Whole Systems Integrated Care

Serious and Enduring Mental Illness

Health & Well Being Board 24 June 2014
This presentation is a compilation of different documents produced by the North West London Whole Systems Integrated Care for People with Long Term Mental Health Needs

Presented to the Hounslow Health & Well Being Board 24th June 2014
Overview of NWL Mental Health programme

• Population of 2m; Spend of £450m; 160,000 patients of whom 30,000 ‘SMI’ (40-50% Primary care alone)

• 8CCGs & Local Authorities, Police, Mental Health Trusts, 3rd sector providers, Services Users & Carers;

• Expert Reference Groups to lead co-production of change at scale, supporting local delivery.

• Shaping Healthier Lives: significant work underway; WSIC as an enabling framework to realise ambitions.

• WSIC: LTMHN – Hounslow & West London (for all 8).
Overview of Outline Plan for Mental Health

**Emerging early adopter geography:**
- Brentford and Isleworth in Hounslow
- West London covering Kensington and Chelsea and Queens Park & Paddington

**Prioritised population group:**
People with Long Term Mental Health Needs (formerly known as SEMI/Serious & Enduring Mental Illness)

**Commissioner partners:**
- Hounslow CCG
- London Borough of Hounslow
- West London CCG
- Tri-borough local authorities

**Provider partners:**
- 10 GP Practices in Brentford and Isleworth
- 34 GP Practices in West London
- London Boroughs of Hounslow & Tri-Borough
- Central and North West London Foundation Trust
- West London Mental Health Trust
- Third Sector providers and Advocacy Groups

**Approach to co-production of plan:**
- Three co-production workshops (one in Hounslow, one in West London and one jointly across both areas) where cumulatively 100 people including patients/service users, GPs, front line clinical staff, third sector representatives, local authority staff and commissioners attended
- Three Expert Reference Group meetings that include lay partner representatives
- Fortnightly working group in Brentford and Isleworth including lay partner and front line staff representatives
Key messages from Co-Production

- Recovery ambition is not high enough
- See the whole person, not just the diagnosis
- Give me care, not ‘just a care plan’
- Peer/Care support needed at transition
- Social isolation is the biggest barrier to staying well
- Need join up between MHT and GP
- Easy in, easy to navigate
- My care plan, my goals
- Community-based & Preventative
- Self-management + belief = hope
- Co-production is the way forward
Our vision for a new model of care…

- Whole person, whole family
- Pro-active, not reactive
- Collaborative
- Care, not just care plan
What we know…

• We have some excellent services, but not evenly spread.
• We need to build on those, but also look beyond
• It’s not form that matters, but function: are the WSIC integration principles ‘lived’ and recognised consistently?
• Key issues for change:
  ✓ Emphasis on personal goals: mental well-being, physical health & social integration
  ✓ Seamless collaboration between GP and MHTs
  ✓ More support for ‘daily living’; peer support key
  ✓ Practitioners need more time to do their roles well
  ✓ A clear, lived out, recovery-focussed ambition across all services, empowering service users
Since 2013 the local Primary Care Plus Service has grown such that 4 Primary MH nurses are now available for 5 localities.

- 85% of general practice is signed up to Local Enhanced Service for those with serious mental illness
- Well-established and well-performing acute liaison psychiatry team
- Mental Health Nurse embedded in Integrated community response team.
- Access standard for urgent assessment of 4 hours/home setting.
Next Steps developing the Business Case

- **Co-production:** early emerging ideas will be refined and developed

- **GP Practice Survey:** a survey is being sent to all participating GP Practices building on existing work in Hounslow and will first identify all patients with an appropriate QoF flag

- **Finance:** the finance workstream will identify affected contracts and budgets

- **Commissioning:** determine for how best to commission and performance manage any new service

- **GP Networks:** GPs need to discuss the implications of new ways of working. Governance structures need to be identified to support GPs hold a capitated budget along with provider network.

- **Provider networks:** Providers will need to identify supporting organisational structure, performance management and resulting budget.

- **Implementation:** The work of task and finish groups will be consolidated together into one Whole Systems plan