ADULTS AND HEALTH SCRUTINY COMMITTEE	AGENDA ITEM No. 6
15 MARCH 2022	PUBLIC REPORT

Report of:	Debbie McQuade - Service Director, Adults and Safeguarding		
Cabinet Member(s) r	esponsible:	Councillor Walsh, Cabinet Member for Adult Soc Public Health	ial Care, Health and
Contact Officer(s):	•	 Senior Commissioner, Early Intervention and and Mental Health 	Tel. 07900163590

MENTAL HEALTH SECTION 75 PARTNERSHIP AGREEMENT: ANNUAL REPORT

RECOMMENDATIONS			
FROM: Debbie McQuade – Service Director, Adults and Safeguarding	Deadline date: N/A		

It is recommended that Adults and Health Scrutiny Committee endorses the report as a full account of service and financial performance, activity, and outcomes under the Section 75 Partnership Agreement.

1. ORIGIN OF REPORT

1.1 This report presents an update on the discharge of responsibilities for mental health delegated to Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) through the Mental Health Section 75 Partnership Agreement for 2021-22.

2. PURPOSE AND REASON FOR REPORT

- 2.1 This report updates the Committee on service and financial performance, activity and outcomes under the Mental Health (MH) Section 75 Partnership Agreement within the current year (2021-22).
- 2.2 This report is for the Adults and Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 Overview and Scrutiny Functions, paragraph No. 2.1 Functions determined by Council -
 - 1. Public Health:
 - 2. The Health and Wellbeing
 - 4. Adult Social Care;
 - 5. Safeguarding Adults.
- The mental health services delivered under the duties delegated to CPFT through the Mental Health Section 75 Partnership Agreement support delivery of the Council's corporate objective to 'improve the quality of life of all its people and communities and ensures that all communities benefit from growth and the opportunities it brings'. The services delivered through the Section 75 Partnership Agreement provide good quality, specialist assessment, treatment and support for adults living with mental health problems in Peterborough.

In particular it supports achievement of the following strategic objectives:

Keep all our communities safe, cohesive and healthy

- Achieve the best health and wellbeing for the city
- Safeguarding vulnerable children and adults

3. TIMESCALES

Is this a Major Policy	NO	If yes, date for	N/A
Item/Statutory Plan?		Cabinet meeting	

4. BACKGROUND AND KEY ISSUES

4.1 Peterborough City Council (PCC) has delegated the delivery of mental health services and specified statutory duties for people with mental health needs aged 18 years and over to the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) through a Partnership Agreement under Section 75 of the National Health Service Act 2006.

The intention is to enable delivery of health and social care functions within a mental health trust so that service users and carers receive the best possible service addressing both clinical and social needs without the need for them to re-tell their story or receive multiple assessments.

The current Section 75 Agreement for Mental Health is managed through the Section 75 Governance Board which oversees and monitors performance against the agreement and annual work plan. Commissioners have reviewed the existing agreement and an updated version will be implemented form April 2022.

This report covers the following areas:

- Financial investment and performance
- Service performance, activity and outcomes
- Quality and Feedback
- Impact of Coronavirus
- Future Priorities

4.2 Annual Investment 2021/22 & 2022/23

The investment in the Section 75 Agreement for Mental Health for 2021/22 was £1,408,828.

Funding for 2022/23 will continue at the same level.

4.3 Key Performance Indicators

As at December 2021 CPFT performance against reported key performance indicators was as follows:

- The proportion of adults aged 18-69 in contact with secondary mental health services in paid employment 12.5% against a target of 12.5%
- The proportion of adults (aged 18-69) in contact with secondary mental health services living independently, with or without support 82.7% against a target of 75%
- Delayed Transfer of Care (DTOC) the collection and publication of this data has been suspended nationally to release NHS capacity to support the response to coronavirus (COVID-19). Local reporting will be resumed once the national collection and publication process is resumed.

The Council's Business Intelligence service has worked closely with Mental Health Commissioners and CPFT Operational Leads to develop and implement a new reporting framework based on data recorded in the Mosaic case management system. This new approach has given mental health managers access to a range of self-service performance and management information reports to support operational decision-making and performance monitoring. Within this first year the focus has been on ensuring accuracy of data to enable full confidence in reporting from April 2022.

4.4 Staffing

Vacancy levels for Mental Health Social Workers and staffing under the Section 75 Agreement have continued to be challenging. To address this the service is exploring alternative ways to reconfigure some posts and teams in order to both attract new employees and better align resources within teams. Discussions around potential changes are ongoing.

The total number of vacancies under the Section 75 Agreement has remained fairly static during 2021/2022 at 4.0 posts. The current vacancies include support staff, and Social Workers. CPFT are continuing to make every effort to fill these posts but have not yet been successful. The recruitment of social workers is not just a challenge for CPFT, the County and other partners are experiencing similar challenges in appointing to vacancies.

4.5 Care Packages and Financial Performance Summary

The unique number of individuals accessing Adult Mental Health and Older People Mental Health services during Quarter 1 to 3 of 2021/22 has remained relatively static.

Service User Numbers Performance 2021/22

Adult Mental Health	Start	Q1	Q2	Q3	Movement
Nursing	4	4	5	5	1
Residential	7	8	8	8	1
Direct Payments	1	2	2	2	1
Homecare	25	25	30	30	5
Daycare	0	1	0	1	1
Assistive Technology	0	0	1	1	1
	37	43	46	47	10

Older People Mental Health	Start	Q1	Q2	Q3	Movement
Nursing	1	1	1	1	0
Residential	8	9	9	10	2
Direct Payments	29	29	32	34	5
Homecare	25	28	30	30	5
Daycare	1	1	1	0	-1
Supported Living	9	9	9	9	0
	80	81	84	88	8

In relation to the cost of care for mental health service users, detailed information for 2021/22 can be found in the tables in 4.5.1 (Adult Mental Health) and 4.5.2 (Older People Mental Health).

Financial Performance 2021/22	Start	Q1	Q2	Q3	Movement
Adult Mental Health - £000	834	881	842	813	-21
Older People Mental Health - £000	523	591	548	459	-64

Although service user numbers have remained relatively static in 2021/22 to date, overall we are projecting a reduction in the cost of care. The final position will not be available until after March, but it is anticipated that unless we see a significant increase in new care packages in this last quarter, then an underspend will be generated for the current financial year.

4.5.1 Adult Mental Health – Detailed Financial Breakdown 2021/22

To date there has been an overall movement of £21k against an opening commitment of £834k in 2020/21. The overall movement is mainly being driven by an increase in direct payments reducing the commitment for homecare in year.

Adult Mental Health - £000	Start	Q1	Q2	Q3	Movement
Nursing	54	54	54	54	0
Residential	312	403	363	399	86
Direct Payments	238	236	292	282	44
Homecare	352	357	321	231	-120
Daycare	2	2	2	0	-2
Supported Living	90	85	77	72	-18
	1,069	1,138	1,067	1,058	-42
ClientIncome	-41	-41	-43	-42	-1
Health / Other Income	-173	-216	-225	-183	-10
	-214	-257	-268	-225	-11
	834	881	842	813	-21

4.5.2 Older People Mental Health - Detailed Financial Breakdown 2021/22

To date for Older People Mental Health there has been an overall movement of £64k against a commitment of £523K in 2020/21. We are seeing a significant movement on commitments for Direct Payments in the year but this this is being offset by reductions across all other care types. There is some variance showing for expected Health/other income, but this is being offset against higher levels of client income.

Older People Mental Health - £000	Start	Q1	Q2	Q3	Movement
Nursing	170	143	143	143	-45
Residential	263	286	294	197	-66
Direct Payments	18	143	143	143	125
Homecare	275	222	237	232	-43

Day Care	0	6	0	3	3
	577	542	499	599	2
ClientIncome	-33	-35	-109	-107	-74
Health / Other Income	-188	-174	-160	-153	35
	-221	-210	-269	-259	-38
	523	591	548	459	-64

4.6 Impact of Covid-19

The PCC Adult Social Care Social Work services based within CPFT under the S75 Partnership Agreement have continued to maintain full operational activity throughout the COVID-19 pandemic. The impacts of the virus have necessitated a reduction in "face to face" meetings for all Social Work staff, with an emphasis upon working from home wherever possible. The "Attend Anywhere" secure virtual platform has been utilised by Social Work staff when appropriate – this continues to be an available option if required.

All direct contacts follow COVID-19 Infection Prevention and Control (IPC) measures, this continues to include the use of Personal Protective Equipment (PPE) and completion of risk assessments. The Social Work teams have been required to respond to rapid changes in usual practice and have continued to show dedication and commitment during continued challenging times.

In order to support and ensure the effective and safe operation of the Social Work services in PCC, the programme of daily staff monitoring and reporting has continued. This arrangement enables all services to operate safely, including the Approved Mental Health Professional (AMHP) service; during 2021/2022 this has been supported by a Locum AMHP funded by CPFT.

4.6 Annual Work Plan 2021/22

The S75 Partnership Agreement includes an Annual Work Plan to ensure the ongoing improvement in outcomes for people with mental health problems and their families/ carers, the discharge of delegated responsibilities and the effective use of the Council's investment. Key activity during the 2021/2022 period includes:

- The day-time Approved Mental Health Professionals (AMHP) service: Staff within this service are responsible for coordinating assessments of individuals and also admission to hospital for anyone who is sectioned. A total of 13 AMHP candidates (across both PCC & CCC areas) have been supported to commence professional training. This cohort includes colleagues from the Local Authorities Social Care Services, and health care professionals. Access to both full-time and part-time courses has been arranged in order to most effectively support both the operational service and staff members. This focus will continue through the 2022/2023 period.
- Safeguarding Adults: Responsibility for the receipt and triage of Safeguarding Adults
 Concerns transferred fully to the combined PCC & CCC Multi Agency Safeguarding Hub
 (MASH) from September 2021. A draft Quality Assurance Tool has been developed for use
 by CPFT "Think Family" Safeguarding Service for use in making enquiries regarding
 suspected abuse. Arrangements are in place for continued communication and support
 between the PCC & CCC MASH & CPFT "Think Family" service. A jointly developed pilot of
 Learning & Development modules covering Safeguarding is currently being trialled with
 Mental Health Social Work staff and MASH Practitioners early indications are that this is
 well received.
- EXEMPLAR: primary care early implementer pilot. Work undertaken includes significant
 activity which align to the "Prevent, Reduce, Delay" principles; making community
 connections and support to access local resources. The Exemplar project successfully
 recruited 2 PCC employed Social Workers. These posts are aligned to the North & South
 areas of the city and has now been adopted as mainstream activity within the current service.

- Transitions between Children's and Adults Social Care: The Head of Social Work Adults attends the PCC/CCC "0-25 Children and Young People with Complex Needs" Group and this has enabled a proactive approach to planning to be more robustly adopted. This proactive approach is supported by a Transitions Pathway that has been agreed and implemented via the PCC/CCC Practice Governance Board, during 2021/2022, as a supportive resource for practitioners.
- Mental Health Act (1983 and subsequent revisions) Section 117: Section 117 makes provision for appropriate after care to be provided for people who have been detained in hospital under particular sections of the Mental health Act. To ensure that there is consistent, regular and robust application of the locally agreed Joint Commissioning Tool (JCT), work has continued with PCC/CCC colleagues throughout 2021/2022 to support the clear and consistent decision making and approval of health and social care costs. This has also included the development and agreement of a "Brokerage Work Flow" that enables a more consistent approach to identifying care and support to meet the needs of individuals. It also enables the Council to maintain more robust oversight of high cost packages. These priorities will continue through to 2022/2023 in order that this process be fully implemented, monitored and embedded within social work practice.

4.7 Quality and Feedback

Mental Health services are committed to enabling people to have control over their lives and illness, to work in a strength-based approach to enable people, utilising the philosophy and the model of recovery. The co-location and close partnership working between social work and health care services provides a holistic response for the people of Peterborough and their carers to enable people to live healthy and independent lives.

Included below are short examples of the positive Social Work that has been achieved throughout the period of the continued pandemic. These are testaments to the professionalism and dedication of the Social Work services based within CPFT as part of the S75 Partnership Agreement.

PCC Social Worker/AMHP Adult Mental Health: received from a person who uses the service: "Thank you for all the support and care you have given to me through the years."

PCC Social Worker: received from a Recovery Ward Consultant Psychiatrist: "I'm writing to you to express my gratitude towards you for how flexible you've been recently with several of our service users and how we approach their care. You've shown great willingness to think creatively considering each individual's needs and have shown initiative and great approachability with how you conduct yourself in MDT meetings. I have found your input very helpful and noted you to not shy away from work, taking on additional tasks if it was the right thing for the service user. I know not everyone works in this way but just wanted to say how impressed I am that you clearly do. I don't know who your manager is but would be keen for them to see this, so please kindly forward this email to them, as they'll be pleased to know what a gem they have in their team!"

Feedback from Consultant Psychiatrist to the AMHP service (received May 2021):

"The last 2 weeks have been the busiest I can remember from a point of view of demand on the acute MH system and esp MHA assessments. I just really wanted to thank all my AMHP colleagues who have really been amazing: I have made so many referrals in the past 2 weeks and each time they have been responded to with concern and professionalism. Despite the huge demands on the AMHPs they all maintained such good humour and were lovely to work with and to learn from. They went above and beyond to make sure some really sick people got safely into hospital. I have a lot of respect for you all, you do probably the most difficult job in the trust and the whole team worked so well together in this difficult time. Thank you so much!"

There have been no formal complaints received regarding either the Adults or Older Peoples Social Work services during the 2021/2022 period to date

4.8 **Priorities for 2022/23**

There are a number of priorities which will form part of the ongoing development of the functions performed by the Section 75 Agreement and will aim to ensure the arrangement continues to effectively deliver the delegated duties for Peterborough City Council:

- Review the operational delivery model in relation to unqualified staff, including peer support workers. Expected Outcome: Care Act requirements and responsibilities are understood by practitioners and met on a consistent basis
- The AMHP service: Create a workforce strategy framework that meets key requirements. Expected Outcome: The AMHP service is operational with appropriately qualified staff, and promotes sustainability
- Streamlined and responsive brokerage processes. Expected Outcome: The Local Authority Brokerage Team provides effective support to Mental Health Social Work Services to achieve best practice care and support provision that meets identified need.
- Review the Business Support and Administration service for Mental Health Social Work.
 Expected Outcome: Responsive and effective administrative support to Mental Health Social Work Teams across Cambridgeshire County and Peterborough City Council areas.

There remains a strong focus on the delivery of the Annual Workplan priorities alongside the delegated functions within the Section 75 Agreement. Any risks associated with delivering against these priorities are managed as part of the governance process to ensure that mitigations are put in place and escalated where appropriate.

4.9 Integrated Care Systems (ICS)

From July 2022 Clinical Commissioning Groups (CCG's) will move over to Integrated Care Systems, which will create new partnership arrangements between organisation that meet health and care needs across an area.

Cambridgeshire & Peterborough CCG are in the process of determining how this will operate locally. The proposed structure will include several Provider Collaboratives, one of which will be specifically focussed on Mental Health and Learning Disability.

At present only limited detail is available, but as we transition to the new system, discussions will need to take place about the alignment of MH Section 75 arrangements with this new delivery model.

5. CONSULTATION

5.1 None required

6. ANTICIPATED OUTCOMES OR IMPACT

6.1 Endorsement of the report will validate financial and service activity and performance 2021-22 and demonstrate the Committee's support for continued delegation of the Council's responsibilities for mental health as established under the Mental Health Section 75 Partnership Agreement in 2014 and in line with revised activity, performance and financial targets.

7. REASON FOR THE RECOMMENDATION

7.1 This report delivers the account of activity, outcomes and performance required under the Mental Health Section 75 Partnership Agreement and seeks endorsement to continue with the delegation of responsibilities to the Cambridgeshire and Peterborough NHS Foundation Trust.

8. ALTERNATIVE OPTIONS CONSIDERED

8.1 The option of bringing the Mental Health Social Work service back into the Council was considered. However, the delegation of responsibilities to the Trust contributes to a more

seamless experience and improved outcomes for people who require specialist mental health care and support. In addition, there would be significant implications and therefore disruption for staff and service users in the short term if there were to be a change.

9. IMPLICATIONS

Financial Implications

9.1 Total investment in the Mental Health Section 75 Partnership Agreement was £1,408,828 for 2021/22. This figure will remain unchanged for 2022/23.

Legal Implications

9.2 There are no legal implications arising from the activity and decisions reported other than to recommend continuation of the arrangements established under the 2006 NHS Act of which, Section 75 allows delegation of responsibilities to an NHS body.

Equalities Implications

9.3 No significant implications arising from the report. However, CPFT always strives to ensure dignity and respect in all its interactions and interventions with service users and the public and to address discrimination and to respect the diversity of individuals whatever their origin or beliefs.

Rural Implications

9.4 No significant implications arising from the report.

Carbon Impact Assessment

9.5 This is an update report covering delivery of the Mental Health Section 75 Delivery 2021/22

10. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 None

11. APPENDICES

11.1 None