

**To: Renfrewshire Integration Joint Board**

**On: 24 June 2022**

**Report by: Interim Head of Mental Health, Alcohol & Drug Recovery and Learning Disability Services**

**Heading: NHSGGC Mental Health Strategy: Renfrewshire Implementation Update**

Direction Required to Health Board, Council or Both	Direction to:	
	1. No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde and Renfrewshire Council	

## 1. Summary

- 1.1 Renfrewshire IJB was updated on the NHS Greater Glasgow & Clyde (NHSGGC) Adult Mental Health Strategy 2018-23 at the January 2022 IJB meeting, specifically in relation to the progress of recruitment to key posts from Action 15 related funding. An updated position is reported to members in this paper.
- 1.2 The strategy spans across both Adult Mental Health Inpatient and Community Services to ensure services are modern, patient focused, effective and efficient. The strategy takes a whole system approach, linking the planning of services across NHSGGC, incorporating the planning priorities of the six HSCPs, and is aligned with delivery of the Scottish Government's Mental Health Strategy 2017–27. The strategy has a range of workstreams that report to a Programme Board led by Glasgow HSCP on behalf of the six HSCPs.
- 1.3 The GGC wide Programme Board is currently preparing to review all activity against the objectives set within the 2018-23 Strategy and will refresh and rewrite the Strategy within a new timeline of 2022-27. Full details of the evaluation and refreshed Strategy will be reported, when available, to a future IJB meeting.
- 1.4 As part of the Scottish Governments 'Recovery and Renewal' programme, additional funding investment is being provided to develop Mental Health and Wellbeing in Primary Care Services. Significant funding over a 3–4-year period will support a programme of work to ensure a coordinated and responsive approach between Adult Mental Health and Primary Care Services to support the needs of all

Renfrewshire adults who require support for their mental health and wellbeing. Planning is underway and is outlined within this paper.

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## **2. Recommendations**

It is recommended that the IJB:

- Note the work that has been progressed; and
  - Receive an update, when available, on the funding allocations and evaluation of the activity within 2018-23 Strategy and the refreshed Strategy to 2027.
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## **3. Background**

The National Mental Health Strategy 2017-2027 sets out a range of 40 actions as commitments across four broad themes:

- Prevention and early intervention.
- Access to treatment and joined up services.
- The physical well-being of people with mental health problems.
- Rights, information use, and planning.

3.1 Action 15 of the strategy is specifically related to improving access to treatment and the development of accessible, joined up services by *'Increasing the workforce to give access to dedicated mental health professionals to all A&Es, all GP practices, every police station custody suite, and to our prisons. Over the next 5 years increasing additional investment to £35 million for 800 additional mental health workers in those key settings'*

3.4 The Recovery and Renewal Fund supports the delivery of actions set out in the Mental Health Transition and Recovery Plan to respond to the mental health need arising from the pandemic and will also benefit the full agenda for mental health and wellbeing in line with the four areas of key need set out in the Plan. This allocation supports the delivery of Action 16.11 of the plan to *'work with Primary Care partners to improve capacity for mental health assessment, care and support within Primary and Community Care settings. This will build on examples of good practice already implemented through the Primary Care Improvement Plan, and through the work on Action 15 of the Mental Health Strategy. This will include the interface with specialist services to ensure that people receive the right care in the right place, ensuring that there is a clear pathway to mental health services for those who need them.'*

## **4. Action 15 Update**

4.1 As detailed in previous report to IJB members, funding to support the delivery of this commitment was provided to each Integration Authority.

Across the GGC area the share of national workforce target was 179 additional mental health workers to be achieved in 4 years between 2018-2022. Within this, Renfrewshire's target was 27.2. A key principle underpinning the implementation plans for Action 15 across the GGC area was that to support the delivery of the wider GGC Mental Health Strategy, equitable contributions from HSCPs to Pan GGC investments would be based on NRAC shares.

#### 4.2 Financial allocations for Renfrewshire

<b>Allocation by HSCP</b>	<b>HSCP NRAC Share %</b>	<b>NRAC Share £'s</b>
2018 – 2019 share of 11 million total	3.40%	£373,503
2019 – 2020 share of 17 million total	3.40%	£577,233
2020 – 2021 share of 24 million total	3.40%	£814,917
2021 – 2022 share of 32 million total	3.40%	£1,086,555
Additional Renfrewshire only funding – Dec 2021	£544,416	

- 4.1 Due to Renfrewshire's positive performance with main funding allocation, additional funding was confirmed in December 2021 with all relevant posts to be recruited to before end April 2022. This target was achieved with an additional 12 posts added to the Mental Health staffing establishment in addition to meeting the original target of recruiting to 27.2 posts.
- 4.2 The Scottish Government has now confirmed that Action 15 funding will form part of Renfrewshire's recurring budget allocation and reporting on Action 15 spend will now cease.
- 4.3 As part of the GGC wide Adult Mental Health Programme Boards refresh and rewrite of the 2018-23 Strategy, Board wide collaborative tests of change and investments under Action 15 will be evaluated

### 5. **Mental Health and Well Being in Primary Care Services**

- 5.1 The Scottish Government's Short Life Working Group on Mental Health in Primary Care recommended the development of multi-disciplinary teams within Primary Care settings to provide assessment, advice, support, and some levels of treatment for mental health, distress, or wellbeing. The Mental Health in Primary Care Development Group further developed this vision and produced guidance to support the planning and implementation of the MHWPCS.
- 5.2 In December 2021, the Deputy Director for Mental Health and Social Care wrote to Integration Authorities with details of funding allocation to support planning with specific guidance on planning and

implementation requirements. Renfrewshire HSCP's NRAC share of this was £34,822.10.

- 5.3 Further correspondence in February 2022 from the Minister for Mental Wellbeing and Social Care confirmed Renfrewshire's NRAC share of indicative funding over a three-year period as noted below. Release of funding is predicated on submission and approval of detailed plans. Funding for 2025-26 onwards will be modelled on each submitted plan however it is anticipated that an increase will be required to fund additional roles in the final year of implementation.

Year	Indicative allocated funding
2022-23	£326,786.85
2023-24	£652,554.62
2024-25	£1,315,979.49
2025-26	To be confirmed

#### 5.4 Timeline and Planning Requirements

December 2021	<ul style="list-style-type: none"> <li>Guidance, template, and implementation plan issued to local authorities.</li> <li>Local planning groups convened.</li> <li>Discussion and planning of local models commences.</li> <li>Additional evidence gathering in local area to identify need.</li> </ul>
May 2022 (extended from March)	<ul style="list-style-type: none"> <li>Local plans outlining activity to 2026 and robust implementation plans for 2022/23 submitted to the National Oversight Group.</li> <li>National Oversight Group review of local plans submitted and liaise with local planning groups.</li> </ul>
Spring/summer 2022	<ul style="list-style-type: none"> <li>Funding agreed and allocated.</li> </ul>
Spring/summer 2022	<ul style="list-style-type: none"> <li>National implementation of MHWPCs commences.</li> </ul>
October 2022 (each year thereafter)	<ul style="list-style-type: none"> <li>6 monthly reporting on progress required.</li> </ul>
March 2023 (each year thereafter)	<ul style="list-style-type: none"> <li>Detailed plans for following 12-month period submitted as well as any changes to initial plans outlining activity.</li> </ul>

- 5.5 The key short-term priorities were to develop, finalise and submit a detailed and costed local plan for year 1 of implementation to the National Oversight group by the end of May, and to formalise a Local Planning/Oversight Group as soon as possible. Renfrewshire's plan

was submitted on 31 May 2022 and included:

- Description of the proposal and rationale.
- MH support/investment already in place in the primary care setting (Resource, outcomes achieved).
- How this provides additionality to existing MH investment in primary care, including through Action 15 and PCIF (PCIF covers various priority areas within primary care including mental health and wellbeing through the Community Link Workers).
- How the proposal aligns with the required service delivery principles.
- Anticipated investment on staffing, accommodation, administration, equipment, transport, communications, service accessibility.
- Local planning group and reporting structure
- Current and planned primary care MH workforce provision

The Local Planning Group will be responsible for developing and implementing MHWPC Services as per the finalised plans, once approved by the National Oversight Group.

5.6 There are three options outlined for implementing an MHWPC Service: aligning, embedding or a hybrid model:

**Aligning** the MHWPC Service to a cluster of GP practices would mean teams are employed or contracted by the health board.

**Embedding** MHWPC within GP settings may mean they are employed or contracted by the practice and are dedicated to that practice for patient care.

A **hybrid model** includes elements of both models above. This may result in an MHWPC service which is aligned with a GP cluster with psychology, OT, and other workers in place, complementing a mental health worker embedded in a GP practice.

5.7 Renfrewshire's approach, which has been endorsed by the local planning group is to build on existing services already in place as opposed to creating a new Mental Health and Wellbeing in Primary Care Service.

A mixed or hybrid model will be developed in the form of a 'hub and spoke' model, in which we will provide predominantly direct support from staff employed within Adult Mental Health Services with additional

commissioned services from Third Sector partners.

Our Primary Care Mental Health Service 'Doing Well' has been established for almost 10 years and will continue to develop, forming the 'hub' of the model. As outlined within the MHWPCS planning guidance, a hybrid approach could allow for flexibility based on population need, rurality and resource.

5.8 Appendices 1-5 illustrate the model, planning intentions and 1 year costing plan.

## 6. Next Steps

6.1 Once funding confirmed, progress 1<sup>st</sup> year implementation of MHWBPC and use local planning group framework to further develop plans to 2026.

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## Implications of the Report

1. **Financial** – the financial framework is detailed within the report. Formal confirmation of the associated funding is awaited from the Scottish Government and, as such, we will progress forward with planned recruitment activities as outlined when this has been received.
2. **HR & Organisational Development** – none
3. **Community Planning** – none
4. **Legal** – none
5. **Property/Assets** – none
6. **Information Technology** – none
7. **Equality & Human Rights** – none
8. **Health & Safety** – none
9. **Procurement** – none
10. **Risk** – None.
11. **Privacy Impact** – n/a.

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**List of Background Papers:** NHSGGC Mental Health Strategy 2018-23 Update Report (IJB, January 2022)

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# Appendix 1

## Renfrewshire HSCP Mental Health Wellbeing Primary Care Services

### Year 1 Additional Provision 2022 - 23



Cluster Paisley 5 7 GP Practices Pop. 55,438 Av. SIMD 5.5 Min. decile 1	Cluster Paisley 6 6 GP Practices Pop. 33,808 Av. SIMD 4.6 Min. decile 1	Cluster West Ren 1 4 GP Practices Pop. 17,966 Av. SIMD 5.7 Min. decile 2	Cluster West Ren 2 3 GP Practices Pop. 23,819 Av. SIMD 5 Min. decile 5	Cluster West Ren 3 5 GP Practices Pop. 33,877 Av. SIMD 2.8 Min. decile 1	Cluster West Ren 4 4 GP Practices Pop. 19,598 Av. SIMD 4.75 Min. decile 1	Anticipated Year 1 funding
Additional Provision 2022/23					Community Wellbeing Nurse 1.0 WTE	£36,930
					Occupational Therapist 2.0 WTE	£73,860
	Healthcare Support Worker 1.0WTE				Healthcare Support Worker 1.0WTE	£42,090
	Increased provision of Recovery Across Mental Health Counselling Services					£60,467
	Mental Health & Wellbeing Primary Care Service Manager (Band 8B) 1.0 WTE					£60,371
	Administrative Support (Band 5) 1.0 WTE					£29,679
	Decider Skills Training & Trauma Informed Training for frontline/admin staff					£5,00
	Measurement Performance Framework, Communication & Engagement Strategy and Workforce Development Plan					Underpinned by

## Appendix 2

### Renfrewshire HSCP Mental Health Wellbeing Primary Care Services

#### Current Provision



	Cluster Paisley 5 7 GP Practices Pop. 55,438 Av. SIMD 5.5 Min. decile 1	Cluster Paisley 6 6 GP Practices Pop. 33,808 Av. SIMD 4.6 Min. decile 1	Cluster West Ren 1 4 GP Practices Pop. 17,966 Av. SIMD 5.7 Min. decile 2	Cluster West Ren 2 3 GP Practices Pop. 23,819 Av. SIMD 5 Min. decile 5	Cluster West Ren 3 5 GP Practices Pop. 33,877 Av. SIMD 2.8 Min. decile 1	Cluster West Ren 4 4 GP Practices Pop. 19,598 Av. SIMD 4.75 Min. decile 1	Funding Source	Comment
Current Provision	Community Wellbeing Nurse 1.0WTE	Community Wellbeing Nurse 1.0WTE	Community Wellbeing Nurse 1.0WTE	Community Wellbeing Nurse 1.0WTE	Community Wellbeing Nurse 1.0WTE		Action 15	
	PCMHT MH Practitioner 2.0WTE	PCMHT MH Practitioner 2.0WTE	PCMHT MH Practitioner 2.0WTE	PCMHT MH Practitioner 2.0WTE	PCMHT MH Practitioner 2.0WTE	PCMHT MH Practitioner 2.0WTE	MH Funding	Addition of 0.4WTE Psychology support across PCMHT
	Community Link Workers 8.0 WTE						PCIF	Commission 3 <sup>rd</sup> Sector
					Occupational Therapist 2.0WTE		Action 15	
	Recovery Across Mental Health Counselling Service							Action 15



## Appendix 3

### Renfrewshire HSCP MHWPCS

### Workforce

#### PRIMARY CARE MENTAL HEALTH WORKFORCE - PLANNED PROVISION ABOVE THAT CAPTURED IN CURRENT WORKFORCE TABLE

FUTURE ADDITIONAL WORKFORCE At 28 February or 31 August for biannual reporting (whichever date is next at the time of reporting)

	Profession	Band	WTE	Estimated WTE spent on MH	Contracting Model/ Employed by	Funding Source	Purpose of role	Comments
1 x MHWPC Service Manager – Band 8B	Other (specify in purpose of role)	Other (specify in comments)	1	1	HSCP	MHWPC	MHWPC	Band 8b - Management of the MHWPC Service
1 x Admin Support – Band 5	Other (specify in purpose of role)	5	1	1	HSCP	MHWPC	MHWPC	Admin support of the MHWPC Service
1 X Band 6 OT	Occupational Therapist	6	1	1	HSCP	MHWPC	MHWPC	
1 X Band 6 OT	Occupational Therapist	6	1	1	HSCP	MHWPC	MHWPC	
1 X Band 6 Wellbeing Nurse	Mental Health Nurse	6	1	1	HSCP	MHWPC	MHWPC	
1 X Healthcare Support Worker	Other (specify in purpose of role)	3	1	1	HSCP	MHWPC	MHWPC	
1 X Healthcare Support Worker	Other (specify in purpose of role)	3	1	1	HSCP	MHWPC	MHWPC	
<b>Additional Future Posts</b>	n/a	n/a	7	7	n/a	n/a	n/a	n/a

Summary of Challenges:

- Recruitment of certain key posts may prove challenging both in terms of timescales for recruitment and attracting suitable applicants.
- Other services may be destabilised if staff from those areas are recruited to MHWPC.
- Appropriate accommodation space is imperative to implementing the service successfully. Existing accommodation should be considered as well as alternative opportunities.
- The commissioning process can be time consuming and procurement thresholds should be considered for both newly established and extensions of existing contracts.
- Additional resource requirements to coordinate and manage the increased capacity of mental health and wellbeing provision.

## Appendix 4 Renfrewshire HSCP MHWPCS Year 1 Costs

## Initial Submission 22/23

Year 1	WTE	Band	22/23	23/24	24/25	Duration	Remarks
1 x MHWPC Service Manager – Band 8B	1	8B	£60,371	£92,368	£94,216	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
1 x Admin Support – Band 5	1	5	£29,679	£45,408	£46,317	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
1 X Band 6 OT	1	6	£36,930	£56,503	£57,633	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
1 X Band 6 OT	1	6	£36,930	£56,503	£57,633	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
1 X Band 6 Wellbeing Nurse	1	6	£36,930	£56,503	£57,633	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
1 X HCSW	1	3	£21,045	£32,198	£32,842	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
1 X HCSW	1	3	£21,045	£32,198	£32,842	2 years fixed term (funding for 3 years)	Posts to be reviewed after year 2, expected start date 01/08/22
RAMH – Additional Counselling			£60,467	£60,467	£60,467	Per year for 3 years	
Decider Training			£5,000	£10,000	£5,000	Purchased from external provider	
Non pay costs			£12,328	£12,328	£12,328	Indicative figure (travel etc.)	
IT Equipment			£6,063			Set up costs	indicative figures
<b>Proposal total</b>			<b>£326,787</b>	<b>£454,477</b>	<b>£456,911</b>		

Funding Allocation	£326,787	£652,555	£1,315,980
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Funding to be allocated	£0	£198,078	£859,069
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## Notes

### 1 Staff costs based on top point

2 22/23 budget based on full year

3 £34k from 21/22 to be offset by 22/23 allocation