

## ITEM No ...7.....

**REPORT TO:** POLICY AND RESOURCES COMMITTEE – 21 FEBRUARY 2022

**REPORT ON:** MENTAL HEALTH AND WELLBEING PLANNING IN LIGHT OF THE IMPACT OF COVID-19 ON CITIZENS OF DUNDEE

**REPORT BY:** CHIEF OFFICER, DUNDEE HEALTH AND SOCIAL CARE PARTNERSHIP

**REPORT NO:** 59-2022

### **1.0 PURPOSE OF REPORT**

- 1.1 To provide the Policy and Resources Committee with an overview of current strategic mental health and wellbeing planning as a result of learning gained about the impact of the Covid-19 pandemic on citizens of Dundee.

### **2.0 RECOMMENDATIONS**

It is recommended that the Policy and Resources Committee

- 2.1 Note the contents of this report.

### **3.0 FINANCIAL IMPLICATIONS**

- 3.1 There are no additional financial implications associated with the contents of this report. Mental Health and Wellbeing developments will continue to be progressed within the financial resources available to the Dundee Health and Social Care Partnership.

### **4.0 MAIN TEXT**

- 4.1 The Dundee Mental Health and Wellbeing Strategic Plan 2019-2024 (the Strategic Plan) was approved by the Dundee Integrated Joint Board (IJB) at its meeting of 27 August 2019.
- 4.2 The Strategic Plan has reviewed in terms of progress to date against key priorities and consideration given as to whether it requires to be refreshed in light of learning gained about the impact of the Covid-19 pandemic on citizens of Dundee.
- 4.3 At its meeting in March 2021, the Mental Health and Wellbeing Strategic and Commissioning Group (MHWSCG) discussed findings from three resident surveys undertaken in the early months of the pandemic. The total sample was 1535 and key themes that emerged were:
- reduced access to services and support,
  - the day to day challenges of being in lock down,
  - uncertainty and concerns about the ongoing nature of the pandemic,
  - social isolation and loneliness,
  - mental health more broadly, and
  - financial/ job insecurity and effects on life circumstances.
- 4.4 An inequalities analysis evidenced differential effects on particular groups of people, in particular the long-term sick and disabled, specific age groups, carers, unemployed and/or on welfare benefits, and those that lived alone. This included significant and profound inequalities in mental health and wellbeing.
- 4.5 The survey findings helped the MHWSCG and other strategic groups to understand more fully the impact of the pandemic. It influenced efforts to mitigate effects for those in most need whilst also building resilience for individuals and communities to provide responses themselves.

- 4.6 Focused discussions took place between the Chair of the MHWSCG and the Community Health Inequalities Manager, who is the lead DHSCP officer for the surveys. It was agreed that a sub group would be formed to discuss the results in more detail and consider implications for future planning and commissioning of support for people.
- 4.7 The sub group met in May 2021 and agreed a range of short-term actions including linking Public Health with planned follow-up surveys and leading on a “Mental Health in All Policies” approach, ensuring appropriate links with the Carers Wellbeing workstream, consideration of recommendations on mental health and employability from the Fairness Commission, and mapping survey findings against existing mental wellbeing actions.
- 4.8 In June 2021, the MHWSCG Chair and the Community Health Inequalities Manager mapped the existing Strategic Plan against survey results. In doing so, the plan was agreed to be a good fit in terms of the current priority areas of
- reducing health inequalities
  - prevention/ early intervention
  - right support at the right time, and
  - recovery.

However, further consideration was required to assess how emerging issues would be addressed to reflect the changing strategic and operational landscape arising from the pandemic.

- 4.9 It was agreed that the existing plan should be refreshed to include an update on progress towards existing actions, reference to survey findings, links across a range of strategic plans including Living Life Well and Listen. Learn. Change., identify gaps and target groups, enhancement of work in communities, and consideration of workforce development required to achieve desired change.
- 4.10 At its meeting on July 7th 2021 the MHWSCG discussed a proposal to refresh local Health and Wellbeing Networks. Led by the DHSCP Health Inequalities Service, the networks provide a platform for services to come together to share information on health and wellbeing developments, plan and implement community engagement, facilitate partnership working, and create innovative and sustainable tests of change. Local people/ service users form a central element of the networks and will be provided with appropriate support.
- 4.11 Three networks cover the six wards containing Community Regeneration Areas with alignment to Local Community Planning Partnerships. Strategic developments such as the next phase of Dundee Drugs Commission, the Community Wellbeing Centre, support for unpaid carers, and service recovery and remobilisation increase the relevance of the networks in strengthening locally-led responses. A range of funding sources to address priorities is available, some of which have been allocated directly to communities.
- 4.12 The MHWSCG supported the proposal for refreshed networks, which would
- support locally-led actions that contribute to strategic priorities,
  - share information, enhance partnership working and avoid duplication of effort,
  - facilitate efficient use of local staff and other resources,
  - ensure effective linkages to local interventions with a specific focus,
  - support LCPPs to monitor and implement health and wellbeing priorities, and
  - enable reciprocal communication between strategic groups and local communities.
- 4.13 Complementing these developments is the production of a new Community Learning and Development Plan (CLD Plan) for the city, which is a statutory requirement under section 2 of the Education (Scotland) Act 1980. All education authorities must secure adequate and efficient CLD provision and publish plans every three years that recognise CLD approaches within the local authority, schools, colleges, third sector and other community planning partners. This requires a collaborative approach to co-ordination and delivery, and must be developed in consultation with stakeholders with a particular emphasis on people who are marginalised.
- 4.14 An important component of the CLD Plan for Dundee is the section on addressing health inequalities. Responses to health inequalities and their social determinants is undertaken at a local, service and strategic level in the city including direct provision and a drive to ensure an inequalities perspective in practice and plans. As such, action to address inequalities and improve health is threaded through the CLD Plan in addition to direct areas of work which

reflect the four DHSCP strategic priorities. The overarching aim is to create more positive and equitable health and wellbeing in Dundee's communities.

- 4.15 At its meeting on September 1st 2021, the MHWSCG discussed progress with the local health and wellbeing networks, the draft health inequalities section of the CLD plan, and the proposed refresh of its strategic and commissioning plan as noted in 4.8 of this report.
- 4.16 The MHWSCG agreed the formation of a new Communities and Inequalities workstream with the following remit:
- strengthen the focus on mental health inequalities, determinants, and early intervention/prevention within Dundee's Mental Health and Wellbeing Strategic Plan,
  - identify gaps relevant to the findings of local surveys,
  - link to local developments and structures such as health and wellbeing networks, LCPPS, and new Local Community Plans,
  - strengthen and build on local relationships and infrastructure,
  - develop proposals for appropriate targeted actions in conjunction with communities,
  - ensure effective mapping to other strategic areas that impact on mental health and wellbeing, and
  - consider workforce development to support achievement of the above aims.
- 4.17 The workstream is co-chaired by the Community Health Inequalities Manager, Dundee Health and Social Care Partnership/ Neighbourhood Services, and the Consultant in Public Mental Health, NHS Tayside. It will report to the MHWSCG and contribute to the production of future progress reports for submission to the Strategic Planning Advisory Group and IJB.
- 4.18 Key areas of work developing as a result of discussion at the workstream are as follows:
- Access to information: exploring the potential for a one stop portal for information for use by professionals and the general public to support seamless pathways and social prescribing approaches across the wider system. A scoping exercise is currently underway including possible expansion of the Recovery Road Map app led by the Parish Nurses and links to the priorities of the Working Better Together initiative.
  - Use of public health and other data to inform developments at a local level: Public Health Scotland profiles and summaries of community engagement processes and surveys such as Engage Dundee 2 and Community Collectives are being synthesised to help support the production of the new local community plans.
  - Contributing to the local Fairness Initiatives under development in Stobswell West and Linlathen to ensure a mental health and wellbeing focus and test new ways of working.
  - Influencing how training and other types of support are offered to the local workforce who are supporting people with poor mental health and wellbeing and/or in distress.
  - Linking closely with the Health and Wellbeing Networks to: share information on strategic developments such as the forthcoming Community Wellbeing Centre; promote opportunities to influence these developments; support discussion on local wellbeing issues and how these might be addressed through the new local community plans; connect the social and economic circumstances of people's lives with impacts on mental health and wellbeing; develop appropriate actions and partnership working to address these; connect local activity around the integration of mental health and substance use.
  - Beginning to populate the health inequalities section of the CLD plan with a view to extending this across different SPGs and service settings.
  - Ensuring synergy between local mental health and wellbeing developments and the implementation of the Tayside Listen Learn Change strategy.

## **5.0 POLICY IMPLICATIONS**

5.1 This report has been subject to an assessment of any impacts on Equality and Diversity, Fairness and Poverty, Environment and Corporate Risk. There are no major issues.

## **6.0 CONSULTATIONS**

6.1 The Council Management Team were consulted in the preparation of this report.

## **7.0 BACKGROUND PAPERS**

7.1 None