# SCRUTINY REVIEW ON THE POTENTIAL IMPACTS OF THE RECESSION AND WELFARE REFORMS ON MENTAL HEALTH ACTION PLAN

This Action Plan should be read and considered in conjunction with the Scrutiny Review report on the potential impacts of the recession and welfare reforms on mental health action

(http://www.lbbd.gov.uk/CouncilandDemocracy/Scrutiny/Documents/HASSC%20Final%20Review%20Report%20050214.pdf).

Recommendation	Actions required to achieve recommendation	Measure of success	Lead responsibility	Date actions due for completion	Date actions completed
Recommendation One: Improved access and quality of Information and advice about services offering benefits advice and advocacy, and support for coping with stress/anxiety/depression should be readily and widely available to:  Residents	1A) Agencies and organisations to complete mapping exercise to identify gaps in current information and advice provision. The Mental Health Sub Group to review the mapping exercise findings, determine next steps for any identified gaps and feed into consultation below.	Mapping exercise completed, gaps in information and advice provision analysed and next steps identified.	NELFT LBBD Primary care (GPs, pharmacists etc.) CCG BHRUT Job Centre Plus	December 2014	
<ul> <li>Practitioners</li> <li>Those already known to MHS</li> </ul>	<b>1B)</b> Through public and service user consultation, establish preferred mechanisms and formats for ensuring timely information and advice is readily available.	MH Sub Group to host a service user engagement event and to have commissioned user and carer feedback to inform information and advice formats.	MH Sub Group	December 2014	

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Recommendation Two: To build recovery and resilience, prevent isolation and increase social capital through training and volunteering opportunities.	<b>2A)</b> To promote volunteering opportunities available within the Sub Group member organisations.	Evidence of member organisations having promoted volunteering, demonstrated by a % increase (baseline to be determined) in numbers of volunteers with mental health problems within each organisation's workforce.	Local third sector groups NELFT LBBD CCG BHRUT Job Centre Plus	December 2014  Baseline to be established by 30 August 2014	
	<b>2B)</b> Volunteer Plus to promote the role of volunteers to local statutory and small/medium business enterprises	% increase (baseline to be determined) in the number of volunteers with mental health problems within Barking and Dagenham.	Volunteer Plus	Quarterly reports to MH Sub Group from September 2014  Baseline to be established by 30 August 2014	
	<b>2C)</b> Review and alter LBBD, NELFT, BHRUT, CCG websites to promote role of volunteers within these organisations	Evidence of volunteer opportunities on member organisations' website pages.	NELFT LBBD CCG BHRUT	December 2014	

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	2D) Develop fully costed proposals for a training programme for volunteers in B&D.	Training Programme commissioned for volunteers to access.  Volunteer Plus to conduct training evaluation and report % levels (baseline to be determined) of volunteer satisfaction, confidence and competence and numbers of people reporting that they feel	Volunteer Plus NELFT LBBD CCG BHRUT	Quarterly reports to MH Sub Group from September 2014  Baseline to be established by 30 August 2014	
	<b>2E)</b> Promote utilisation of the North East London (NEL) Recovery College to Barking and Dagenham Mental Health service users	'job ready'. % increase (baseline to be determined) in the number of service users accessing the Recovery College.	NELFT	Quarterly reports to MH Sub Group from September 2014  Baseline to be established by 30 August 2014	
	<b>2F)</b> Ensure continued take up and evaluation of Mental Health First Aid – see Recommendation 7 actions below	See Recommendation 7 actions below	See Recommendation 7 actions below	See Recommendation 7 actions below	

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	2G) Commissioners to continue to ensure that the mental health specialist vocation support service is robust and providing good outcomes in consultation with service users.  Commissioners to consider re-investment when the contract is up for re-tender.	Continued consultation with service users and contract monitoring and evaluation. Consideration given to re-tendering in 2015.	LBBD Commissioning	Quarterly reports to MH Sub Group from September 2014	Completed
Recommendation Three: To ensure robust peer support opportunities are developed to prevent isolation, provide	<b>3A)</b> Review services commissioned and provided within B&D e.g. Big White Wall that are aimed at younger people.	Review and evaluate current services and identify next steps.	LBBD CCG Public Health	October 2014	
emotional support, and share knowledge	<b>3B)</b> Enhance use of peer trainer contribution in the co-production and delivery of the NEL Recovery College.	Evidence of increased contribution (baseline to be determined) of peer trainers in development and delivery of recovery-focused training, workshops and courses.	NELFT	Quarterly reports to MH Sub Group from September 2014  Baseline to be established by 30 August 2014	

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	achieve recommendation		responsibility	for completion	completed
	<b>3C)</b> Support local third sector organisations e.g. Alzheimer's Society to develop role of peer educators in services they offer in B&D.	% increase (baseline to be determined) in number of peer educators available to offer information, advice and services	LBBD Healthwatch	Quarterly reports to MH Sub Group from September 2014  Baseline to be established by 30	
Recommendation Four: Joint Working and Partnerships	4A) The Cabinet Member for Adult Social Care and Health to consider the appointment of an Elected Member into a role as Mental Health Champion on a fixed term basis.	as required.  Evidence of the appointment of the Mental Health Champion	Cabinet Member for Adult Social Care and Health	August 2014 September 2014	
	<b>4B)</b> Review the primary care depression pathway to ensure this is holistic and not overly reliant on the prescription of antidepressants.	Complete evaluation of the Primary Care Pathway.  Evidence of an enhanced holistic approach to managing depression, including alternative therapies e.g. CBT, within the pathway.	CCG Mental Health Clinical Lead NELFT	March 2015	

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	<b>4C)</b> Determine whether the prescribing of antidepressants is in line with practices in other boroughs.	Complete benchmarking exercise with comparator Boroughs.  Medicines Management team to complete a review report of anti- depressant prescribing and determine next steps.	CCG Medicines Management Team	December 2014	
Recommendation Five: The effects of austerity and welfare reforms should be measured so that the Council and its partners understand the impacts on residents and levels of need	5A) To consider enhancing the floating support services that help residents maintain tenancies and avoid homelessness and develop fully costed proposals if required. The MH Sub Group to be kept informed of the financial implications associated with	Quarterly reports received from the LBBD Housing service to the MH Sub Group outlining impact of welfare reforms and austerity on B&D residents with known MH problems.	LBBD Welfare Reform Officer Group	Quarterly reports from September 2014	
	implications associated with any proposals associated with offering enhanced floating support.	Review current floating support services and model proposals for an enhanced floating support service if required.	LBBD Commissioning LBBD Housing	October 2014	

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	5B) A report is prepared and presented to the MH Sub Group responding to the identified impact of the austerity and the welfare reforms for Barking and Dagenham residents.	MH Sub Group receives analysis of the data so far and projected needs of impact of reforms on MH in the future to determine next steps.	LBBD Welfare Reform Officer Group	September 2014	Completed
Recommendation Six: Continued monitoring of Local Services	6A) Commissioning Officers within LBBD to continue to ensure that services commissioned by the Council continue to remain fit for purpose and meet the needs of residents in the Borough.  These services include:	Continued consultation with service users and contract monitoring and evaluation.	LBBD Commissioning	Quarterly reports to MH Sub Group from September 2014	
Recommendation Seven: Continued take up and evaluation of Mental Health First Aid	<b>7A)</b> Mental Health First Aid to be provided to nonmental health professionals across the partnership, as well as other local employers.	Track number of staff who have completed training. Mental Health First Aid delivered to 1000 nonmental health professionals.	Public Health Commissioning	Quarterly reports to MH Sub-Group from September	

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	<b>7B)</b> MH Sub Group to receive training evaluation report that demonstrates the benefits and impact for staff and MH patients/carers.	Two cohorts to be evaluated six months after they receive training by Public Health (August 2014 and January 2015) to review impact. Analysis to be reviewed by MH Sub Group and determine if additional MH awareness training is required.	Public Health Commissioning	September 2014 and February 2015	