IAPT and Comsol services

Health & Well being board March 2021

Background

- Proposals to explore closer joint working of IAPT and Community Solutions were presented to the Group in September 2020
- This paper provides an update to the Group on activities and progress
- The ongoing implications of Covid have limited progress in some areas

Recap - aims

- Integration of IAPT with council services
- Joint working and support
- Early identification of Mental Health needs and intervention
- Reduction of cost for high level support
- Improved resident experience

Why

Good mental health is fundamental to our physical health, relationships, education/work and achieving our potential, and brings wide social and economic benefits to individuals and society.

No health without mental health, the Government's mental health strategy, aims to:

- improve the mental health and wellbeing of the population and keep people well
- improve outcomes for people with mental health problems through high-quality services that are equally accessible to all

- 1. NHS savings through reductions in healthcare usage
- Exchequer savings through helping people move off welfare benefits
- Economic gains to employers through reduced sickness absences

Demand in LBBD

'Common mental illnesses' include conditions such as depression, anxiety, obsessive—compulsive disorder (OCD) and phobias. Their label as 'common' rather than 'serious' does not mean that they cannot cause severe harm and disruption to the lives of those they affect and those around them



Since April 2019, 768 clients in the Homes and Money Hub had physical/mental health as a presenting need



2019/20, over 1
million people
attended programmes
and activities at
Universal locations
(libraries and
children's centres). On
average 25% of people
in the UK will have a
common MH problem



Since April 2019, 5316
individuals (children and
parents) engaged with
Early Help services over a
wide range of needs, 394
had Mental Health as a
presenting need*

May be significantly higher as MH as a secondary need is not recorded

* Cared for by parent with chronic MH, Child MH, MH



More than two-thirds of adults in the UK (69%) report feeling somewhat or very worried about the effect COVID-19 is having on their life. The most common issues affecting wellbeing are worry about the future (63%), feeling stressed or anxious (56%) and feeling bored (49%)



From December
2019 to September
2020, 171 out of
1180 clients in
Social Prescribing
had Mental Health
as a presenting
need



According to statistics from the Department of Work and Pensions (DWP), cited in the Depression Report, about 40 per cent of those on incapacity benefit have mental illness as their primary problem



Between 30 and 50 per cent of people with mental health problems also have problems with alcohol or drug misuse.

Benefits

LBBD residents

- Increased quality of life for residents
- Early Intervention
- Increase self efficacy
- Promote self service
- Increase community resilience ripple effect of IAPT support
- Employment, income maximisation and sustainment
- Prevent criminality and DA

LBBD Council

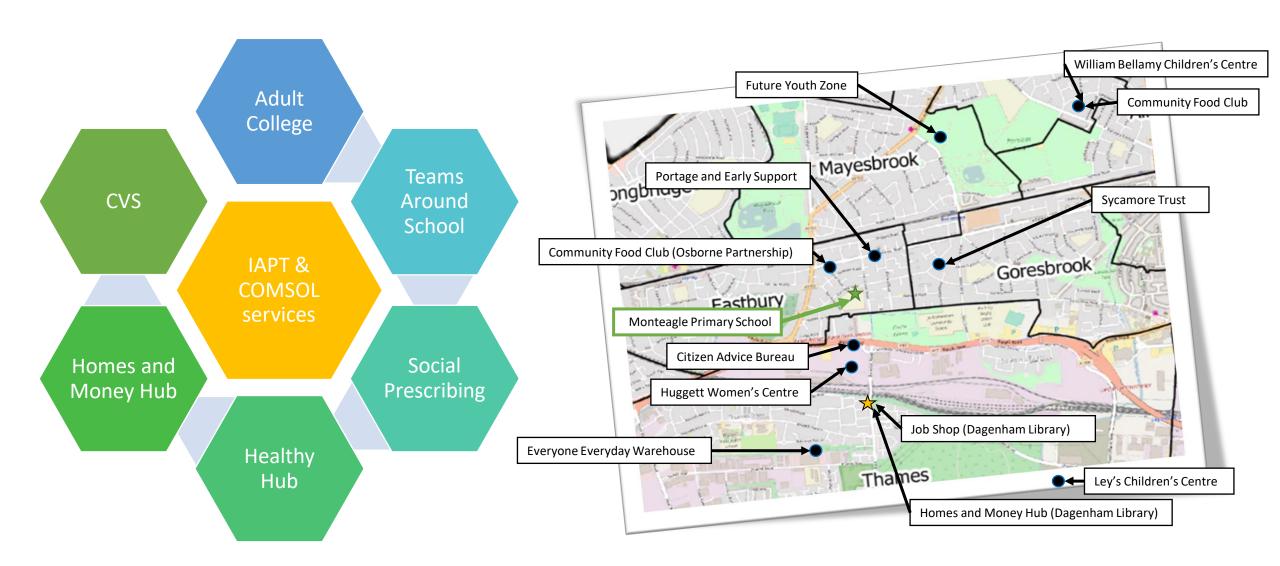
- Early Intervention preventing high cost support and social care
- Increase in staff wellbeing
- Shared learning
- Reduction of arrears

Making it happen

Partnership working – recognising shared objectives and the strength of tackling them with collective efforts

- Economies of scale
- Knowledge transfer
- A joined up approach for residents
- Less duplication of effort/overlap

Joint working



Co-location

- Dagenham Library and BLC small private room for 1-2-1 consultations. Banners outside for passing residents to access service and self refer.
- 90 min drop in session in the lobby where anyone can drop in. Interested clients to visit during drop in time. Staff on site aware of service and self referral route.

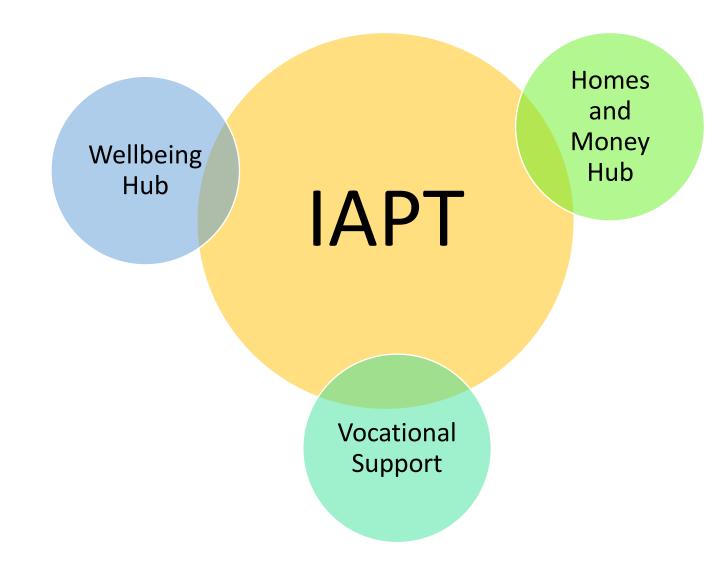
Example BLC

IAPT worker sees stressed client coming out of Homes and Money Hub and approaches for assistance to calm person down – assessment takes place

FLO that work with stressed client access consultation booking landing page for stress management, then self refer and book in with on-site IAPT staff (if available)



Natural Interfaces



Workstreams

Co-design (Ongoing)

Designing with IAPT to provide a service that maximises support for our local residents and achieves the best outcomes for all

Mental Health Training packages created and rolled out to staff (End of November)

Induction, What we do sessions and mandatory training for specific sites and services

Co-delivery (January)

Service, process and reporting embedded into regular working across COMSOL











Comms plan (November)

IAPT offer on internal comms that goes to residents (where relevant), online, as part of general comms, on site and IAPT presence in COMSOL meetings

Co-location (Virtual till further notice)

IAPT services co-located in universal sites (BLC and Dagenham Library), support groups for clients on site and staff mental health support

Measuring Impact (Ongoing)

Reporting on IAPT referrals, activity, hard outcomes and soft outcomes (resident feedback) to be monitored and presented each month by IAPT

Measuring Impact (long term)

Seeing a measurable impact through our Social Progress Index

Referral process

Eligibility

- Non crisis level support
- GP registered
- Over 18



Case study — Co-locating

- John 30 years old Referred to Mental Health Direct and sectioned in 2020 due to suicidality, severe depression and social anxiety
- Unemployed, alcoholic and at risk of homelessness has been contacted or been in contact with the council over 50 times over the last 5 years due to arrears and housing.
- He had been studying Health and Social Care at Adult College but dropped out due to social anxiety
- Attended Job Shop, Adult College and Housing for support but without any sustained outcomes
- No referral made to mental health services over the last 5 years

Negative experience



Vs positive experience



- Training provided for all council staff to recognise common Mental Health problems and provide earlier access to IAPT
- John's social anxiety identified by HAM Hub case worker and referral made to IAPT
- IAPT co-locate in BLC with private space (inc 90m drop in availability on shop floor) and have access to therapy space
- John accepts appointment and receives CBT treatment to alleviate social anxiety and increase self-esteem. Signposted to IAPT employment coach for support with employability.
- No longer MH issues, finished his course and now in employment as a social worker

Case Study 2 – as warm handover (referral)

- Amy's behaviour is very difficult, teachers can't control her in school and she is often late for school
- The school have a consultation with Early Help and agree to a targeted worker being allocated
- Case worker completes Early Help assessment with family
- Education and Early Help trained to recognise and refer parent to IAPT as children's behaviour is often linked to parent's MH (or would stress parents)
- Referral to IAPT completed and appointment made within 5 days (remotely or closest community site eg GP, comsol sites etc)





- Attend therapy group/ 121/ CCBT for low mood, assertiveness, self esteem or stress management
- Parent feels more able and empowered to manage own health and child's emotional wellbeing needs, child's behaviour improves as parents now more confident/assertive to can handle issues more positively

Key updates

- Training: IAPT provided introductory training briefings for Comsol staff (via Teams) in January
- Co-location: Co-location and rooms bookings (in the core hubs)
 has been discussed. Progressing this further dependent on
 lockdown restrictions easing
- 2 counsellors have been assigned and linked to each core hub
 BLC and Dagenham
- Referral pathways being explored with opportunities to align with existing routes to Comsol e.g. social prescribing being strengthened