ONLINE STAKEHOLDER ALLIANCE – MENTAL HEALTH CONSULTATION

Responsible Officer   Phil Brough
Email: philip.brough@shropshire.gov.uk   Tel: 01743 252248

1. Summary

1.1 This report presents the main themes of discussions and chatter arising from the online Health & Wellbeing Stakeholder Alliance following engagement with the two priority groups focused around Outcome 3: better emotional and mental health and wellbeing for all, within the Health and Wellbeing Strategy.

1.2 It should be noted that the report summarises views expressed by Stakeholder Alliance members and as such there may be misconceptions or inaccuracies due to a lack of awareness or understanding of issues or existing interventions. Where this is the case, this can help the Health and Wellbeing Board and commissioners to understand where more awareness and signposting is needed. It should also be noted that views by one group represented on the Stakeholder Alliance may not concur with that of other groups or JSNA intelligence. Therefore this report should be used in conjunction with the JSNA summary for mental health, and other previous consultation.

2. Recommendations

2.1 The Health and Wellbeing Board
   a. Use the report as information to support discussion around agenda items 7, 8 and 9.
   b. Advise if more investigation is required into any themes to feed into the Joint Strategic Needs Assessments and support for commissioning services.
   c. Ensure the co-production with stakeholders in the development of strategies and commissioning of services related to dementia and children and young people's mental health.

REPORT

3. Mental Health

3.1 Within the online stakeholder alliance, there are two groups set up around the Health and Wellbeing Strategy Outcome 3: better emotional health and wellbeing for all, including priority group 3: improving the mental health of children and young people, and priority group 4: make Shropshire a dementia friendly county to enable earlier diagnosis and improved outlook for people with dementia.

3.2 A number of questions were posted on the forum to structure the discussion threads (see Appendix 1).

3.3 **Priority 3: Improve the emotional wellbeing and mental health of children and young people, by focusing on prevention and early support.**

The key points that came out from the chatter and discussion include the following:

- **Schools are a good starting place to tackle emotional wellbeing and mental health issues** but important to remember that some young people do not necessarily positively engage with schools or the services they offer. Work is taking place in schools across Shropshire promoting 'whole school' approaches to support emotional and mental health, developing a common language and helping young people know that they need to look after their mental health in the same way they know how to look after their physical health. Many schools have targeted intervention programmes to support the varying emotional and mental health needs of vulnerable young people.

- **Young people do not necessarily know what services are on offer or how to access them and there are also concerns around confidentiality**. For example students told about appointments to see a school counsellor, being called out of a lesson and therefore 'identified' as having a problem. Young people need quicker and easier access to support.

- **Young people in Shropshire see eating disorders** as a general symptom of mental health issues.

- **Need should be a priority instead of eligibility** and early help and early intervention is important. Under Fair Access to Care Services, service users cannot access services unless they meet the criteria of substantial or critical, hence only get help once in crisis. The system needs to meet young people's needs and be less focused on perceived level of risk.

- **Manage the transitions between different components of support** to people experiencing crises and more prolonged mental health issues. Provision in a multi-agency way is important to reduce stigma.

- **Reform of the Special Education Needs system** will place a duty on all agencies to work together.

- **Transitions from children to adult services** could be more effective and adequate transitions should be put in place as children reach adulthood.

- **Suggestions for reducing stigma** included supporting World Health Day and the Time for Change campaign as children are getting into system much younger than they used to. Also suggested that it is the medium not the message that is the key determining factor in reducing stigma, and there is an

opportunity to use technology to achieve high health literacy directly to children and young people, for example using IPhone Apps.

- **Empower young people to take control of their own health and wellbeing** by setting up a Youth campaign with focus on emotional health.

- **Engagement with young people**. At a recent Young People's Health & Wellbeing conference, 78% of young people expressed they were interested in shaping health services in Shropshire. Support is needed to assist young people to find the language skills they need to talk about emotions.
.
- **Shropshire CAMHS** - Feedback anecdotally suggested that CAHMS are struggling to cope with demand for their services. However there is a gap in information in terms of referrals.

- **Co-production with stakeholders**. In terms of CAMHS service being recommissioned there are concerns about a lack of co-production with stakeholders. It should not just be about consultation but working with those affected by mental health issues, including parents and young people, to discuss difficulties and develop solutions together.

- **Special educational Needs** - Suggestion that schools do not necessarily have sufficient understanding of challenges facing children and young with Special Education Needs. Families of children with disabilities or additional needs are particularly vulnerable in terms of mental health difficulties. Respite for carers of children with Autism/ Aspergers, for example was discussed in these terms of preventative support.

- **Involve Educational professionals** alongside clinicians and social care professionals, and provide them with support to deliver effective early intervention.

- **Clarity needed** around whether this priority is about helping young people with mental health problems or preventing mental health problems in young people.

3.5   Priority 4 Making Shropshire a dementia friendly county to enable earlier diagnosis and improved outlook for people with dementia

3.6   The key themes that came out from the chatter and discussion include the following:

- **'Dementia Friendliness'** - example of this includes Torbay where 243 shops have signed up to being dementia friendly.

- **Dementia Action Alliance** was cited as an example of reducing the stigma with over 250 organisations committed to it and 'Dementia Friends' can help break the stigma.

- **Appoint a Dementia Champion** - suggested the appointment of a dementia champion to work across sector boundaries who can develop focused and integrated plans

- **Diagnosis** - There are over 50% of people with dementia in Shropshire who have not had a diagnosis. Ensure everyone who needs an assessment should have one.

- **Use Intergenerational Projects** to raise awareness among younger people of dementia issues and to encourage them to spot the signs of dementia in their own relatives and neighbours. Examples of 'dementia friendly' booklet to help raise awareness of the condition.

- **Training individuals with dementia** to keep their own online medical records including enduring power of attorney, mood status details and so on.

- **Hospital care** - provide better and more coordinated care within hospital.

- **Use of telecare/ telehealth technology** as a method of measuring personal need and keeping people safe/ at home with their support network.

4. Risk Assessment and Opportunities Appraisal

(NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

Stakeholder Alliance	Impact	Mitigation
Online mechanisms can be misused or become inappropriate if not monitored properly (no evidence of this so far)	There is a **low** chance of this occurring as membership is controlled by the moderator, and posts are monitored by the moderator and can be removed. Anyone in breach of the terms of engagement will be removed from the Alliance.	**Term and conditions** of joining **Closed forum** that require invitation to become member and declare what role/ organisation from.
Opportunities	**Impact**	**Action**
Stakeholder Engagement	Potential **high positive impact** on the HWBB understanding of the communities we serve	Continuing to engage with our communities through numerous methods

5. Background

5.1 The online stakeholder alliance has been developing since the summer of 2012. It proved invaluable to developing the material and discussions for the 31st January Stakeholder Event and this is indicated in feedback from the event. The online network is a 'one stop shop' and holds relevant information for the Health and Wellbeing Board, the Health and Wellbeing Strategy, a Commissioners Guide to the Voluntary Sector, information and links to the Joint Strategic Needs Assessment and monthly newsletters. The Network has a terms and conditions for all joining the network to ensure that members understand their role and responsibility as a member of the Alliance.

5.2 There are currently over 160 members including those from voluntary and community sector organisations, service providers within Shropshire Council and wider partners, and patient participation groups. Members can join 8 priority groups based around the priorities within the Health and Wellbeing Strategy.

5.3 Whilst it is a useful forum in terms of professional networking and as a consultation tool, members should be aware of comments expressed by different organisations and this is considered when collating the feedback of discussion and chatter.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)   **CCG Outcome Indicator Pack – on the website**   **Everyone Counts – on the website**
Cabinet Member (Portfolio Holder)   Ann Hartley
Local Member
Appendices   Appendix 1 – Stakeholder Alliance Consultation

Appendix 1- Health and Wellbeing Board – Stakeholder Alliance Consultation

Background

It was agreed at February's Shadow Health and Being Board meeting to receive regular input from stakeholders and receive regular updates through the online Stakeholder alliance. Each Health and Wellbeing Board meeting will be themed around the 5 outcomes of the Health and Wellbeing Strategy and take place bi-monthly.

What is the online stakeholder alliance?

The online stakeholder alliance provides the opportunity for stakeholders' to share knowledge, float ideas, make new professional contacts, seek out opinions and share successes' as well as an engagement tool. **See** this video here which gives an overview of how to use the online forum. The forum is not intended to be used as a wish list and at no point should expectations be that people participating feel that everything is possible and everything that is asked for can be delivered.

If you are not already a member please contact philip.brough@shropshire.gov.uk or 01743 252238.
*The deadline for this is 5ᵗʰ April 2013. Do not miss out on the chance to have your say!

**please note no decisions will be made regarding the re-commissioning of CAMHS till the June Health and Wellbeing Board meeting.

Outcome 3: Better Emotional and Mental health and Wellbeing for all

The first HWB meeting on 12ᵗʰ April will be themed around mental health and you are invited to discuss the following issues:

Priority 3 - *Improve the emotional wellbeing and mental health of children and young people, by focusing on prevention and early support.* To comment on this, join the group and follow this link.

Questions include:
What can be done to reduce stigma of emotional wellbeing and mental health in children and young people?

Priority 4 - *Making Shropshire a dementia friendly county to enable earlier diagnosis and improved outlook for people with dementia.* To comment on this, join the group and follow this link.

Questions include:

What can be done to reduce stigma of dementia in Shropshire?

A dementia friendly information pack would be useful, what would this look like, and what's out there already?
*In both workshops for the Health and Wellbeing Strategy to Implementation Event on 31ˢᵗ January, stigma was seen as a barrier for those with mental health issues in Shropshire; how can we reduce that with adults and children & young people?)