## Shropshire Health and Wellbeing Board meeting 14.07.22 Agenda item 5. Public Question

## **Question received from Sue Stewart**

## Question

If Healthy Lives has a focus on preventative health and/or managing health conditions before they get worse, why are they ignoring the very large percentage of people on medication prescribed the MPFT (Midlands Partnership Foundation Trust) that affects not only their mental health but often severely impacts on their physical health, sometimes to the point where diabetes, risk of stroke or even death, can be a side-effect?

The Council is clearly not working with the Trust on this as it doesn't even mention them in its' report, or the many people thus affected, and cannot claim that this work stream would be evidence-based as there are no figures that I am aware of that are collected around this health crisis, and I am currently doing work to raise some awareness of this area, and have tried to previously do so with Shropshire Council.

There are clear identifiable risks which currently have not been addressed by the Healthy Lives report, such as lack of physical activity and the link with mental health, and I look forward to the next report to the HWB in July about how the Healthy Lives meeting in May 2022 planned to recognise and address these problems, and how it intends to work with MPFT and with whom.

## Response from MPFT, Shropshire and Telford NHS and Shropshire Council

Thank you for raising such an important issue- and an issue that we are trying to improve.

There was just a 39% uptake in annual health checks for people on the GP practice Severe Mental Illness (SMI) registers in 2021/22. The whole system (which consists of health and Care and other partners) is working together to ensure we offer annual health checks to all those individuals with serious mental illness or those on medication overseen by MPFT. Some of the work includes: -

- a small team of senior nurses working alongside GP practices to support the undertaking of these checks in general practice
- MPFT has appointed more staff to develop more clinic appointment dedicated to physical health checks- with a senior lead in place
- a pilot to ensure we share data across MPFT, and GP practices is about to start, so that people do not fall between services or there is duplication.
- working with Designs In Mind to develop material to share with individuals about the importance of health checks
- Purchase of machines to enable pin prick tests for bloods for blood sugar and cholesterolwhich will be rolled out in the next 6-12 months
- Purchase of kits for nurses to undertake checks out of a clinical environment- taking the service to those who are unable to attend
- The early intervention psychosis team undertook 80% of physical health checks on their caseload and have achieved level 3 National Clinical Audit of Psychosis status which reflects the quality of the service provided. This includes the level of health checks, as well as timely and evidence-based interventions
- The senior mental health nurses are completing medication reviews as part of their role
- Regular fortnightly Physical Health/SMI operating group with system membership and governance reporting structure to the STW operating Community Mental Health Transformation operating group including Service User representative

- Developing local action plan to address SMI/ Physical Health inequalities
- As the whole system develops, links will be made with social prescribers to ensure access to healthy living and exercise services - in Shrewsbury the GPS have developed access to free exercise for some patients

As a whole system we welcome the introduction of Additional Reimbursable Roles, and roles such as Occupational Therapist, Social Prescribing Link Workers, Health and Wellbeing Coaches, Clinical Pharmacists and Dietitians will make a real difference to overall wellbeing and wellness including in the prevention and treatment of poor emotional and mental health.

Whilst all medicines have side-effects to a varying degree, MPFT prescribing (at least from a mental health perspective) is focussed on treating and preventing the often debilitating effects of severe mental illness and so to that extent *is* ultimately focussed on allowing people to lead healthy lives.

The practice of all prescribers is routinely overseen by our pharmacy teams and anomalies and questionable practice is picked up and explored.

While it is admittedly a difficult balance to get right in terms of unwelcome side effects and the known potential adverse effects on physical health of using prescribed medication, the benefits of prescribing for severe mental illness is often great as it allows people to live a life outside the confines of hospital and to maintain relationships with loved ones that would otherwise be put in jeopardy.

Healthy Lives is the partnership prevention programme of the Health and Wellbeing Board (HWBB) and the steering group is made up of partners across the health, care and voluntary and community sector who proactively work together to stop people becoming ill in the first place, or help people manage their health condition and stop it getting worse. Evidence base is always used in this work. Partners include Shropshire Council, MPFT, Healthwatch and Shropshire and Telford NHS.

The last report of the Healthy Lives Steering Group was a brief update, and the July report will be focussing on work happening around Adverse Childhood Experiences (ACE)s and Trauma, which we know affects not only mental, but physical health too. The system (which includes our partners, MPFT) is working collaboratively on this HWBB priority which includes creation of a trauma informed workforce, which will help enable both prevention, and recovery for those affected. Recovery does not necessarily mean use of medication, and non-medicalised offers such as social prescribing will be considerations.

If you would like to any offer advice and guidance on this that would be of great help. Please contact: <u>gail.owen@nhs.net</u> and/or <u>anne.maclachlan@mpft.nhs.uk</u>