have conversations and signpost to support for protective factors of mental health is essential. There are a range of training offers that we will continue to promote for anyone who lives, works, or studies in Camden, including Councillors. These include Making Every Contact Count (MECC)¹ which teaches participants how to identify opportunities in conversations with residents and gives confidence to deliver brief advice to help people improve their wellbeing. MECC covers topics such as money worries, finding a job, and health limiting behaviours. There is also a range of mental health training² available to equip participants with the knowledge and skills to better understand mental health and mental illness and to have good quality conversations with residents, friends, family members or work colleagues about mental health. The courses also help participants to feel more confident supporting others who may be experiencing poor mental health. There is also specific training to help people support those who have been bereaved and those with suicidal feelings.

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¹ Making Every Contact Count (MECC) training https://www.camdenmecc.org.uk/

² Mental health training https://www.camden.gov.uk/public-health-training

3.5. A key vehicle for delivering our ambitions to support mental health going forward is our emerging neighbourhood approach. Informed by what residents have told us about what good support looks like, a broad coalition of partners across health, adult social care, and community organisations have come together to identify ways of working to bring about better integration within and across a neighbourhood area. For the Camden Borough Partnership, we will test and learn through a new Integrated Neighbourhood Team (INT), drawing from our successful model of integrated children's services and looking at what works elsewhere. The initial INT will bring together teams from the Council, C&I NHS Foundation Trust, Central North West London (CNWL) NHS Foundation Trust, and primary care.

4. **LEGAL IMPLICATIONS**

4.1. The Borough Solicitor has been consulted and has no comments to add to this report.

5. RESOURCE IMPLICATIONS

5.1. The Executive Director of Corporate Services has been consulted on the contents of this report and has no comment to add.

6. ENVIRONMENTAL IMPLICATIONS

6.1. There are no expected environmental implications.

REPORT ENDS