Ealing Mental Health and Wellbeing Strategy for Adults 2017 - 2022, Plan on a Page

NHS England 5 Year Forward View for Mental Health 2015-2020 Thrive London: Improving Londoners' Mental Health and Wellbeing

North West London Sustainability & Transformation Plan North West London Like Minded: Model of Care for SLTMH & CMHN West London Mental Health Transformation Programme Future Ealing

Outcome 1 Prevention and Wellbeing for

the whole population: reducing stigma and social isolation; identifying mental health needs earlier; addressing the links between physical and mental health Outcome 2
Better outcomes and support for people with common mental health

needs: including those with long term physical health conditions; better access to primary care Outcome 3
New model of care for people
with serious and long term
mental health needs: including
crisis response; community based
support; primary care; early
intervention; carer support.

Outcome 4
Working better together: health, social care, housing, police and communities; adults and children; substance misuse, alcohol and mental health; learning disabilities and mental

health; criminal justice

Outcome 5
Reaching all our
communities: geographical;

age; BAME; LGBT; class.
Equality of access and
treatment; reducing suicide;
reducing restraint; carers

Overarching Principles

We will work together to *improve mental health and wellbeing* and reduce the burden of mental ill health in Ealing.

We will work to *improve people's lives* and to encourage healthy communities in mind and body.

We will work to ensure that mental health is given *Parity of Esteem* with physical health, recognising that there "*no health without mental health*" We will simplify the pathways for people with serious and long term mental health needs, developing a *community based model* which also provides appropriate *support in time of crisis*.

We will work in partnership with carers, recognising the *Triangle of Care*.

We will rebalance resources from inpatient facilities and out of area placements to local, community based support.

1.1. Tackle Stigma: **Mental Health Awareness**

programme with: employers; schools/ colleges; faith communities; BAME groups; LBGT groups

1.2. **Mental Health First Aid** Training Programme to reach: community groups:

reach: community groups; staff; pharmacies; transport staff

- 1.3 Provide people with safe and stable places to live; social finance advice and support; tackling homelessness
- 1.4. Tackle **loneliness and social isolation**; build community resilience.

- 2.1 Increase access to talking therapies, including IAPT for all, including: older people; people with long term conditions; young people; parents; carers, BAME. Extend range of offer and reduce waiting times.
- 2.2 Ensure talking therapies part of clinical pathways for long term conditions; work with GPs, pharmacists; secondary care clinicians.
- 2.3 Support people with common mental health problems at work: increase understanding of employers; encourage occupational health referral to talking therapies.
- 2.4 Implement **Trailblazer** Individual Placement Support (IPS) for CMI and extend if successful.

- 3.1 Embed mental health in primary care: extending the **Primary Mental Health Care Teams**; ensure all GPs signed up to **Out of Hospital Care**; increasing multidisciplinary approach, including social work and advice.
- 3.2 Extend specialist mental health teams to support people in community settings: Early Intervention Team; Recovery Teams; Crisis Assessment and Treatment Teams (CATTs); Rehabilitation; Forensic; and access to Psychology/ Psychotherapy and social work; support to access to employment
- 3.3 Ensure effective and timely **Crisis Response**: from SPA, CATT, LPS, AMHPs, Emergency Duty Team; reducing S136 assessments; meet Crisis Concordat targets; carer support
- 3.4 Evaluate and re-commission **Recovery/Crisis House** and/or

- 4.1 Expand the range of **supported housing** available to accommodate people with SLTMH in the community, working with Housing Providers and the specialist clinical teams (3.2); and increase capacity to ensure step down and **reduce out of area placements**
- 4.2 Strengthen multi-agency working across NHS, Council, Police to improve response to those with mental health problems (or LD, Autism, Substance Misuse) identified through the **criminal justice system**; work with NHSE to extend **forensic services** and link to local services
- 4.3 Strengthen transition between **CAMHS and Adults Mental Health**, particularly: Early Intervention in Psychosis; Eating Disorders; young people with learning disabilities, autism or ADHD and a mental health problem.

- 5.1 .Sustain and expand community support services, such as peer support, advice, training, ensuring they are accessible to all communities.
- 5.2 Strengthen the involvement of people with lived experience of mental ill health in strategic and operational planning and monitoring of services and outcomes
- 5.2 Strengthen the involvement of **carers** of people with mental health problems in strategic and operational planning and monitoring of services and
- 5.4 Proactively monitor access, admissions, length of stay, experience, suicide, restraint etc. by age, gender, ethnicity, LGBT and address inequalities