

Overview and Scrutiny Panel Recommendations Report

REVIEW TITLE	O&S PANEL	DATE
Mental health	Health and Care	January 2022

“As a result of the pandemic, demand for mental health services is increasing. Without early help, vulnerable people can progress to more serious mental illness, impacting them and their families and increasing the pressure on local health services. This review looked at primary care – the first point of contact in the healthcare system – and the voluntary and community sectors to understand the availability and accessibility of early support for adults.

The Panel found a large variety of services in the borough with different ways of accessing them, including self-referral. We heard that lack of awareness, low confidence or confusion about services can prevent people from seeking the help they need. Our recommendations focus on understanding and removing barriers to self-referral.



We have listened to the experience of residents to identify practical actions that the council and our partners can take to help people access support more easily.”

Councillor Mike Gibson, Chair: Health and Care Overview and Scrutiny Panel

Recommendations

Recommendations one to four support actions already identified in Bracknell Forest’s draft Health and Wellbeing Strategy. Target dates will align with the Health and Wellbeing Strategy action plan.

- 1. That the Health and Wellbeing Board consider the following points under the action to explore the development of a public facing marketing and communication campaign to raise awareness of services available and how to access them:**
 - Help people to understand each service to remove the fear of the unknown
 - Create personal connections which encourage engagement, such as using photos and first person accounts in communications
 - Include people with experience of the service as ambassadors to increase personal connections
 - Use outreach work to bring the service to the community
 - Emphasise the ability to self-refer and that there is no right or wrong ‘front door’
 - Demonstrate how people can direct their own care and recovery, making choices about their mental health
 - Use accessible language so people understand the approach and feel included
 - Include campaign information in councillor induction so councillors can signpost
- 2. That the Health and Wellbeing Board ensures users are involved in the action to create and relaunch an improved version of the community map.**
- 3. That the Health and Wellbeing Board ensures the community map training for providers supports collaboration between services, in particular between GPs/practice staff and the voluntary sector, to help them understand each other’s work and improve signposting and referrals.**

4. **That the Health and Wellbeing Board includes an event as part of the relaunch of the community map, to provide an opportunity to engage with the public to explain services and make connections.**

To support these, the following recommendation is made to the Executive:

5. **That the Executive Member for Adult Services, Health and Housing invites the Chair of the Health and Care O&S Panel to present the mental health review report to the Health and Wellbeing Board on 7 June 2022.**

Recommendations six to eight are outside the draft Health and Wellbeing Strategy and are made to the Executive and health partners for future activities:

6. **That the Executive Member for Adult Services, Health and Housing works with primary care and voluntary sector providers to increase the opportunity for mental health services to be present in community spaces. By December 2022, subject to the prevailing COVID approach.**
7. **That Frimley Clinical Commissioning Group (CCG) seeks agreement with primary care to clearly signpost mental health support on all GP websites. Target date for Bracknell to be confirmed by Frimley CCG.**
8. **That Frimley CCG shares the findings of Talking Therapies' work on low access rates from culturally and ethnically diverse communities and older adults with relevant health partners and voluntary and community groups. Target date to be confirmed by Frimley CCG.**

Key findings

The Panel found that:

- there is a large variety of services available with different ways to access them,
- a wide range of professionals can signpost and refer, for example, GPs, social prescribers, link workers, community nurses,
- most early intervention services accept self-referrals,
- services are making good use of resources and have the capacity to accept more clients.

There is increased pressure on GPs for mental health services, which can be eased by greater use of self-care, self-referral and the voluntary and community sector.

During the pandemic, people with low level anxiety and depression did not access early support, meaning many developed more severe and complex needs.

The self-referral process is straightforward, but barriers to accessing help include:

- not knowing the service exists
- uncertainty about the service and what it does
- confusion that there might be a 'right or wrong way' to access help
- low confidence and low motivation.

People are more likely to approach a service if there is a personal connection, and are more likely to engage with support if they are involved in directing their care.

Many services offer a blend of online and in-person activities. Online options offer additional capacity, more flexibility and can remove some geographical or mobility barriers. Physical options must remain for people who are unable to access the technology and to enhance the sense of community.

Young adults are increasingly in need of mental health support, and people from ethnically and culturally diverse backgrounds have low engagement with services. Services are working to better target the needs of these groups.

The longer-term impact of the pandemic on the voluntary and community sector is still unknown, and the council's Voluntary Sector Champion will include the sector's pandemic recovery in their areas of focus.

The Panel found good working relationships across the organisations that deliver mental health services. This collaboration provides a strong base to support continuous improvement of mental health services.

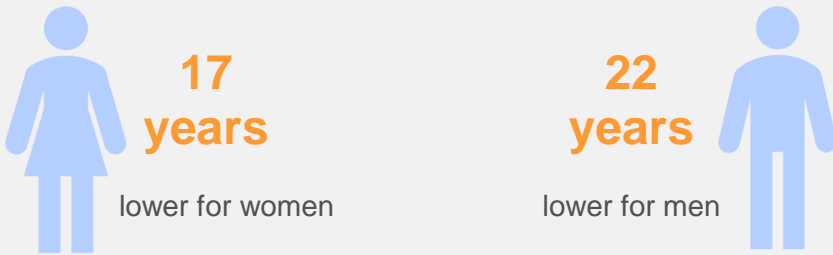
Good practice

- ✓ Service users spoke about the positive impact of being actively involved and directing their own care and recovery. When activities are done 'with' people, not 'to' people, they present a series of positive choices to improve wellbeing. Services provided many examples of how they involve users and co-design their care. This approach is also reflected in the Frimley Integrated Care System Strategy 2019-2025.
- ✓ Talking Therapies is the NHS's primary service for supporting adults with mild to moderate mental health problems. In Bracknell Forest, the service is exceeding the nationally set targets for treatment timescales and recovery. Performance details are in **Appendix 1**.

Background information

People with Significant Mental Illness (SMI) have worse health outcomes.

In Frimley, they have a shorter life expectancy of



despite dying from the same range of illnesses as the mentally healthy population.

Poorer outcomes can be caused by lack of access to care and missed screening checks.

The combination of mental ill health with a long-term condition affects patients' quality of life and increases the amount of care required from the NHS.

1.4 million adults across the South East are forecast to experience mental health conditions over the next few years, an increase of 15 – 30%.



Many of the factors are linked to the pandemic:

Job loss



Lower household income



Trauma



Bereavement



Isolation



Health anxiety



Deprivation is associated with poorer mental health.

Public Health reported that instances of depression and SMI across Bracknell wards vary from **0.4% to 1.2%**

Protective factors include:

Good employment



Social networks



Peer support



Physical activity



In December 2021, the Health and Wellbeing Board approved the draft Bracknell Forest Health and Wellbeing Strategy 2022 – 2026 for public consultation. The strategy commits to:

- promote mental health and improve the lives and health of people with mental ill-health, and
- create opportunities for individual and community connections, enabling a sense of belonging and the awareness that someone cares.

The draft strategy includes actions to create and promote activities, and to raise awareness of what is available and how to get involved. These action plans align with the Panel's findings and are supported by this review.

Local services

The Panel spoke to the following services about how they meet community needs and divert clients from higher level support services:

Social Prescribing Service

Bracknell Forest Community Network (BFCN)

Talking Therapies

Friends in Need

Jeallot's Hill Community Landshare

Stepping Stones Recovery College

All of these services accept self-referrals.



Frimley Clinical Commissioning Group (CCG) told the review about the following new NHS mental health services in Bracknell. They all reflect the primary care focus on removing barriers and increasing collaboration.

Wellbeing service: offers support for practical, situational and social challenges

Outreach programme: for people with SMI and a long-term physical condition

Mental Health Additional Roles and Responsibilities Scheme (ARRS): embeds expert mental health nurses in GP practices

Mental Health Integrated Community Service (MHICS): supports people with significant mental health problems using a multi-discipline team.

The wellbeing service and ARRS accept self-referrals.



More information about all of these services is included in **Appendix 2**.

Review findings

Demand for primary mental health services

Primary care services did not see the expected increase in demand for low level anxiety and depression services at the start of the pandemic. People did not access early support, meaning many presented with more severe and complex needs later in their illness. Frimley CCG is now actively promoting earlier support to prevent more serious illness. The review recognised the benefits of early intervention, facilitated by self-referral.

All services the Panel spoke to accept self-referrals. Many professionals can also refer, such as, the police, clinical pharmacists, paramedics. The variety of access options may not be well known and many people think they need to see their GP first. This introduces a delay in the process and may create a barrier for some people.

It also puts a strain on primary care. In Bracknell Forest, GPs experienced a 20% increase in mental health patients between April 2019 and April 2021. Over the same period the number of GPs decreased slightly. This pressure can be eased by increasing the use of self-care, self-referral and the voluntary and community sector.

Clear signposting to self-referral options will support this. The review recommends that access routes to mental health support are made clearer by adding a distinct mental health option to GPs' websites.



Most of the mental health services the Panel spoke to reported a decrease in demand at the start of the pandemic. For many, this is now growing and is expected to exceed pre-pandemic levels.

The services appear able to cope with the increasing demand. Friends in Need is now supporting around 25% more members than pre-pandemic, helped by their blended offering where the new online timetable increases choice and capacity. Talking Therapies is currently below target numbers and is able to increase their users by about 20%. As a relatively new service, Stepping Stones recovery college is also aiming to increase the number of students.

During the pandemic, staffing issues prevented Bracknell Forest Community Network from supporting their full caseload. Two more facilitators have now been recruited to return the service to full capacity. In the interim, a variety of services worked together to share the load,

demonstrating good collaboration across mental health services to make best use of available resources.

Delivery of services

Face-to-face support for most services stopped during the pandemic. Many services quickly moved online to continue their provision.



Talking Therapies reported the benefits of their online service. Attendance and recovery rates have both improved and the service can access people in a variety of locations, for example, in a car for greater convenience or at home if they are unable to leave the house due to depression. It also helps relieve the pressure on rooms at GP surgeries.

Most services now offer both online and in-person support options. The additional online options provide more choice, increase capacity and can remove geographical or mobility barriers for attendees.

Bracknell Forest Community Network noted that the decrease in physical community groups meant there were fewer places to take clients. A return to face-to-face activities is crucial for some people to increase their community interactions, build relationships and start socialising. In-person options are also vital for people who are unable to access technology, or who do not find it a helpful way to get support.



Involve explained that some voluntary and community organisations had to stop operations during the pandemic, while others quickly changed their approach to continue supporting vulnerable people. They have launched a project to better understand the new landscape of voluntary and community groups and how to fill any gaps. The Panel noted that the longer-term impact of the pandemic on the voluntary and community sector is still unknown, and the council's Voluntary Sector Champion will include the sector's pandemic recovery in their areas of focus.

The Panel heard about recent innovations in the voluntary sector, including the Bracknell Forest VCS COVID Recovery Grant and the Older Peoples Consortium. These have all been possible because of good working relationships between the voluntary and community sector and statutory partners.

Council forecasts showed a budget overspend of £784,000 for council mental health and out of hours services in 2021-22. This was due to the increasing cost of providing care as people are living longer and often have more complex needs. Although these services are outside the scope of this review, the Panel recognised the difficulties of predicting a demand-led service, particularly during a pandemic where previous models may not apply.

Who is using services



Services are seeing more users from younger age groups. Before the pandemic, social prescribing clients were predominantly over 70, mainly experiencing social isolation and loneliness. Now, users are often in their 20s and 30s, presenting with anxiety about leaving the home and re-joining social activities. Bracknell Forest Community Network also reported an increase in younger clients.

Bracknell Forest Community Network are monitoring this age group and are working with Sport in Mind to identify more activities for younger people. Friends in Need have opened a young adults group which offers a timetable shaped by and tailored to younger members, and NHS partners have established a task and finish group to consider the needs of those aged 10-29. These actions are suitable responses to the changing requirement.

Several services noted that they had low take up from culturally and ethnically diverse communities.

Talking Therapies reported that people from these groups represented about 20% of their clients. They also reported low access rates among older adults (aged 65+), who represented about 6% of their clients. Talking Therapies are now working with relevant clients from both of these groups to improve the access rates.

Stepping Stones reported that over 90% of their students identify as White English, Irish or Scottish. They aim to include some bespoke initiatives among local faith and ethnic community groups and will continue to work closely with statutory and voluntary sector organisations to provide more targeted, culturally sensitive workshops and courses.

The Panel noted these activities to try to increase access from these groups, and recommends that the findings from Talking Therapies' work are shared across primary and voluntary sector services so improvements can be more widely implemented. The review recommendations on improving communications and increasing access are also relevant in supporting these groups.

Access and engagement

The Panel heard from five people with experience of Friends in Need, Talking Therapies and Stepping Stones.

Most people had self-referred to a service, following a suggestion from their GP or seeing an advert. They all stated that the process of self-referral was easy. The challenges were knowing that the service exists, then building the motivation to approach the service and to see it through.



The community map was identified as a key resource both for the public and for providers. The review supports the draft Health and Wellbeing Strategy action to review and relaunch the community map, with associated training and publicity. The recommendation to involve users in this work reflects the importance of 'done with' rather than 'done to' highlighted by users.

The Panel heard how a personal touch helps people to engage. Users said being able to see the service and connect with providers removes the fear of the unknown and makes them more likely to approach. They value being able to talk to people at an early stage to get a feel for the organisation.

Community-based providers said many of their new clients were attracted through word of mouth. Personal recommendations establish a connection and build trust with the service, so the review recommends that services use people with experience of their activities as ambassadors.

One student built their commitment to the recovery college after visiting their stall on the community cart at The Lexicon. People are more likely to take the opportunity when a service 'comes to them' so outreach work is recommended. The recommendations to increase the presence of services in community spaces, and to host an event to connect with the public, will also help.

All of the clients valued the sense of community and team effort they experienced at the services. They felt they were making their own choices about their recovery and collaborating with other people to achieve. One contributor said,



"I feel respected. There's more of a togetherness, not 'them and us'. When you're in a group, everyone has their own problems but you're all contributing and it helps each other."



The participants all appreciated the return to face-to-face activities, which help build community. They also noted the value of online services, particularly the online courses from Talking Therapies which provide an immediate way to get started.

One provider noted that there are many apparently similar services in Bracknell:



“People may think services are in competition with each other, or that they need to find the ‘correct’ service for them. The reality is that services are all working together. We need to engage with people and showcase the fact that we’re all working jointly to try to support them.”



The Panel’s recommendation to increase understanding and collaboration across services reflects this, supported by the recommendations to improve communication with the public. The good working relationships that were observed across services provide a strong base to work from.

The council is a trusted organisation when people are searching for help. The review process highlighted opportunities to update the council’s webpages for better signposting of services. As a result, senior mental health partners have already worked with public health officers to review and update the pages.



The pandemic has created many challenges and I have welcomed this opportunity to look at how partners are supporting mental health in Bracknell.

Mental and physical health are so closely linked, and poor health in one often causes issues in the other. I am very pleased to see that our NHS partners and the Health and Wellbeing Board have strategies that recognise the link, and that aim for equality of wellbeing in both.



Councillor Mrs Isabel Mattick, Vice-Chair: Health and Care Overview and Scrutiny Panel



This review has highlighted the range of mental health services on offer in Bracknell Forest and the great work our partners do in delivering them, especially through the pandemic. I would like to thank all our health and support workers for their hard work throughout these challenges.

I would also like to thank everyone who has taken part in this review. One of our key findings was good working relationships across services and sectors, and this review has benefited from the open and willing collaboration of many partners. The insights provided by residents with experience of services were also invaluable.

One of the strengths of scrutiny is making things more visible. Through our public meetings, and the related press coverage, we have been able to show some of the many services that are there for people in the borough. There are many more options out there, and our recommendations are designed to help more people access the services they need.



Councillor Mike Gibson, Chair: Health and Care Overview and Scrutiny Panel

Review panel

Councillor Allen	Councillor Mrs L Gibson
Councillor Bhandari	Councillor Mrs Mattick (Vice chair)
Councillor Brossard	Councillor Mrs McKenzie
Councillor Finch	Councillor Temperton
Councillor Gibson (Chair)	Also attending: Councillor Mrs Birch

Contributors to the review

Nadia Barakat	Director for Mental Health, NHS Frimley CCG
Aidan Jordan-Lewis	Transformation Manager (Mental Health and Learning Disabilities) Bracknell Forest, NHS Frimley CCG
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Emma Priestly	Social Prescriber, Bracknell Forest Council
Sheetal Tanna	Development Manager Mental Health, Bracknell Forest Council
Kate Darrall	Project Manager, Jealott's Hill Community Landshare
Ansa Khan	Team Lead, Friends in Need
Bernadette Fisher	Stepping Stones Lead - Stepping Stones Recovery College
Dr Katie Simpson	GP, NHS Frimley CCG Clinical Lead Mental Health
Dr Alison Salvadori	Head of Berkshire IAPT (Improving Access to Psychological Therapies) & Mental Health Access Services, Consultant Lead Psychologist
Ed Rennie	Acting Deputy to Head of Service (IAPT), Clinical Service Manager East Berkshire
Philip Bell	Interim Chief Executive Officer, Involve
Residents with experience of Friends in Need, Talking Therapies and Stepping Stones Recovery College	
Councillor Birch	Executive Member Adult Services, Health and Housing
Grainne Siggins	Executive Director: People
Tony Dwyer	Assistant Director: Mental Health & Out Of Hours
Jen Lawson	Governance and Scrutiny Officer

Appendix 1

Talking Therapies shared their most recent key performance indicators, covering October 20 – October 21:

- Recovery rate target 50% – East Berkshire 58%
- Reliable improvement target 64% – East Berkshire 68%
- Treated within six weeks of referral 75% – East Berkshire 98%
- Treated within 18 weeks of referral 95% – East Berkshire 100%

Appendix 2 – details of local mental health services considered in this review

Social Prescribing Service

Links people who have social, emotional and practical needs to a range of local, non-medical support in the community to improve their health, wellbeing and resilience.

For example, help with debt and financial problems, unhealthy lifestyles, loneliness, confidence and goal setting.

Available to Bracknell Forest residents, aged 18 or over



Where

Support provided by telephone

How

Self-refer, or referral by any health, social care, voluntary or other organisation

For more information visit: [Social prescribing service](#)

Bracknell Forest Community Network (BFCN)

Supports individuals and their carers to develop their confidence, life skills and resilience, to remain socially included and to better understand their mental health.

For example, help people to develop a meaningful routine by using their community facilities, trying things out, starting socialising and developing relationship skills.

Available to Bracknell Forest residents aged 18 or over who are:

- recovering from an episode of mental ill-health (usually accessing secondary mental health support)
- “stepping down” from Community Mental Health Team support
- at risk from suffering an episode of mental ill-health



How

Referrals usually come from Community Mental Health Teams or GPs. Self-referral is available.

For more information visit: [Bracknell Forest Community Network](#)

Talking Therapies

Addresses mild to moderate mental health problems, such as anxiety and depression, using Cognitive Behavioural Therapy (CBT). Evidence-based, lighter touch approach with high recovery rates.

Available to Berkshire residents aged 17 and over.

Where

Face to face support offered in GP surgeries and health clinics. Online therapy programmes with immediate access are also available.



How

Self-refer, or referral by any health professional

For more information visit: [NHS Talking Therapies Berkshire](#)

Friends in Need

Peer-to-peer social support community for people with mild to moderate depression, social isolation and anxiety to promote resilience, empowerment and wellbeing.

Monthly timetable of events, including physical activities, craft and wellbeing options.

Available to anyone aged 17 or over.

Where

Various venues, such as community halls and coffee shops, around Bracknell and surrounding area. Online events also provided.



How

Self-refer, or referral by any health, social care, voluntary or other organisation.

For more information visit: [Buckinghamshire Mind – Friends in Need](#)

Jeallot's Hill Community Landshare

Voluntary community project using the power of gardening to positively change lives, allowing people to enjoy being close to nature and sharing produce.

For example, growing produce, carpentry, craft and cooking. Sharing experiences, learning skills and drawing on individual strengths, skills and interests.

Available to anyone.

Where

Six acre site between Bracknell and Maidenhead.



How

Everyone is welcome, with particular focus on people with a disability or disadvantaged background.

For more information visit: [Jeallot's Hill Community Landshare](#)

Stepping Stones Recovery College

Free workshops and courses that use learning as a positive, life-changing experience for anyone experiencing challenges to their mental, physical and emotional wellbeing. Helps people find out what they need to live a meaningful life.

For example, creating a personal recovery plan, improving health and wellbeing or having fun with creativity.

Available to anyone aged 18 or over, who lives or works in Bracknell Forest.



Where

College is located at The Court House in Bracknell town centre. Online courses are also available.

How

Self registration.

For more information visit: [Stepping Stones Recovery College](#)

Wellbeing service

Offers support for practical, situational and social challenges through supportive therapy for people who are below the threshold for secondary care.

For example, housing, money worries, substance abuse and loneliness, as well as general wellness, such as diet and healthy living.

A 1:1 phone call results in an agreed Wellbeing Pathway.

The service works closely with local health, social care and government partners.

Available to anyone aged 18 and over who is registered with a GP in East Berkshire.

How

Self-refer, or referral by any health or social care professional.

For more information visit: [Berkshire healthcare wellbeing service](#)

Outreach programme

Works with Primary Care Networks and clinical leads to contact people with SMI and carry out annual health checks. Aims to help establish equality in physical health outcomes, regardless of mental health.

In addition, Talking Therapies is now co-located in areas traditionally associated with physical healthcare, for example, respiratory clinics, diabetes clinics and long covid clinics.

Mental Health Additional Roles and Responsibilities Scheme (ARRS)

Embeds expert mental health nurses in GP practices, as data shows more people are attending primary care with low level anxiety and depression.

Mental health nurses provide advice, triage and liaison with local mental health teams. They also offer shared decision-making and brief psychological intervention.

How

Accessed directly through GP surgeries without a referral.

Mental Health Integrated Community Service (MHICS)

Supports people with significant mental health problems using a multi-discipline team, including a psychiatrist, pharmacist, psychologist, mental health nurse and community connector, with admin support from primary care. Improves access to a wide range of specialist support and addresses a gap between primary and secondary care.

Offers person-centred care, support to transition to other services, advice and brief interventions.

How

Professional referral required.