

Appendix A: Outline of the Review of Mental Health Social Work Services

The Context

1. During the term of the new Agreement the Council and Trust are carrying out a Review of mental health social work services. The Review will take account of the wider system changes in mental health and will provide a set of recommendations to inform the future service model.
2. At a strategic level, the Review has the broad overarching ambition to deliver better mental health services across the **whole spectrum** of need. Therefore, the scope of the review is wider than the Adult Social Care services within the Trust, extending to the development of a stronger prevention and early intervention offer. This offer will help reduce or delay the onset of mental health needs and promote recovery in line with the duties on Councils set out in the Care Act 2014. This means the review will consider services, pathways, and how the services fit together as a system.
3. In operational terms, the review seeks to fix the longstanding issue of a mismatch between the thresholds for access to EPUT community mental health services and the Council's duties under the Care Act 2014. This means that there are groups of individuals who find it difficult to access services despite being eligible under the Care Act.
4. People working within services often refer to these groups as "the missing middle", describing a range of different needs and populations who find it difficult to access the appropriate support. This may include individuals with autism and other neurodiversity issues, and individuals who have significant social needs (for example connected with family relationships, housing, employment, drug and alcohol dependency etc) that are associated with their presenting mental health issue.
5. The timing of this review is auspicious, with the implementation of the NHS England Community Mental Health Services Framework and the lifting of the requirement for specialist mental health services to use the Care Programme Approach. NHS England, through the Community Mental Health Service Framework ("the Framework"), is providing new funding to the Mental Health Trusts to develop new pathways that blur the boundary between specialist/secondary services and primary services. This starts to create a sense of a local mental health "system" rather than a series of front doors for service users to navigate. It recognises the existence of the "missing middle" and the need for services for all.
6. The Framework and other investment within the Trust have enabled the creation of new posts for social workers which, to date, have been in new specialist services (for example in Perinatal Services). This provides opportunities to take a wider view of where a social work presence is required, for example the creation of mental health social work posts within the new primary care networks.

7. The review will work at “locality” or “place” level across the County, recognising the importance of local engagement and ownership of services, but with common standards of outcome across all services.

Adult Social Care Business Plan

8. The internal policy context for the review is set by the Adult Social Care Business Plan 2022 – 2025, which has the following seven priorities:
 - *Develop a prevention and early intervention offer to help reduce or delay the onset of health and care needs.*
 - Improve our support offer to carers
 - Improve access to housing, employment, and meaningful opportunities
 - *Implement place-based working and integration*
 - Support and shape the care market
 - Improve quality of practice
 - Improve digital and technology infrastructure
9. The Review speaks specifically to those priorities marked in italics above.

Phasing of the review and the approach

10. The review is being carried out in phases as follows:
 - Phase 1: diagnostic review of current arrangements (completed May 2022)
 - Phase 2: development of an options appraisal of new models and pathways. Implementation of new models of service delivery to start and be underway (to be completed by 31st March 2024)
 - Phase 3: Completion of delivery and implementation of new models of service delivery with appropriate partnership/contractual arrangements in place (completed by 31st March 2025).
 - Phase 4: evaluation of benefits (ongoing from Phase 3).
11. **Phase 1** of the review has been completed. Headline findings from the Phase 1 Report include:
 - EPUT is engaged on a “comprehensive review and redesign of the mental health community model...in each of the five Essex place-based systems. This will transform secondary care community mental health teams into a multi-provider care pathway model and link in with the [newly created] integrated Mental Health Primary Care Networks and Adult Social Care localities.
 - The replacement of the Care Programme Approach (the policy framework used to coordinate and deliver mental health services across England) is, from the perspective of the Council, an opportunity to harmonise the new model with the principles of the Care Act 2014 – particularly the principles of “prevent, reduce, and delay.” These changes will enable people to be supported earlier and to be given greater choice and control in how their care and support needs are met. The arrangement between the Council and the Trust has up to now been more akin to a commissioner/provider relationship. This means that ECC has not been closely involved in the day-to-day operational management of the services.

- The Mental Health & Wellbeing Team model will be an important component of the new model(s) of care. This will include mapping the interface / overlap of function between this Team and the new primary care network social prescribers. This will be explored further within the context of discussions with the primary care networks and the Integrated Care Systems.
 - The development of primary care network mental health teams is at an early stage and varies between the five localities, being most advanced in West locality.
 - It is difficult to identify from the EPUT Performance and Activity information how much of the work in the community mental health teams (CMHTs) is carried out directly by social work staff as a proportion of the Council's overall delegated duties. This is because other professional groups in multi-disciplinary teams (MDTs) also support social work activity.
12. **Phase 2** of the review will design, with EPUT, a model of care and new pathways that meet the overarching aim to deliver better mental health services across the whole spectrum of need. The pace of this phase is tempered by the fact that the work needs to run in step with the wider changes in Community Mental Health Services, and with the wider changes in the delivery of Adult Social Care services at neighbourhood level taking place in partnership with the primary care networks.
13. Furthermore, it is important to note, at the time of writing, the different starting points of services across the county. West Essex has been a trailblazer in terms of developing new pathways in mental health, with North-East Essex following behind, and Mid & South Essex some way behind the other two areas. Likewise, starting points for the development of neighbourhood services and primary care networks are variable across the County.
14. Another factor dictating the timescale is the intention to use a co-productive approach, inviting the input of partners including service users, their carers, staff, and the voluntary sector.
15. The resulting models are expected to be based round local populations and multi-agency – across statutory and independent sector organisations. That may mean that other forms of partnership/contractual arrangements are more appropriate than a single Section 75 Agreement with EPUT, for example making use of alliance contracts that are multi-agency. There is potential to develop agreements that include not just mental health, but also other services delivered at that local level. The options and best way forward will be developed during this phase of the work.
16. At the end of Phase 2 – 31st March 2024 - notice will be given to EPUT under this new Partnership Agreement, so that there is a year up to 31st March 2025 - Phase 3 – to agree the new arrangements to be put in place, which may be a further new Section 75 Agreement, updated to reflect service delivery arrangements.

17. **Phase 3**, starting in April 2024, brings together the work of Phase 2 and completes implementation of the new models and the agreement of the new partnership / contractual arrangements underpinning the model for the social work services by the end of March 2025.
18. **Phase 4** – Evaluation – runs from the time of implementation of new services and pathways and continues beyond the end of Phase 3.
19. The option to extend for a further six months is included as a contingency.

A new Section 75 Agreement for the period to 31 March 2025

20. The request to put in place a new Section 75 Agreement for a period of two years six months can be summarised as follows:
 - The level of change required to put in place new pathways is such that it is not possible to complete this within the remaining months before the expiry of the existing Section 75 Agreement. The new Agreement will enable a transition to be made to new service models and new partnership/contractual arrangements based on the review.
 - The timing of the implementation of the review will be aligned with the timescales of the wider NHS England Community Mental Health Transformation Programme and the changes in ASC referred to above.
 - The enormous change required to move away from the Care Programme Approach (CPA) should not be underestimated. The Care Programme Approach is the national policy guidance that specialist mental health services are required to follow in the coordination and delivery of mental health care and treatment for people with mental health conditions and their family carers. The move away from CPA is a significant cultural change in the way services work to realise the commitment to personalised care and support.
 - The engagement with service users, carers and staff throughout phases 2, 3 and 4, is essential and it will require time to enlist their input in a meaningful way.
 - Due to the complex nature of NHS organisational arrangements in Essex, there are a large number of significant stakeholders to be involved. The review will include mental health providers within the voluntary and community sector.
 - The new agreement will allow time to align safeguarding and quality assurance with the processes in the Council, consistent with the Council's preparations for CQC assurance.
21. The review is being conducted collaboratively between the Council and Trust. The findings and recommendations from Phase 1 have been shared with both the Adult Leadership Team in the Council and the Trust's Executive Team. The work has a strategic fit with the Council's and Trust's strategic objectives, and with the

Community Mental Health Services Transformation Programme. The Trust Executive Team has confirmed its support to a new Section 75 Agreement.

22. It has been agreed with the Trust that the new agreement contains a number of amendments to update the agreement and to reflect the common purpose of both partners to carry out the transformation in services described above.
23. In addition to the changes in mental health service provision, the review will also consider whether a Section 75 Agreement is the most appropriate way to organise the Partnership in the longer term. This is in the context that the new models of services and pathways will include not just EPUT and the Council but also the primary care networks and the rich network of independent sector providers, organised at locality/"place" level.
24. The advantages and disadvantages of different forms of partnership arrangements, including Section 75 Agreements and multi-agency alliance contracts, will be considered as the delivery model is defined. The organisational structures to enable and facilitate the new model will follow as a secondary consideration and be in place by the end of the new proposed Agreement in March 2025.