

SOUTH TYNESIDE
Mental Health Strategy
2022 – 2026



South Tyneside Council



North East &
North Cumbria





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“
This strategy is a bold call to action. Mental health and wellbeing are everyone's business.
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Introduction

This strategy sets out 'the story' of mental health in South Tyneside – what is important and why.

The South Tyneside Mental Health Strategy sets out the priorities for South Tyneside, to ensure a resilient offer that recognises that Mental Health is everyone's business, as well as the significant impact that Covid-19 has had on everyone's mental wellbeing, irrespective of life experiences.

Being a mentally healthy borough means that it will feel normal to talk about mental health; that everyone, whoever they are, wherever they live and whatever they need, will be able to access good quality mental health support if and when, they need them.

It also means that South Tyneside will be a place where the conditions in which people are born, grow up, and grow older, support good mental health and wellbeing.

Only by coming together to address the wider factors that affect mental health, improving services and, by truly focussing on prevention, will South Tyneside achieve the vision of being a mentally healthy borough for everyone.

Scope and Purpose

The strategy is all age: it covers how we plan to improve mental health and wellbeing from conception through to end of life.

The strategy makes clear the contribution that other policy areas, such as housing or community safety, make towards people having good mental health. Whilst this strategy focuses on the priorities highlighted in partnership with residents of South Tyneside, it is envisaged that this will interlink and enhance many of the other strategies aimed at reducing inequalities across the borough, including The Learning Disability Strategy, The Autism Strategy, The CAMHS Transformation Plan and the Accommodation Strategy to name but a few.

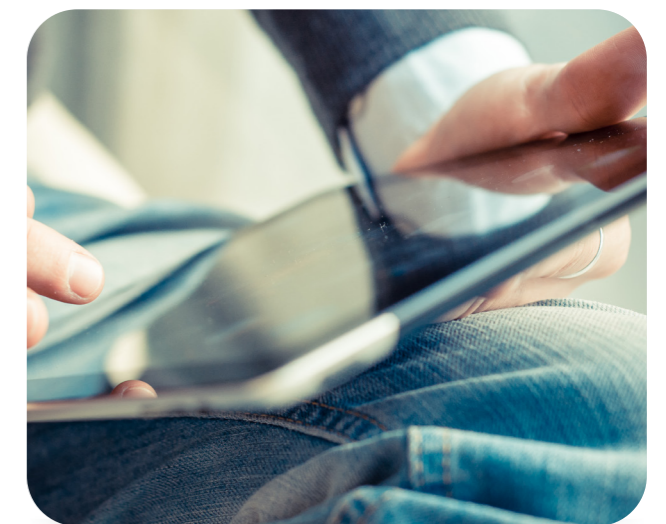
There are other strategies in South Tyneside that address the mental health of children and young people and the mental health of older people.

The South Tyneside Mental Health Strategy does not replace these existing strategies and work programmes, but it does provide a unified vision for mental health in the borough. This means that activity across children and adult services, across both prevention and treatment, and in community settings and hospitals, can be better aligned and therefore have the greatest impact on people's lives.

The purpose of the strategy is to:

- Drive forward the vision that 'South Tyneside will be a Mentally Healthy Borough for everyone', show how we can all play a part in achieving this, and how we will know when we've achieved it through the identified outcomes
- Set out the delivery plan - three key areas, and eight priorities that will help achieve the vision
- Provide a framework to develop a shared understanding across a diverse range of services

The strategy should be read in conjunction with the action plan which highlight the timelines against each of the actions.



Summary

Summary of Mental Health Strategy (2021-2025)

Key Areas:

- Reduce mental health inequalities, including unfair access to support
- Improve all people's mental health
- Improve flexibility, integration and compassionate response of services

8 Priorities:

1. Target mental health promotion and prevention within our community; with particular focus on those most at risk of poor mental health, suicide and self-harm

2. Reduce over representation of people from Black, Asian and minority ethnic communities admitted to hospital with a mental health crisis

3. Ensure education, training and employment is more accessible to people with mental health problems

4. Improve transition support for 14-25-year olds

5. Ensure all services recognise the impact that trauma or psychological and social adversity has on mental health. This includes an understanding of how to respond to adverse childhood experiences and embedding a 'Think Family' approach in all service models

6. Improve timely access to mental health crisis services and support and ensure that people receive a compassionate response

7. Help raise awareness of mental health issues with older people and ensure that they are able to access information, support and appropriate treatment that meet their needs

8. Improve the physical health of people with serious mental illness.

Outcomes – Starting with people

- People of all ages and communities will be comfortable talking about their mental health and wellbeing
- People will be part of mentally healthy, safe and supportive families, workplaces and communities
- People's quality of life will be improved by timely access to appropriate mental health information, support and services
- People will be actively involved in their mental health and their care
- People with long term mental health conditions will live longer and lead fulfilling, healthy lives

Guiding Assumptions

When working together to develop and implement this strategy, partners in South Tyneside have agreed to:

- ✓ Ensure that services seek the views of local people in the development of new services – following the principles of meaningful co-production
- ✓ Recognise the impact of trauma and adversity on people's mental health
- ✓ Take a person and family-centred, strengths-based approach
- ✓ Have a strong focus on the wider determinants of mental health and illness
- ✓ Adopt a recovery focus wherever possible
- ✓ Ensure that mental health and physical health are treated equally
- ✓ Encourage everyone to challenge stigma and prejudice around mental health and mental illness
- ✓ Make sure that any action is based on the best possible evidence
- ✓ Have a strong focus on addressing the wider focus of mental health including issues of inclusion and diversity

These commitments align with the three agreed principles that guide the way health and social care organisations in South Tyneside work together.

Principles of our approach

We put people first:

We work with people, instead of doing things to them or for them, maximising the assets, strengths and skills of the residents of South Tyneside and our workforce.

We deliver:

We prioritise actions over words to further enhance South Tyneside's track record of delivering positive innovation in local public services. Every action focuses on what difference we will make to improving outcomes and quality and making best use of the South Tyneside pound.

We are team South Tyneside:

We work as one and are committed to delivering high quality mental health services for local people. This includes taking collective responsibility for and never undermining what is agreed.

Difficult issues are put on the table:

With a high support, high challenge attitude to personal and organisational relationships.



How this strategy has been developed

This has been developed with people involved in the South Tyneside Mental Health Alliance and with residents who have experience of the mental health support available. What people said, and their thoughts has informed the structure and content of the strategy.

As part of process to ensure that the voice of residents in South Tyneside helped in developing the priorities and strategies, over 20 local residents were paid to go out and seek the different views of residents. There was also a range of different engagement events, specifically target a breathe of different people. In all total over 400 people assisted in highlighted the priorities and shaping the strategy.

In addition, the five overall priorities of the council, the priorities highlighted within the Integrated Care System and the national directives, have also been woven throughout the strategy.

The Challenges

Within South Tyneside there remains an unacceptable health inequality gap, with 10 years difference in life expectancy between those with the best and worst health.

This inequality is related to both mental and physical health and has a relationship to where people live. The number of people living in poor neighbourhoods and the proportion of children and young people within this, has significant consequences for the future mental health of our borough. This is because we know that what happens in childhood has long term implications for people's mental health.

It is vital that health and social care systems scale-up prevention if the pressure on mental health services is to be reduced.

Members of the group also reviewed all the information that has been gathered about mental health needs in South Tyneside during the last five years.

The priorities that experts by experience and residents have fed back have formed the fundamental basis of this strategy following on-going co-production work. In addition to this, the overarching national drivers and directives have also formed the basis of the strategic direction. This is to ensure that South Tyneside not only become leaders at place-based work, but also becomes a change agent; both regionally and nationally; to demonstrate the importance of reducing the stigma associated with mental health and promoting a strength based approach, based on active participation, where "we as partners from across South Tyneside collectively say, and we as partners from across South Tyneside collectively do.

Recent announcements made as part of the NHS 10-year plan indicates that funding has increased across both adult and children and young people's mental health services, but this comes within a broader context of a predicted significant increase in the need for service as a consequence of the pandemic.

In England, mental health demand modelling predicts that up to 10 million people (almost 20% of the population) will need either new or additional mental health support as a direct consequence of the pandemic, 1.5 million will be children and young people under 18. This results in a projected increase in demand for Mental Health support in the North East and North Cumbria of 2,548 individuals for depression and an additional 706 individuals for Post-Traumatic Stress Syndrome.

Almost two-thirds of people who will need mental health support already have existing mental health needs, including severe mental illness, with the majority of people needing support for depression or anxiety, or both. Others will need help for trauma symptoms and a range of other difficulties, including complicated grief arising from bereavement and loss.

In the North East and North Cumbria this is projected to result in an additional 213,375 individuals accessing support for moderate to severe anxiety and 218,953 individuals accessing support for moderate to severe depression. This figure is based on research on the impact of enforced isolation due to Covid-19 (Fancourt et al., 2020).

Among people who have not experienced mental ill-health prior to the pandemic, demand for services in England is forecast at 1.33 million people for moderate to severe anxiety, and 1.82 million for moderate to severe depression.

In the North East and North Cumbria this is projected to result in an additional 91,414 individuals accessing support for moderate to severe anxiety and 125,063 individuals accessing support for moderate to severe depression. This figure is based on research on the impact of enforced isolation due to Covid-19 (Fancourt et al., 2020).

In line with the emerging evidence base, a surge in demand for mental health care is evident in the North East and North Cumbria with service providers reporting an increase in both activity and acuity.

The number of people admitted to hospital in the two mental health trusts for adults and older adults highlights the demand trajectory. Higher levels of understanding are emerging resulting in an increase in compulsory detentions under the Mental Health Act.

Based on the increased levels of people claiming out of work benefits (116,008 additional people between March and September 2020 in the North East and North Cumbria), the increase projected demand on mental health services is estimated to be 2,378 for major depression however the full economic impact is yet to be felt.

The impact of austerity is putting pressure on some of the poorest communities. In-work poverty has increased as it has elsewhere in England. Financial insecurity has huge implications for people's mental health and has been estimated by the World Health Organisation to be the largest single reason that maintains mental health inequality.

The population of the borough continues to age. This has a range of implications for services not least as a result of a far more ethnically diverse older population, with a greater concentration in some areas of the borough.

The ageing population also provides us with significant challenges in terms of how to support older people, to maintain connections with other people and to access support that meets their needs.

There is a need to ensure that the needs of people with mental health issues arising out of the Covid 19 Pandemic are addressed. This includes the impact of Long Covid and support to residents who are bereaved as a result of the pandemic.

Our Strengths

The good news is we are already doing many things in South Tyneside that contribute towards being a mentally healthy borough.

Mental Health is connected to everything: it's where we live, how we learn, work and play. It's our physical health, the environments we are surrounded by, the relationships we have and importantly, the experiences we go through. It all has an impact on how we think and feel. This means that there are many opportunities for improving mental health. It can also make knowing where to start feel difficult.

South Tyneside is full of compassionate people: committed to an approach that focuses on the strengths of people and communities. Asset Based Community Development is about nurturing communities and connections between people that live in local areas. For everyone in South Tyneside, including those with mental health needs, to have the opportunity to contribute to, be valued by, and be involved with where they live has enormous potential for building resilience and supporting good mental health.

South Tyneside is a pioneering place: The borough has developed and sustained innovative preventative approaches. This includes delivering a comprehensive physical health model for people with a severe mental illness, which has placed us as a leader across the whole of England. With people living with a severe mental illness most likely to have engaged with primary care services than anywhere else in England, being one of the first boroughs to have full coverage of Mental Health Support tools within schools. We also provide many opportunities for people to engage with services such as the Lesbian, Gay, Bi-sexual, Transgender plus offer, primary mental health teams, online mental health counselling services to name but a few.



South Tyneside has a fully formed Alliance, in which all partners are truly committed to bring about change with a shared vision and drive, aimed at bringing about change rather than only talking about it.

South Tyneside is a nice place to be, as the borough has good community assets including open spaces, beautiful beaches, parks, community centres, libraries, leisure centres and many other assets. All of these assets can create a thriving environment contributing to a sense of wellbeing.

Mental health & emotional wellbeing is our priority, with Leaders across the borough making Mental Health an area of priority. South Tyneside spends the most per person per head on children and young people's mental health compared to other areas in England. The borough has an ongoing commitment to work together adopting an "alliancing approach" to improve outcomes for mental health and emotional wellbeing.

Our Approach

The South Tyneside approach to mental health and wellbeing - promoting good mental health, prevent mental health problems and provide helpful information.

Keeping mentally healthy

NHS, Council and Community Services working together to promote good mental health, prevent mental health problems and provide helpful information.

In South Tyneside, governance and oversight in relation to Mental health, is provided by the Children & Young People's Mental Health & Wellbeing Alliance and the Mental Health Strategic Alliance for adults. Both alliances have representatives from the Clinical Commissioning Group, Local Authority, Public Health, Cumbria, Tyne and Wear NHS Trust, Sunderland and South Tyneside Foundation Trust, Third Sector, as well as experts by experience.

Below is a summary of some of the services currently available:

Mental Health Support to improve coping and offer support – including support, advice and treatment in respect to Anxiety, Stress, Depression, Low Mood, Phobias

Services include:

- Healthy Minds Team
- Kooth/Qwell
- Lifecycle
- GP and primary care team
- Mental Health Primary Care Practitioners
- Mental Health Concern
- Recovery College
- Age Concern Tyneside South
- First Contact Clinical
- Humankind

Serious Mental Illness to offer treatment which may include support within a hospital setting – including supported delivery by teams of Psychologists, Psychiatrists, Mental Health Nurses and Occupational Therapists

Services include:

- Mental Health Primary Care Practitioners
- Community Mental Health Team
- Early intervention in psychosis team
- Employment Support Service
- Supported Accommodation
- Mental Health Concern
- Primary Health Care Hub

Mental Health Support during pregnancy and 2 years after birth

Service Include:

- Early Help Service
- Perinatal Mental Health Services
- Specialist Health Visitors & 0-19 service
- Specialist Midwifery Services



“
NHS, Council and Community Services working together to promote good mental health.
 ”

More Complicated Mental Health Problems including severe anxiety, ongoing depression, eating disorders, substance misuse and mental health needs – requiring a multifaceted approach to assist the person to achieve their aspirations and goals

Services include:

- Social workers
- Lifecycle service
- Behavioural support service
- Care Home liaison service
- Delirium service
- Youth Justice Service
- Community Mental Health Team
- Eating disorder community team
- Personality disorder Hub
- Supported Accommodation
- Together in a Crisis service
- Step down accommodation

Mental Health Crisis – for rapid treatment/support

Services include:

- All age crisis team
- Street Triage
- Psychiatric Liaison Team
- Eating Disorder Service

Mental Health In ST

The factors that increase the risk of poor mental health or promote good mental health, are not distributed equally across South Tyneside.

People’s mental health and wellbeing changes from moment to moment and anyone can develop a mental health problem. But the factors that increase the risk of poor mental health or promote good mental health, are not distributed equally across South Tyneside.

This means that certain communities or groups are more likely to have poor mental health

and to face more barriers when accessing support and treatment. Ultimately, this leads to avoidable or unfair outcomes called health inequalities or health inequalities.

The World Health Organisation (WHO) has identified five key factors that contribute to health inequity:

- Health services
- Income security and social

protection

- Employment and working conditions.
- Living conditions: including housing deprivation, unsafe neighbourhoods and lack of green spaces
- Social and human capital: incorporating education, trust and political voice

World Health Organisation (2019) Healthy, prosperous lives for all: the European Health Equity Status Report

Risk and Protective Factors

There are specific factors, that fall under the headings identified by the WHO, that are known to either increase the risk of someone having poor mental health or to protect it. These are important at the time, but they also have significance in the future.

We know that children who live in an environment where their emotional needs are not met are more likely to have mental health problems as an adult. This is because of the way in which early childhood experiences, particularly those that are ‘adverse’, affect brain development and future emotional and social functioning.

Risk Factors

- Adverse experiences such as trauma and abuse
- Debt and financial strain
- Caring responsibilities
- Social isolation
- Long-term health conditions
- Unemployment
- Addiction

Protective Factors

- Physical health and wellbeing
- Self-esteem and satisfaction
- Resilience
- Connection and relationships
- Economic security
- Ability to meet basic needs
- Physical security and safety
- Coping and problem-solving skills

...Continued

A sensitive understanding of how mental ill-health occurs helps to ensure that efforts to prevent it are focused in the best possible way; across the course of people's lives there are also points of change in people's lives, that often have an impact on mental health and wellbeing.

In most cases, these transitions do not lead to mental health problems. However, individuals should be supported to build resilience and coping strategies as well as have the support they required to remain mentally well.

Summary of Mental Health Profile in South Tyneside

The health of people in South Tyneside is generally worse than the England average. South Tyneside is one of the 20% most deprived local authorities in England and about 26.4% (6,770) of children live in low-income families. Life expectancy for both men and women is lower than the England average.

Adult health

The rate for alcohol-related harm hospital admissions is 983*, worse than the average for England. This represents 1,475 admissions per year. The rate for self-harm hospital admissions is 316*, worse than the average for England. This represents 460 admissions per year. Estimated levels of excess weight in adults (aged 18+), smoking prevalence in adults (aged 18+) and physically active adults (aged 19+) are worse than the England average.

The rates of violent crime (hospital admissions for violence), under 75 mortality rate from cardiovascular diseases, under 75 mortality rate from cancer and employment (aged 16-64) are worse than the England average.

Health inequalities

Life expectancy is 9.3 years lower for men and 8.1 years lower for women in the most deprived areas of South Tyneside than in the least deprived areas.

Child health

In Year 6, 25.3% (406) of children are classified as obese, worse than the average for England.

The rate for alcohol-specific hospital admissions among those under 18 is 107, worse than the average for England. Levels of GCSE attainment (average attainment 8 score), breastfeeding and smoking in pregnancy are worse than the England average.

Parity of Esteem for people accessing support around their mental health

South Tyneside has laid the foundations to become a Mentally Healthy borough for everyone.

The five outcomes that make up the vision reflect different areas of work that have already begun. Bringing them together provides South Tyneside with a unique opportunity to maximise the work that is happening but to also make important connections outside of mental health.

It will take determination from strategic partners, businesses and communities in order to achieve the vision.

Reducing stigma, developing trust within and between communities, improving services, and working across organisational boundaries to meet people's physical and mental health needs, is dependent upon changing how we think and feel about mental health and relies upon organisations and systems working together in new ways.

South Tyneside has the building blocks, the assets and the commitment in place to enable the vision will become a reality.



What will it feel like to live in South Tyneside in 5 years' time?

Where people flourish within diverse families and communities of all shapes, sizes, geographic and non-geographic groupings.

The relationships and resources in communities, alongside our thriving Third Sector, commerce, and public spaces are building blocks for a good quality of life.

We use cultural activity to both celebrate and reaffirm who we are, helping us strive for inclusion and challenge that which seeks to divide us. We seek greater social equality and mobility and stand against inequity, inequality and injustice so that everyone can benefit from what our Borough has to offer.

The places we live, work and play in are safe, improve our wellbeing and keep us mentally and physically healthier for longer.

Partners listen to and understand people's experiences, meaning we create spaces for people to feel safe, supported and comfortable to talk about feelings of stress, worry or upset. We do whatever we can to care for ourselves and do the best for one another.

People's mental and physical health are equally understood and equally valued. In times of need, we find information that helps us explore what we might be feeling, give it a name and quickly get to the best care possible.

We have control over the care we receive and are equal partners with health and care professionals. If we have a long-term mental health disorder, we can access the services we want, and our physical health doesn't suffer as a result of mental ill health.

We have diverse and responsive mental health services but one shared, compassionate culture. Mental health services we access feel joined up and they all take a 'Think Family' approach that supports mental health and wellbeing within the context of family relationships. This helps tackle poor outcomes for families now and breaks the cycle of poor mental health for future generations.



What needs to improve?

Service reviews need assessments and engagement projects carried out in South Tyneside in recent years show that, despite excellent work, more needs to be done around three big areas: mental health inequalities, children and young people's mental health and how services are delivered.

Addressing these challenges brings an opportunity to get support, closer to where people live with GP practices becoming a central hub of support, promoting a "one stop shop", rather than referring people on and into other organisations as a gateway into secondary care.

Developing priority actions

There are already established programmes of work that aim to transform the present offer and it is not envisaged that these will stop as South Tyneside continues to strive for better mental health for everyone. This includes looking to strengthen the early help and preventive offer, and it is therefore envisaged that partners from within the Mental Health Alliance and the residents of South Tyneside, will be activity partners within this work.

However, to bring about lasting change, partners, including the residents of South Tyneside, need to focus attention on the areas that will have the greatest impact.

The people of South Tyneside, including people who present with significant mental health needs, carers, families, communities, clinicians and commissioners have been asked what these areas should be. This feedback has been combined with existing knowledge to develop eight priorities which address a problem, reduce an enduring and unacceptable inequality or meet a current unmet need.

These three areas provide us with a clear framework for driving forward positive change over the coming five years.

Three areas for improvement

1. Reduce mental health inequalities
2. Improve children and young people's mental health
3. Improve flexibility, integration and compassionate response of services

Reduce mental health inequalities

There are clear mental health inequalities in South Tyneside, both in terms of who experiences the greatest risk of poor mental health and in terms of unequal access to treatment. These inequalities are complicated. However, through looking at data and through engagement with people, three distinct priorities for the next five years have emerged.

People living in poorer parts of South Tyneside are more likely to experience anxiety and depression but are least likely to

complete treatment for these types of conditions. Rates of both suicide and self-harm admission (being cared for in hospital) are also higher in poorer areas. Whilst they affect people of all ages and all genders, highest rates of suicide are found in middle aged men. Girls and young women have the highest rates of being admitted into hospital because of self-harm.

Secondly, minority communities, including Black, Asian and minority ethnic communities (BAME), as well as our

LGBT residents, report that discrimination increases people's risk of poor mental health but that mental health services do not always meet their needs.

Finally, employment is a protective factor for good mental health but people with ongoing mental health problems often struggle to find and then maintain work that supports their wellbeing. This then puts people at risk of financial problems, perhaps worsening their mental health further.

Improve children and young people's mental health

The Mental Health Transformation plan co-ordinates work to promote emotional wellbeing, and to prevent and treat mental health problems in children and young people. This strategy provides opportunities to further the aims of Future in Mind.

People working with children in South Tyneside report that 'Think Family' does not always translate into 'Work Family' and that adult and children's services could be better integrated.

Supporting the mental health of parents and carers and taking a 'whole family' approach to mental health, is seen by practitioners as a vital area to focus on.

This is because infants and children who do not receive consistent emotional help with managing their feelings are more

likely to struggle in later life.

There is also a need to recognise that good physical health supports good mental health.

Those that experience neglect or abuse (often called adverse childhood experiences) are significantly more at risk of mental health problems, because of a combination of factors including traumatic early life experiences.

For those young people needing ongoing mental health treatment, practitioners continue to find that the transition between children and young people's mental health services and adult mental health services remains a significant challenge.



Improve flexibility, integration and compassionate response of services

When people seek help for a mental health problem, they want to access support quickly – not be kept on a waiting list.

People report that they feel 'bounced around', unable to find the service that meets their need.

Major pressures in the system include long waiting lists for Community Mental Health Support, and a lack of appropriate housing and supported living services. This latter issue has a 'knock on' effect in that it prevents people being discharged from mental health wards, which means new people being admitted may need to be treated in settings outside South Tyneside. These 'delayed transfers of care' affect people with the most serious and enduring mental health problems.

As part of a programme of work addressing 'trauma-informed' practice, people have told services and commissioners that they want to be asked about what has happened to them and they want to be supported to access compassionate support that meet their needs.

Specific feedback about services, collected as part of developing the strategy, includes:

- Mental health services need to be able to meet the needs of everyone, whilst providing responsive, personalised care to whoever 'walks through the door'. This is a significant challenge.
- 'Marginalised groups', continue to experience significant barriers to accessing mental health treatment.
- Older people are at risk of not having their mental ill health recognised or supported by mental health services. In South Tyneside, older people do not access Improving Access to Psychological Therapies services to the same level as working age adults and their mental health is often overshadowed by physical ill health or conditions such as dementia.
- People who have physical disabilities, are deaf and/or have a long-term condition are at an increased risk of poor mental health but report experiencing barriers in accessing mental health treatment. Conversely, people with Serious Mental Illnesses experience significant challenges in achieving good physical ill health.
- People who have mental health problems alongside other conditions like Learning Disabilities, Autism report that their voice is not heard and that service fail to listen to them, with examples of people reporting that they were ignored by practitioners from across service, with decision about their life being made for them, rather than by them.
- Finally, mechanisms need to be put in place to enable cross-system learning. This is particularly important when services do not meet people's needs in a timely or responsive manner – especially in the case of crisis.



Notes

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