



West Essex Clinical Commissioning Group

North East Essex  
Clinical Commissioning Group

Mid Essex Clinical Commissioning Group



Essex County Council

## NORTH ESSEX MENTAL HEALTH JOINT COMMISSIONING STRATEGY (2013-2016)

### STATEMENT OF AMBITION

#### Background and Introduction

A north Essex mental health joint commissioning strategy is being developed that will set out the vision and approach to mental health commissioning up to 2016 and ensure that commissioning achieves the best possible quality care and outcomes and that services are accessible and aligned to physical health needs. In February 2009 the Department of Health (DH) published a National Dementia Strategy<sup>1</sup>. In addition to this they produced a complimentary strategy in February 2011, *No Health Without Mental Health: A Cross-Government Mental Health Outcomes Strategy for People of All Ages*. It is these strategies that influence the north Essex strategy. Commissioning intentions and procedures will be transparent through the involvement of local people in shaping services.

Clinical Commissioning Groups (CCGs) and Essex County Council (ECC) are responsible for planning, designing and purchasing local health and well-being services on behalf of the north Essex population with a combined budget of circa£248m. North Essex has three CCGs – Mid Essex, North East Essex and West Essex. CCGs are GP-led, this means that doctors and clinicians are at the forefront of the organisation and work with highly experienced NHS managers to design and buy health and well-being services on their patients' behalf.

CCGs and ECC work with a number of organisations (e.g. local hospitals, city, borough and district councils, independent providers and community and voluntary organisations) to ensure services meet local needs. There is commitment to working in partnership to develop the best pathways of care.

The outcomes that the joint strategy aims to achieve are that:

- People will have good mental health
- People with mental health problems will recover
- People with mental health problems will have good physical health and people with physical health problems will have good mental health
- People with mental health problems will have the best possible quality of life

North Essex CCGs and ECC have an ambition to improve their mental health services and the experiences for local people and their carers who access these services (see Table 1.) To achieve this health and social care resources need to be used effectively and efficiently to provide services for adults across all ages, inclusive of older adults (65 years and over). This will take account of appropriate and effective transition from children and young people's services, ensuring the ambitions of the Drug and Alcohol Action Team (DAAT) are also included. Therefore, there will be no age based or organisational barriers to meeting people's needs and the following strategic objectives will be delivered:

- To encourage people to maintain healthy lifestyles and keep themselves mentally well. This includes offering therapies to people at times in their lives when they feel particularly anxious and at an early stage, to prevent their mental health from deteriorating into more serious problems.
- To equip GPs and other community health and social care providers to be more effective in treating people's mental health needs alongside their physical health.

<sup>1</sup> Living well with dementia: A National Dementia Strategy - Putting People First. DH February 2009



- Specialist services to continue to be available for people who have severe mental health conditions. Wherever possible, short term intensive support to be provided to help people to get better and develop skills that enable their recovery.
- People should be free from dependency on health and social care services and appropriate housing; employment and healthy relationships play an important role in this. The strategy will focus on those things that support people to maintain and strengthen these aspects of their lives.
- People experiencing a mental health crisis will get help quickly, from a range of services. Full use will be made of available technology and social media to keep in touch with people at times when they need additional reassurance but do not want or need more intensive health intervention.
- To enable people to make choices, take control and be supported by their peers.

**Table 1: Ambition of services**

Commissioning priority	Quality outcomes
<ul style="list-style-type: none"> <li>• <b>Memory Services and Dementia:</b> Support to dementia and memory services.</li> <li>• <b>Physical Health Checks</b> Service users to have physical health checks to ensure that physical health needs do not impact on their mental health.</li> <li>• <b>Primary Care</b> More people will access services in primary care.</li> <li>• <b>Recovery approach</b> People given the right support at the right time in the right place.</li> <li>• <b>Patient experience</b> Promote positive experience and service user involvement.</li> </ul>	<ul style="list-style-type: none"> <li>• 70% of referrals to memory clinics are given a diagnosis by 2015.</li> <li>• Increased access to memory assessment services for dementia. <i>Local targets to be agreed</i></li> <li>• 100% of people accessing mental health services will have a physical health check.</li> <li>• Reduced inequality in mortality rates especially where there is co-morbidity. <i>Local targets to be agreed</i></li> <li>• Each IAPT service to see 15% of local prevalence of common mental health disorders by the end of 2014/15. A measured improvement in people's health and wellbeing. <i>Local targets to be agreed</i></li> <li>• 80% of social care eligible individuals to have a personal budget each year.</li> <li>• A 10% reduction of people living in residential care.</li> <li>• 35% of working age adults using mental health services will be gainfully employed by 2016.</li> <li>• Services developed to reflect the overarching outcomes of the strategy.</li> </ul>

## Governance

The development of the North Essex Mental Health Joint Commissioning Strategy is overseen by the “North Essex Mental Health Advisory Group.” It is being developed by a multi-agency working group which includes representatives from the three CCGs, Essex County Council, North Essex Commissioning Support Unit, Public Health, and representatives from children’s services. Work streams include service user engagement, Healthwatch, provider engagement, an editorial group and updating the needs assessment.

- The three CCGs and ECC remain the statutory bodies, who are accountable throughout the production of the strategy and they will be individually responsible for agreeing and signing off the final document.

## Demography and local context

The north Essex area is covered by city, district and borough councils, three clinical commissioning groups (containing some 133 GP practices between them) and Essex County Council. The population of north Essex is 978,700<sup>2</sup>. However there are 997,000<sup>3</sup> patients registered with a north Essex GP practice. Mid Essex has the largest population of 371,000, with 382,000 registered patients, followed by north east Essex who have a population of 325,000 and 326,000 patients and west Essex who have a population of 282,700 and 289,000 patients.

It is predicted that there will be a 4.5% increase across north Essex for adults aged 18-64 with a mental health disorder, rising from the current figure of 102,615 to 107,229 by 2020.

**Table 2: Adults predicted to have Common Mental Disorders (CMD) and Psychosis between 2012-2020 (aged 18-64)<sup>4</sup>**

Mental Health Disorder	Mid Essex		NE Essex		West Essex	
	2012	2020	2012	2020	2012	2020
People predicted to have a common mental disorder	37,181	37,664	30,054	32,207	28,285	29,934
People predicted to have an antisocial personality disorder	801	817	643	694	694	639
People predicted to have psychotic disorder	925	936	747	801	702	744
Total predicted to have mental health disorder	38,907	39,417	31,444	33,702	29,681	31,317

Dementia is still seen as the greatest rise across north Essex over the same time period for older adults (aged 65 and over). It is predicted that there will be a 27.9% increase, rising from 13,365 to 17,092 and a further 10% of this age group are estimated to have depression with this increasing to 16%<sup>5</sup>.

**Table 3: Estimates of dementia in Older People (aged 65 and over) between 2012-2020<sup>6</sup>**

Dementia Estimates	Mid Essex		NE Essex		West Essex	
	2012	2020	2012	2020	2012	2020
People aged 65-69 predicted to have dementia	283	272	261	247	194	189
People aged 70-74 predicted to have dementia	419	634	416	608	297	418
People aged 75-79 predicted to have dementia	735	946	737	929	558	650
People aged 80-84 predicted to have dementia	1,150	1,405	1,163	1,369	912	969
People aged 85-89 predicted to have dementia	1,166	1,528	1,250	1,473	927	1,139
People aged 90 and over predicted to have dementia	1,046	1,488	1,078	1,725	776	1,103
Total aged 65 and over predicted to have dementia	4,799	6,273	4,902	6,351	3,664	4,468

<sup>2</sup> ONS, population estimates: [www.statistics.gov.uk/popest](http://www.statistics.gov.uk/popest)

<sup>3</sup> Q3 2012-13 GP registered population, taken from ESSA IM& T Information Services

<sup>4</sup> PANSI – Adult Psychiatric Morbidity Survey, 2007

<sup>5</sup> [www.mentalhealth.org.uk](http://www.mentalhealth.org.uk)

<sup>6</sup> PANSI – Adult Psychiatric Morbidity Survey, 2007



Figures about the number of people under 65 who have dementia vary widely. Alzheimer's Society suggests there are more than 17,000 younger people with dementia in the UK. They also suggest that this number is likely to be an under-estimate, and the true figure may be up to three times higher<sup>7</sup>. Data on the number of people with young-onset dementia are based on referrals to services, but not all those with young-onset dementia seek help in an early stage of the disease.

### **Financial context**

The strategy will set out the challenges faced within the current economic climate and the need to transform services – This is needed to control overall spend and meet the growth in demand whilst striving to deliver quality outcomes.

The combined health and local authority budgets for mental health services across north Essex for 2013/14 are as follows:

- Health - c£88.928m.
- ECC working age adults (aged 18-64) - c£16m.
- ECC older adults (aged 65 and over) - £143.1m. Older adults covers all of Essex and supports people in their own home and those who live in care homes. .

### **Stakeholder engagement**

An engagement event was held with people who use services to get their perspective and understand how current services could be improved. The desire for recovery focused services was common amongst the group with an emphasis on peer support to enable individuals to take control and manage their own condition, remaining as independent as possible. To achieve this, individuals felt greater communication and awareness of support available was vital.

A programme of engagement events has been developed to take place over the coming months across each locality to hear as many views as possible. These events will provide an opportunity to gain feedback on the strategic objectives and how they can be implemented locally. These events will include people who use services and their carers, practitioners and CCG stakeholders, GP and practice groups, providers, community and voluntary organisations and pressure groups.

The three north Essex CCGs and ECC will work together on detailed local plans taking into account the pressures on public sector funding and the fact that the population of people who need support with their mental health is growing.

**For further information, to provide feedback or to become involved in the engagement process please contact:**

[ECSU.JointStrategies@nhs.net](mailto:ECSU.JointStrategies@nhs.net)

This document can be made available in alternative formats and can be translated into other languages other than English.

**29th May 2013**

<sup>7</sup> Alzheimer's Society Fact sheet 440 - [www.alzheimers.org.uk](http://www.alzheimers.org.uk)