

Public Document Pack

Southend-on-Sea City Council

Executive Director (Strategy & Change):

Claire Shuter

 Civic Centre, Victoria Avenue, Southend-on-Sea, Essex SS2 6ER

 01702 215000

 www.southend.gov.uk



04 March 2025

Dear Councillor

HEALTH & WELLBEING BOARD - TUESDAY, 22ND OCTOBER, 2024

Please find enclosed, for consideration at the next meeting of the Health & Wellbeing Board taking place on Tuesday, 22nd October, 2024, the following report(s) that were unavailable when the agenda was printed.

Agenda No Item

5. **Public Questions (Pages 3 - 12)**

Questions and Answers sheet

Rob Harris
Principal Democratic Services Officer

This page is intentionally left blank

1. Question from Ms K Mitchell to the Cabinet Member for Adults and Healthier Communities (Cllr Sadza)

Question

Public Health England shows that Southend in contrast to national statistics has an increase in admissions of young people to hospital, in connection with self harming.

This is an indication of trauma that can affect all aspects of a young persons life. As corporate parents delivering health and social care the council has a responsibility to improving outcomes for our children and young people.

I understand there is an expansion of mental health teams but am unsure about how that is reducing this trend.

Can the portfolio holder please let us know what the work of the expanded mental health support looks like, how often they are going into schools, and what the council is putting in place to improve early intervention, and reduce the rising numbers of young people admitted to hospital for self harm?

Answer

Schools and other education settings play an important role in supporting the emotional wellbeing and mental health of children and young people and their families. They can promote good emotional wellbeing, support the learning of social and emotional skills, reduce the stigma associated with mental health difficulties, and spot potential difficulties early on to support children and young people to get the help they need. Mental Health Support Teams (MHSTs) is a government initiative to help increase children and young people's access to support specific to mild to moderate emotional wellbeing and mental health. MHSTs are a resource in addition to the already existing support in any education setting.

MHSTs have three main functions:

1. To work in collaboration with education staff to develop and implement a Whole School Approach (WSA) to emotional wellbeing and mental health. This includes identifying priorities for WSA and supporting with the delivery of these (e.g. mental health awareness assemblies to reduce stigma, workshops for parents and carers, and supporting staff wellbeing).
2. To offer support and guidance to schools, promoting joint working with other services to ensure that children and young people can receive the support that they need. This may include training and consultation with education professionals, joined-up problem solving, liaison with other services and signposting.
3. To offer evidence-based, time-limited targeted support for difficulties such as low mood, worry and anxiety, low self-esteem/confidence, and to support understanding behaviour. This may be in a group or one-to-one. It may be with children and young people, or it may involve working with parents and carers.

Within MSE, there is a total of 13 live teams working across 125 education settings. Each team is funded by NHS England, specific to Southend, MHSTs are as follows:-

- Wave 1 Southend team 1 and College team (team live from Jan 2021).

Southend team 1 includes 8 mainstream schools (5 secondary and 3 primary).

College team works with South East Essex College and Chelmsford College

- Wave 9 Southend team 2 (team live from Sept 2024).

Southend Team 2 includes 8 mainstream schools (3 secondary and 5 primary)

The ongoing development and roll out supports national MHST target of achieving 45% coverage for each ICB across England and is part of the Joint Forward Plan, Core 20 plus and Integrated Care Strategy. Q4 dataset highlights whole school approach group sessions delivered by MHST staff to Southend teams was 28 recording 848 pupils attending. Interventions also include Mind & Mood, which is being implemented, it is an intervention for pupils with low mood and anxiety in secondary school settings. It is a 6-week programme, targeted intervention to support CYP in discovering simple yet powerful steps for overcome emotional distress and feel happier, calmer, and more confident.

MHSTs does have a vacancy rate of 34% across all teams as this new workforce has been an ongoing challenge and theme across implementation waves. However, this should improve as we have been allocated by region 12 EMHP funded training places so we expect the vacancy rate to improve going forward. Due to a change in Government, we are currently unclear what future plans and funding will be available and whether we will be able to continue with the expansion of MHSTs across our locality, but this is awaited.

In addition to the above colleagues from the education department in Southend City Council have provided some additional information on the SCC offer to all schools which commenced in September:

- Specialist Social Emotional Mental Health (SEMH) teaching service support.
- 1.5 days of free Educational Psychology service support (this is distinct from Education Health & Care Plan (EHCP) statutory service) along with additional SEMH Support from 8 newly appointed assistant psychologists.
- A newly established Emotional Wellbeing Team delivering early intervention. The Emotional Literacy Support Assistant (ELSA) programme will start in October, offered to all schools and including 6 days of training to school's ELSAs on all aspects of emotional well-being and mental health needs (self-harm specifically features) plus monthly ELSA supervision with an Educational Psychologist.

- In addition, all schools have the opportunity to purchase additional EP time via the traded model to support with whatever the school prioritises, which can include training and support for young people with self harm.

2. Question from Ms T Cowdrey to the Cabinet Member for Adults and Healthier Communities (Cllr Sadza)

Question

I understand that First Response is based in Basildon and accessed by professional referral only, the Access and Assessment team for those experiencing moderate to severe mental health problems in Chelmsford. The urgent mental health care department is also based in Basildon. The only means of accessing Access and Assessment or urgent mental health care, it seems, is through the 111 option 2 phone service as signposted to by the Southend City Council Livewell site.

Recent experience and feedback from colleagues has demonstrated the front door hasn't seemed like the helpful gateway to support you might expect and Southend residents have no idea how to access urgent mental health support. Those accessing the crisis line on 111 option 2 are advised simply to call an ambulance.

We are well aware of the strain our Ambulance Service is experiencing so wonder if this advice is helpful and the expectation put upon Southend residents in crisis to make their way to Basildon unhelpful.

Can the portfolio holder for Social Care and Healthier Communities provide clarity for residents and professionals on the location of the front door for mental health services and how this is accessed, alongside statistics for the destinations of those have managed to access this front door and how many Southend residents have accessed the Basildon Mental Health Social Care Department over the past 12 months.

Answer

Urgent and emergency care provision across Mid & South Essex for mental health is provided by EPUT, through Inpatient Care Units across Essex, Southend, and Thurrock. EPUT as a mental health trust provides adult (18+) and older adult (70+) inpatient services from 23 wards spread across Chelmsford, Rochford, Basildon, and Thurrock. Access and assessment for urgent mental health care is via various options such as First Response, Crisis Response services (CRS), Primary Care direct referral or through mental health practitioners in primary care and or via 111 option mental health.

For people that deem themselves to be in Crisis, they should call 111 option mental health. This is widely publicised and based on a national dictate of access through to mental health services with the Option Mental Health most recently replacing Option 2 as it were, to ensure “parity of esteem” in accessing emergency or urgent mental health care. Within MSE our current data indicates that:

- 88.7% of calls via 111 option mental health are answered within 60 seconds.
- 89.3% of the callers requiring a Crisis response face to face are seen within 4hrs (Crisis Response Service)
- 97.1% of callers requiring an urgent response who were assessed face to face were seen within 24hrs.

The number of calls to 111 option MH per month average at 2500 per month with April at 2557, and August 2337. We have dedicated line for all professionals including GP and Ambulance Staff. Approx 300 calls are received a month. The Professional line is answered directly by a clinician. We are aware that there are pressures across the MH pathway due to staffing vacancies. We also have several crisis alternatives available that can be accessed by the Crisis Response Service which include the Crisis Sanctuary one of which is based in Southend and MH Joint Response Vehicle (maned by both mental health and Ambulance practitioners)

The CRS Team whilst currently based in Pitsea, has undergone a review and in the process of moving to a hub and spoke model across MSE to ensure a footprint across Chelmsford, Basildon, and Southend.

The MH joint Response Vehicle (1pm - 1am) has been live since March 23. For September 771 referrals were received of which 465 were seen face to face with 38% of the totality of activity being referrals from the Southeast Locality, with 81% leading to non – conveyance to emergency departments.

The new MH UCED is another alternative to AE, this whilst based in Basildon covers the whole of MSE and has demonstrated a reduction in the number of attendances to Acute AE departments and the numbers requiring an admission to an acute mental health Bed. For Southeast Locality, the number determined to have accessed the MHUCD is estimated at approximately 714 attendances. There is also a mental health Liaison Service in situ should people attend Southend Acute Hospital and there are on average 100 people seen per month in AE. For the last 12 months there were 1,120 people seen in Southend AE .

3. Question from Mr D Webb to the Cabinet Member for Adults and Healthier Communities (Cllr Sadza)

Question

There is a high volume of children and adult mental Health cases since covid. In my experience, I have had 12 psychiatrists in 10 years. The mental health service both nationally and in Southend is broken, with lack of support for all mental health for children and adults.

How many children and adults are diagnosed with mental health issues and what strategies are put in place to support them in Southend?

Answer

The surge in demand for mental health provision seen in the past year is not mid and south specific and is also being experienced by regional colleagues. There continues to be a high demand for mental health provision and in addressing this in Mid and South Essex, we continue to work with our providers as part of a whole system approach through our commitment in delivering against the Southend Essex and Thurrock (SET) mental health strategy and the NHS Long Term Plan. Key to this has been the progression of the mental health transformation work in MSE which has been focused on consolidation of the new community mental health capability that has been set up within the PCNs. In particular ensuring;

- A new tier of psychological services to reduce waiting times and broaden the reach of local people with therapy needs
- Mental health nurses embedded in the PCNs working alongside GPs with the aim of having at least one prescribing nurse in each PCN to support mental health assessment and treatments within the GP surgery to ensure we maximise early intervention and prevention
- Mental Health Pharmacy provision to support specialist advice and prescribing to treat MH conditions
- Consultant Psychiatrist provision (the model is currently variable) to support GPs with specialist advice, risk management and treatment
- Integrated approach with the VCSEs and Social care working together as colleagues with GPs and MH staff to ensure that the persons needs can be rapidly met by the right service at the point of need
- MDTs set up to ensure the local integrated capability as described above has a central place for asking for help, raising concerns, making referrals, and offering help
- Resources to support the delivery of care of physical health checks for people with a serious mental illness

This new capability is beginning to reduce average waiting down from 28 days.

4. Question from Mr Ali to the Cabinet Member for Adults and Healthier Communities (Cllr Sadza)

Question

Please list the GP practices in Southend City showing those that have active Patient Participation Groups and those that don't?

Answer

SS9 PCN – Southend West locality/neighbourhood

- Eastwood Group Practices – Very active PPG
- Highlands – Active PPG
- Dr Krishnan – No PPG
- Pall Mall – Active PPG
- The Leigh Surgery – No PPG

Southend East PCN – Southend East locality/neighbourhood

- Dr Irlam - Central Surgery – Very active PPG
- North Shoebury & Thorpe Bay – Active PPG's
- Dr Kumar & Sinha – Active PPG
- Dr Palacin – Active PPG

Southend Victoria PCN – Southend East Central locality/neighbourhood

- Central & Thorpe – No PPG
- Carnarvon – Very active PPG
- Dr Malik – No PPG
- North Avenue – No PPG
- Queensway – Active PPG
- St Luke's – Active PPG
- Northumberland Ave – Active PPG
- Warrior Square – No PPG
- West Road – No PPG

Southend West Central PCN – Southend West Central
locality/neighbourhood

- Dr Bekas – No PPG
- Prince Avenue – No PPG
- Scott Park – No PPG
- Southend Medical Centre – Active PPG
- Valkyrie – No PPG

This page is intentionally left blank