Mental Health and Community Safety

Purpose of report

For discussion.

Summary

This paper updates the Board on current issues related to mental health, how this links to community safety issues, and seeks direction on any future work in this area.

Recommendation

Members of the Safer & Stronger Communities Board provide direction on how this area of work should be taken forward.

Action

Officers to take forward in line with the Board Members views.

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Mental Health and Community Safety

Background

1. Within the LGA, responsibility for adult mental health policy rests with the Community Wellbeing Board (CWB), and for children, with the Children and Young People’s Board (CYPB).
2. The SSCB work plan for 2018-9 included a proposal to explore a cross cutting piece of work looking at the links between mental health issues and community safety work. This was in recognition of the fact that mental health problems frequently intersect with a wide range of issues within the remit of the Safer and Stronger Communities Board. Mental health issues have previously been recognised by [councils](http://www.hampshiresab.org.uk/wp-content/uploads/Mental-Health-and-Anti-Social-Behaviour-London-Councils-2014.pdf) as a major driver of anti-social behaviour, while the Centre for Mental Health quotes estimates that as many as 90% of the prison population have some form of mental health problem, personality disorder or substance misuse problem.
3. We are also aware that the Fire Services Management Committee (FSMC) has identified an interest in this area, given the correlation between individuals experiencing mental health issues (for example hoarders) and fire safety.
4. Due to the volume of other areas of work and requirements for other Board papers, it has not been possible for the team to develop this area of work in 2018-9. This paper provides a summary of current issues within the mental health landscape and a new area of cross-LGA activity on mental health, and seeks direction from the Board on whether this is an area that they would like to explore further in 2019-20.

Issues

*Children and young people’s mental health and wellbeing – current issues*

1. Members and councils have been expressing concern over the increasing number of children and young people with mental health issues, the difficulty of accessing Children and Adolescent Mental Health Services (CAMHS) and the lack of national understanding of the key role councils play in children and young people’s mental health (CAMHS supports young people up to the age of 25). This includes councils’ role in supporting:
   1. The 40 per cent of children and young people turned away from CAMHS.
   2. The 35 per cent of children who have to wait so long to be seen by CAMHS that their mental health deteriorates further (with some having to wait over a year to be seen).
   3. The children and young people with multiple and complex needs, who may well have a mental health disorder alongside physical impairment, a learning disability, autism, etc.
   4. The children and young people who may be in care or the youth justice system, where councils have additional support and care responsibilities.
2. The LGA has been active in the past year on CAMHS through engagement in consultations, parliamentary debates, holding events such as one on transition between children and adult mental health services, influencing work on the NHS England Long Term Plan (LTP) and 5 year forward view, its Bright Futures campaign, the publication of guidance on leadership in CAMHS and its bespoke peer review programme. However, this has often been reacting to proposals from Government or NHS England.
3. Members of the CWB and CYP Boards have agreed to a new piece of work to develop a local-government led perspective on how the system, priorities and funding around children and young people’s mental health and emotional wellbeing could be improved to better support our children and young people. As directed by these Boards, the LGA has just commissioned a piece of work to begin to unpack the issues, blockages, opportunities and good practice at a local level to develop these local and national proposals.
4. A key element of this work going forwards is to set up an LGA cross-board steering group to gain insight into the issues, test the proposals and steer the LGA’s recommendations, in time for a launch at the National Children and Adult Services Conference in November this year. Given that issues related to Safer and Stronger Communities, particularly around knife crime, gangs, county lines, domestic abuse, etc, should have equal consideration alongside issues related to public health, health services and children’s services, the SSCB has been invited to nominate two representatives to make up a steering group of six members overseeing this work.

*Adults’ mental health - current issues*

1. The CWB has agreed the following headline policy messages on adult mental health:
   1. There needs to be a re-focus in mental health services away from medicalisation and treating mental ill health to early intervention and support for recovery through integrated community based services.
   2. There needs to be a move away from a focus on risk, detention and medication, to build on a person’s strengths, the provision of personalised support and the services that enable a person experiencing mental health issues to live a healthy and fulfilling life.
   3. The need to recognise and build upon the benefits of the connectivity between the NHS, local government and other partners in mental health prevention and recovery, such as integrated NHS/local government community mental health teams.
   4. Councils have a range of statutory duties directly related to mental health, statutory duties that support mental wellness, non-statutory duties they undertake on mental health, and non-statutory duties that have an impact on mental wellness.
   5. In recognition of that significant role, councils need to have sufficient public health, social care and general funding.
2. The following CWB led work on adult mental health may be of interest in relation to the SSCB’s areas of work.

*NHS Long Term Plan*

1. The NHS published its 10 year plan in January 2019. The LGA welcomed many aspects of the plan, but it is a plan for the NHS, rather than a comprehensive plan for the health and care system. Investment in mental health services will increase faster than the NHS budget overall for each of the next five years to fund integrated primary and community mental health care. Of particular relevance to the SSCB are measures to increase access to community-based mental health crisis care services, specific waiting time targets for emergency mental health services from 2020, as well as mental health transport vehicles, mental health nurses in ambulance control rooms, improvements in the mental health competency of ambulance staff, and mental health liaison services in all acute hospital A&E departments. **CWB have committed to ensuring that SSCB policy messages on prevention are woven into our follow-up work on the mental health strand of the NHS LTP.**

*Crisis care*

1. Cllr Robin Moss from the Community Wellbeing Board represents the LGA on the Ministerial Mental Health Crisis Care Concordat Steering Group. The Steering Group is likely to have a higher profile as a result of the NHS Long Term Plan focus on crisis care. The Crisis Care Concordat is a national agreement that sets out how organisations will work together better to make sure that people get the help they need when they are having a mental health crisis. The LGA is one of 27 national signatories and local areas have also developed their own crisis care partnerships. The Police, Ambulance Service, Fire Service and Probation Service are key partners on the Steering Group which discusses issues including Places of Safety, supporting people who experience a mental health crisis to access the right support in a timely way and sharing good practice examples of multi-agency working. **CWB will keep the SSCB updated on good practice case studies and continue to seek input on relevant agenda items.**

*Suicide prevention*

1. The Government has set a national ambition to reduce suicides by at least 10% by 2020. 4,451 people in England took their own life in 2017, which means around 13 people end their life every day. After a number of years when the suicide rate fell, the most recent figures showed an increase across all age groups, particularly young people. A degree of caution is needed, because this is based upon one year’s provisional statistics, and there were changes to how suicides are recorded that may have impacted upon the numbers. An LGA and Association of Directors of Public Health survey was completed by 150 out of 152 councils with public health responsibilities. A national report will shortly be published, including a chapter on reducing the suicide risk of people who are in contact with the justice system. The report captures actions including safer cells, staff training, listening and peer counselling schemes, whole-pathway support and integration of services, information sharing and therapeutic interventions for young offenders.
2. Suicide linked to problem gambling is an issue that has received attention in recent months, following the launch of the charity Gambling with Lives, which represents families of people who have taken their own lives as a result of gambling addiction. Suicide prevention work linked to this issue is likely to remain of interest at national political level.
3. **CWB will share the national suicide prevention report with the SSCB and highlight findings that are relevant to the Board’s priorities.**

*Review of the Mental Health Act*

1. In December 2018, the Government published the final report of [the Independent Review of the Mental Health Act 1983.](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/763547/Modernising_the_Mental_Health_Act___increasing_choice__reducing_compulsion___summary_version.pdf) One of the reasons for the review was the disproportionate number of people from black and minority ethnic groups detained under the Act. The report recommended that a Mental Health Act, with compulsive powers is retained, alongside a shift towards a more rights based approach, improving respect and dignity, and ensuring greater attention is paid to a person’s freely expressed wishes and preferences. Furthermore, that all reasonable support will be available to enable people to take their own decisions where that can be done. The Government has said it will introduce a new Mental Health Bill to transform mental health care. There is currently no confirmed timeframe for this, however some of the review’s 154 recommendations are being taken forward through the NHS LTP. **The CWB will link with the SSCB to seek to influence any new legislation to ensure that it fully reflects local government’s role and that any new responsibilities are fully funded.**

*Supported Housing*

1. The Community Wellbeing Board is leading the LGA’s response to the Government’s supported housing reforms. Supported housing enables people with a range of needs to live independently in the community. The CWB already works closely with the SSCB in relation to women’s refuges, which are a form of supported housing. The Government’s recent announcement that a legal duty will be placed on councils to deliver accommodation-based support means that women’s refuges will now be dealt with separately to the wider supported housing reforms. Supported housing also includes hostel provision and long-term provision for people with the most complex mental health needs. In October 2018 the Government announced that supported housing would continue to be fully funded through Housing Benefit. Supported housing costs must continue to be fully funded by the benefits system, even after any future transition to Universal Credit. **Officers will continue to link with the CWB team as relevant on the future funding model for women’s refuges, so that CWB can reinforce key points in our wider work on supported housing.**

*Armed Forces Covenant*

1. Every council has signed the Armed Forces Covenant which ensures that those who are serving in the Armed Forces, or who have served, and their families, are treated fairly and do not suffer disadvantage as a result of their service. Although the majority of people leaving the Armed Forces smoothly transition to civilian life, some veterans experience challenges that require additional support, such as mental health, housing, jobs, relationships and money. This can mean a small number of veterans come into contact with the criminal justice system, both as committers of crime and victims. The CWB is working with the MoD to ensure that councils are fully involved in early planning for service leavers, especially those with complex multiple needs, so that the right and timely support can be put in place. A particular challenge is service personnel who are discharged from service, because there is very little notice for local partners, and these people can be in very vulnerable circumstances. **We will continue to link with the SSCB to ensure our work with the MoD to support veterans reflects the role of community safety partners.**

*Board’s views*

1. The Board are invited to provide direction on any appropriate next steps in this area.
2. As set out above, the SSCB will be represented on the LGA cross-board steering group on children and young people’s mental health and emotional wellbeing, while the CWB team have committed to maintain links with SSCB on key issues including crisis care, supported housing/refuges, review of the Mental Health Act and NHS long term plan.
3. However, should the Board wish to explore this issue in more detail, there may be scope in the 2019-20 work plan to develop a more detailed piece of SSCB led work which helps to contribute to these CWB/CYP led areas of work by identifying specific areas of mental health policy that are particularly relevant to community safety issues and collecting evidence on these. This could include:
   1. Making a broad assessment of the prevalence of mental health issues as a factor in community safety challenges (including fire safety).
   2. Providing a platform for engaging with stakeholders with an interest in this area, including the police and third sector.
   3. Identifying case studies of good practice and/or challenges in this area.
4. The Board’s views on this on how they wish to proceed would be welcomed.

Implications for Wales

1. Subject to the Board’s views on taking this forward, officers will explore any Welsh specific implications with the WLGA.

Financial Implications

1. None – any future work will be taken forward within existing budgets.

Next steps

1. Officers to take forward as directed.