North East Derbyshire District Council

Cabinet

15 April 2015

Mental Health Services Scrutiny Review

Report No TR/01/15/SRB of Councillor T Reader, Chair of the Healthy Communities and Well Being Scrutiny Committee

This report is public

Purpose of the Report

 To ask Cabinet to approve the recommendations of the Healthy Communities and Wellbeing Scrutiny Committee's Review of Mental Health Services

1 Report Details

- 1.1 North East Derbyshire District council agreed to undertake a review of Mental Health Services as part of its work programme for 2014/15. It was felt timely to review this area as there had been a number of cases highlighted recently of gaps in organisations with regard to mental health.
- 1.2 The aims and objectives of the review were to:
 - Raise awareness of mental health conditions and the Council's role in supporting people using the Council's services.
 - To ensure where appropriate that staff are adequately trained and that any provision is refreshed and monitored.
 - To consider how the Council ensures that people are treated in a non discriminatory way.
 - To identify any appropriate improvements we could make in this area.
- 1.3 The Review Panel met on five occasions and considered a variety of information to gain an understanding of the subject area. The Review Panel also interviewed a range of officers both at North East Derbyshire District Council and Rykneld Homes. The full report attached at **Appendix A** sets out in more detail the evidence gathered and synopsis of the views expressed.
- 1.4 The recommendations are:
 - (1) That the Council set up a task force with relevant partners to formulate a policy setting out a proactive approach to Mental Health within the organisation.
 - (2) That the action plan resulting from the policy sets out how the Council will achieve this including the issues raised in this report on:

- Awareness of mental health conditions;
- Training of staff and members;
- Support available for employees;
- Mechanism for identifying people with mental health conditions failing to respond to contact from the Council.
- (3) That a progress report on the implementation of the policy and action plan be provided to the relevant Scrutiny Committee within six months.

2 Conclusions and Reasons for Recommendation

2.1 To ensure the Council is proactive in its approach to mental health and is fulfilling its responsibilities in this area.

3 Consultation and Equality Impact

3.1 As detailed in the full report.

4 Alternative Options and Reasons for Rejection

4.1 Not applicable

5 <u>Implications</u>

5.1 Finance and Risk Implications

5.1.1 This will be determined if Cabinet decide to accept the Scrutiny Review recommendations as part of the Lead Officer response.

5.2 Legal Implications including Data Protection

5.2.1 This will be determined if Cabinet decide to accept the Scrutiny Review recommendations as part of the Lead Officer response.

5.3 <u>Human Resources Implications</u>

5.3.1 This will be determined if Cabinet decide to accept the Scrutiny Review recommendations as part of the Lead Officer response.

6 Recommendations

6.1 As detailed in paragraph 1.4 of this report.

7 <u>Decision Information</u>

Is the decision a Key Decision? (A Key Decision is one which results in income or expenditure to the Council of £50,000 or more or which has a significant impact on two or more District wards)	This is not a key decision at this stage prior to the decision of this matter by Cabinet
District Wards Affected	
Links to Corporate Plan priorities or Policy Framework	

8 <u>Document Information</u>

Appendix No	Title			
A	Mental Health Services			
Background Papers (These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Cabinet (NEDDC) or Executive (BDC) you must provide copies of the background papers)				
Report Author		Contact Number		
Sue Broadhead Overview and S	crutiny Manager	(01246) 217060		

AGIN 7 (CAB 0415) 2015/Mental Health Services Scrutiny Review/AJD

Appendix A

NORTH EAST DERBYSHIRE DISTRICT COUNCIL

OVERVIEW AND SCRUTINY

MENTAL HEALTH SERVICES

APRIL 2015

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Chairs Foreword

With great pleasure I am pleased to present the report of The Healthy communities and Wellbeing scrutiny looking into Mental Health services within the Council. I would like to take this opportunity to thank panel members, Cllrs Antcliff, Austin, Huckerby, Oxspring, B Ridgway, Skinner and Windle.

Can I also extend thanks to Sue Broadhead, our Scrutiny Officer, who has worked tirelessly to co-ordinate all professional officers of the Council and the Rykneld Homes team and I also wish to recognise the contribution made by all of the aforementioned.

Members of the panel have recognised and noted strengths within the Council which includes genuine care for customers from staff of front of house services. It is pleasing to see that our Council has a reasonable level of understanding of methods of signposting and also partner agencies.

May I congratulate Rykneld Homes who gave a comprehensive report to scrutiny and who impressed on the panel their robust knowledge and understanding of the area, key lessons that could be shared and extended through to NEDDC staff and colleagues.

The panel felt that although we are not the first line of support for people suffering mental health conditions that very often the Council front line staff will be the first contact for many of our residents requiring extra support with issues with mental health particularly welfare and benefits advice and issues with housing and customer services.

The panel would like to recommend that a task force is arranged to support policy making and also that training should be actioned as a matter of course. Training is recognised by the panel as the most significant part of raising staff awareness and this should be enshrined within policy.

I therefore hope that the recommendations contained within the report are accepted and the council will commit to helping to raise standards for very vulnerable members of the district.

Kindest regards Cllr Tracy Reader

Review Panel

The review panel comprised the following members:

Councillor T Reader (Labour) – Review Panel Chair

Councillor P Antcliff (Conservative)

Councillor J Austen (Labour)

Councillor C D Huckerby (Conservative)
Councillor D Oxspring (Conservative)

Councillor B Ridgway (Labour)
Councillor D Skinner (Labour)
Councillor J Windle (Labour)

1. Recommendations

- 1.1 That the Council set up a task force with relevant partners to formulate a policy setting out a proactive approach to Mental Health within the organisation.
- 1.2 That the action plan resulting from the policy sets out how the Council will achieve this including the issues raised in this report on:
 - Awareness of mental health conditions;
 - Training of staff and members;
 - Support available for employees;
 - Mechanism for identifying people with mental health conditions failing to respond to contact from the Council.
- 1.3 That a progress report on the implementation of the policy and action plan be provided to the relevant Scrutiny Committee within six months.

2. Introduction

- 2.1 At its meeting on 26th September, 2014 the Healthy Communities and Well Being Scrutiny Committee agreed to undertake a review of Mental Health Services.
- 2.2 The Committee thought it timely to review this area as there had been a number of cases highlighted recently of gaps in organisations with regard to Mental Health. As a District Council it was felt that many of our services have important impacts on Mental Health which may not be immediately obvious or the prime focus of the service but nevertheless can add value. These include Housing and Community Support, Leisure and Active Lifestyles, Revenues and Benefits and Financial Inclusion Activities.

3. Scope of Review

- 3.1 The review aimed to:
 - Establish the level of training being provided to staff to help them identify and support service users with mental health conditions;
 - Consider how the Council ensures that people are treated in a non discriminatory way;
 - Raise awareness of mental health conditions and the Council's role in supporting people using the Council's services;

 Identify any appropriate improvements the Council could make in this area.

4. Method of Review

- 4.1 The review panel met on five occasions to consider the scope of the review, key issues they wanted to discuss and key people they wished to interview.
- 4.2 Evidence was gathered in a variety of ways including written sources and interviews with a range of officers especially those working on the front line which included Customer Services, Leisure, Rykneld Homes, Housing, Revenues and Benefits and Financial Inclusion Activities. The portfolio holders for Community Safety and Health and Housing Strategy and Social Inclusion were also interviewed.

5. Evidence and Research

- 5.1 A number of documents were provided to the review panel for consideration. This included a variety of examples of training courses, with both direct and indirect links to Mental Health, which staff had attended. Details are provided below:
 - No Health without Mental Health: implementation Framework Department of Health;
 - The Time to Change Organisational Pledge;
 - Mental Health Training;
 - Derbyshire Suicide Prevention Stakeholder Event;
 - Carer Awareness Training Session for Staff Managing Employee Stress;
 - Equalities Training;
 - Welfare Reform Training;
 - Credit Union Training;
 - Overview of Derbyshire County Council Adult Services;
 - Age Concern Leaflet;
 - Women's Aid Leaflet Counselling for Women;
 - Talking Mental Health Derbyshire Leaflet;
 - Derbyshire First Contact Signposting Scheme;
 - Staff Guidance note for signposting in Contact Centre;
 - Staff Guidance for Contact Centre staff on Understanding Mental Health Problems;
 - Safeguarding Training;
 - Financial Action Advice Derbyshire;

- Conflict Resolution and Negotiation Skills;
- Article from The Mirror Newspaper;
- Report of review panel member from a recent Mental Health Course;
- Website links.

6. Key Findings

6.1 Strengths

- 6.1.1 The review panel heard consistent evidence that demonstrated genuine care for customers from staff dealing with vulnerable people. One example provided was where a customer visiting reception was confused and appeared to have a mental health issue but had come to the wrong Council. The officer personally accompanied them to Chesterfield Borough Council as they were having difficulty understanding. Other examples were provided of officers making extra effort where it was clear this support was needed. Rykneld Homes advised the review panel that they have arrangements in place to liaise directly with long standing cases they know about. They also employed tenant liaison officers to provide a link with the With regard to employment of contractors they endeavoured to set standards during the induction period of how to deal with vulnerable tenants. Reference was also made to the Councils recent mental health initiative with the armed forces.
- 6.1.2 There appeared to be a reasonable level of understanding amongst staff that they were not mental health experts but they had a role in signposting. Rykneld Homes, the Homelessness Section and the Contact Centre all provided a guidance sheet on organisations people could be signposted to. Organisations highlighted included Mind, Rethink, Sane, Samaritans, NHS Direct, GP's, Citizens Advice Bureau, Welfare Rights, Derbyshire County Council's safeguarding team and support workers working in the field. Evidence was also provided of people taking advice and sharing information. One example given was the actions the officer would take should they think someone was suicidal. Revenues stated they had acted as advocates and intermediaries on behalf of some of their customers. The Contact Centre also has scripts available for some issues. However, this understanding was less clear in some areas.
- 6.1.3 General awareness of mental health conditions was variable. Rykneld Homes provided a large amount of information that

suggested good understanding of this area and initiatives taking place. Supporting statements included participation in Mental Health Awareness Week, community involvement teams aware of local initiatives and liaison with a support group for carers of people with mental health issues. The manager stated that their Health and Wellbeing Champions also have links with national groups. The Homelessness Officer at North East Derbyshire District Council advised the review panel that the section had regular contact with mental health workers. The nature of the job helped the team build up the necessary knowledge they needed to work in an area were mental health issues were often present. Again there was recognition of the importance of seeking further advice if in any doubt about the best course of action to take.

- 6.1.4 Several stakeholders commented on training they had attended being of a good quality and informative. Comprehensive documentary evidence was provided from the Contact Centre and Rykneld Homes of courses that had been available for staff on mental health. This was supported by verbal collaborating evidence from other sections of the Council including Homelessness and Revenues. Training provided was a mixture of internal and external courses with attendance sometimes mandatory but on the whole voluntary. Where a limited number of staff attended the course most stakeholders stated the information was cascaded down to the rest of the office at their team meetings.
- 6.1.5 With regard to staff support the majority of stakeholders referred to Occupational Health and the Counselling Service available to staff. Several knew of colleagues who had used this service. The Council had provided several stress awareness sessions for staff that had been well received. The benefits of sharing the stresses within teams working in areas affected by mental health issues were also raised by officers. Managers mentioned their role in recognising possible signs of problems and the role of colleagues. This peer support plus having a supportive manager were considered very important. Leisure along with others talked of having an open door policy for staff. Sickness monitoring and one to ones were also raised as methods to help highlight any issues. Rykneld Homes informed the panel of a number of initiatives they have linked to health and well being of staff including classes on site for yoga, walking Wednesday and a Staff think tank. The importance of the working environment in which staff work was also raised as a factor in looking after staff health and wellbeing both by Rykneld Homes and the portfolio holders for the Council.

6.2 <u>Areas for Improvement</u>

- 6.2.1 It was apparent that there was no corporate policy or guidance on this area. Whilst some frontline services had developed their own guidance notes this was not consistent across the organisation. It was suggested that the Council should have a policy on Mental Health which was embedded across the organisation, co-ordinated by an appropriate resource such as Human Resources. The Council's Safeguarding Policy was highlighted as a comparative document that seeks to ensure the Council fulfils its responsibilities. It was felt that the Council needed to ensure that it had good links with the mental health team and was engaging and identifying where it was appropriate for it to intervene. It was proposed that a Task force should be set up with appropriate partners to help formulate the policy/guidance and resultant action plan that addresses the areas for improvement set out below.
- 6.2.2 Whilst several of the stakeholders interviewed had a reasonable level of awareness others were less well informed. The review panel concluded that the organisation would benefit from a co-ordinated approach to raise general awareness of staff on Mental Health and how to recognise issues. Suggestions put forward included the use of pop ups on computers and more publicity about the building, briefings at managers forums.
- 6.2.3 One issue raised on several occasions was training. Levels of training appeared appropriate in some areas but not across the board. Those who had attended courses felt they had been of a good standard but the majority of the stakeholders raised the issue of staff resource and available training budget. There was a perception that given the current climate there was limited budget for training. This was queried by some managers but the general response from officers was that training was often limited to one or a small number of the team due to insufficient resource whether staff or budget. There was evidence that attendees attempted to ensure that knowledge was shared across the team but the overall impression given was that attending in person was better. Another consideration raised was how we classify training. Some training was made mandatory but the majority was voluntary. There was a feeling that the balance in this area was not always correct and would benefit from a corporate overview. The awareness and training in this area for members was also highlighted. The portfolio holder suggested that training should be given yearly with at least something in the induction period. This was felt important due to the regular contact elected members had with their communities.

- 6.2.4 Support for staff through the use of the Council's provision of a Counselling service and access to Occupational Health was recognised and appreciated by stakeholders. However, awareness of this facility was variable and usually was offered by managers when they became aware it was needed by member of staff. It was suggested that its availability needed to be advertised more widely to staff, perhaps through a note on employees wage slip. The health and wellbeing of staff was also raised in relation to the importance of working environment. Staff had previously had the use of a Health and Well Being room at the Council House and various activities were provided as part of the internal Health and Wellbeing policy. This was no longer the case but was particularly relevant with the move to the new Council Offices.
- One area of concern was where frontline services dealing with large 6.2.5 amounts of customers failed to identify that a person was not responding due to a mental health issue. The Chair of the Panel provided a newspaper article that highlighted a real life example of this. It highlighted a case where a customer had committed suicide as they were unable to cope with the financial situation they found themselves in. A number of letters had been sent from the Council in the article trying to resolve the issue but unfortunately the outcome had been tragic. The review panel felt it was easy to understand how this situation could have arisen. However, they felt that as a Council we need to identify a suitable system/mechanism to spot people not responding to forms who may be having a mental health issue and need more personal attention. It was recognised that this would require resource to be available within the system to allow for this but the review panel thought that a targeted response was essential where people were experiencing a mental health issue.

6 Conclusions

6.1 The review panel heard views from a wide selection of stakeholders during the review. They concluded the level of awareness of mental health across the organisation was varied. There were some areas for further improvement. These were centred on the Council developing a corporate policy to ensure that it was taking a proactive approach to fulfilling its responsibilities in this area.

7 Stakeholders Engaged During the Review

Lucy Gebbie Head of Corporate Services

Carl Griffiths Private Sector and Housing Options

Councillor Michael Gordon Portfolio Holder

Lee Hickin Assistant Director – Leisure

Anna Kendal Customer Services

Jane Kirkwood Housing Options Officer

Kelly Massey Active and Healthy Lifestyles

Tania Morrell Human Resources

Steve Pintus Associate Director of Public Health

Councillor L Robinson Portfolio Holder

Ian Spencer Revenues and Benefits Manager

Heather Summers Head of Community Involvement and

Customer Care (Rykneld Homes)