

## SERVICE SPECIFICATION

Service Specification No.	
Service	<b>Mental Health Needs Assessment for adults</b>
Authority Lead	<b>Southend-on-Sea Borough Council (Public Health)</b>
Provider Lead	<b>TBC</b>
Period	<b>July – September 2015 (12 weeks)</b>
Date of Review	

### 1. Overview and Background

#### 1.1 Overview of Requirement

The Provider will develop a mental health needs assessment (“MHNA”) in relation to adult population of Southend-on-Sea (as further defined in sections 5.1 and 5.2 below) in accordance with the timescales and requirements of this service specification.

#### 1.2 An overview of Southend-on-Sea

Southend-on-Sea is one of the largest conurbations in the East of England, the closest seaside resort to London and home to an estimated 175,800 residents. It is located on the north side of the Thames estuary approximately 40 miles east of central London, and is bordered to the north by Rochford and to the west by Castle Point. The health of people living in Southend-on-Sea is varied and overall there is more deprivation than the England average. Life expectancy for both women and men is lower than the England average (a gap of 9.7 and 10.1 years, respectively).

Regarding mental health, Southend-on-Sea has fewer adults diagnosed with depression compared to the English average (source: 2013 Community Mental Health Profile, Quality and Outcome Framework data). However it is estimated that there are higher rates of common mental disorders in the Southend population, including mixed anxiety depression, generalised anxiety disorder, depression, obsessive compulsive disorder and panic disorder, compared to England (source: 2000 Adult Psychiatric Morbidity Survey). There are significantly more hospital admissions for mental health problems (directly standardised rate) and fewer people with mental illness (and/or disability) in settled accommodation in Southend (source: 2013 Community Mental Health Profile).

#### 1.3 Local Context

The Southend Joint Strategic Needs Assessment (JSNA) is currently being updated to inform the refresh of the Health and Wellbeing Strategy for 2016-20. In March 2015 the Health and Wellbeing Board and Joint Executive Group endorsed plans for a mental health needs assessment of adults to be undertaken as a priority as part of the JSNA process.

This mental health needs assessment will build on the previous JSNA chapter on Mental Health for Southend-on-Sea entitled *Towards better mental health and well-being* (2010). It will also complement the *South Essex Joint Mental Health Strategy* (2012). Concurrent to this mental health needs assessment, a county-wide strategic review of mental health services has been proposed.

#### 1.4 The Importance of Mental Health

Mental health problems account for almost one quarter of the ill health in the UK and their prevalence is rising. The World Health Organisation predicts that depression will be the second most common health condition worldwide by 2020. Poor mental health affects adults of all ages; however effective promotion, prevention and early intervention can dramatically reduce its impact on society.

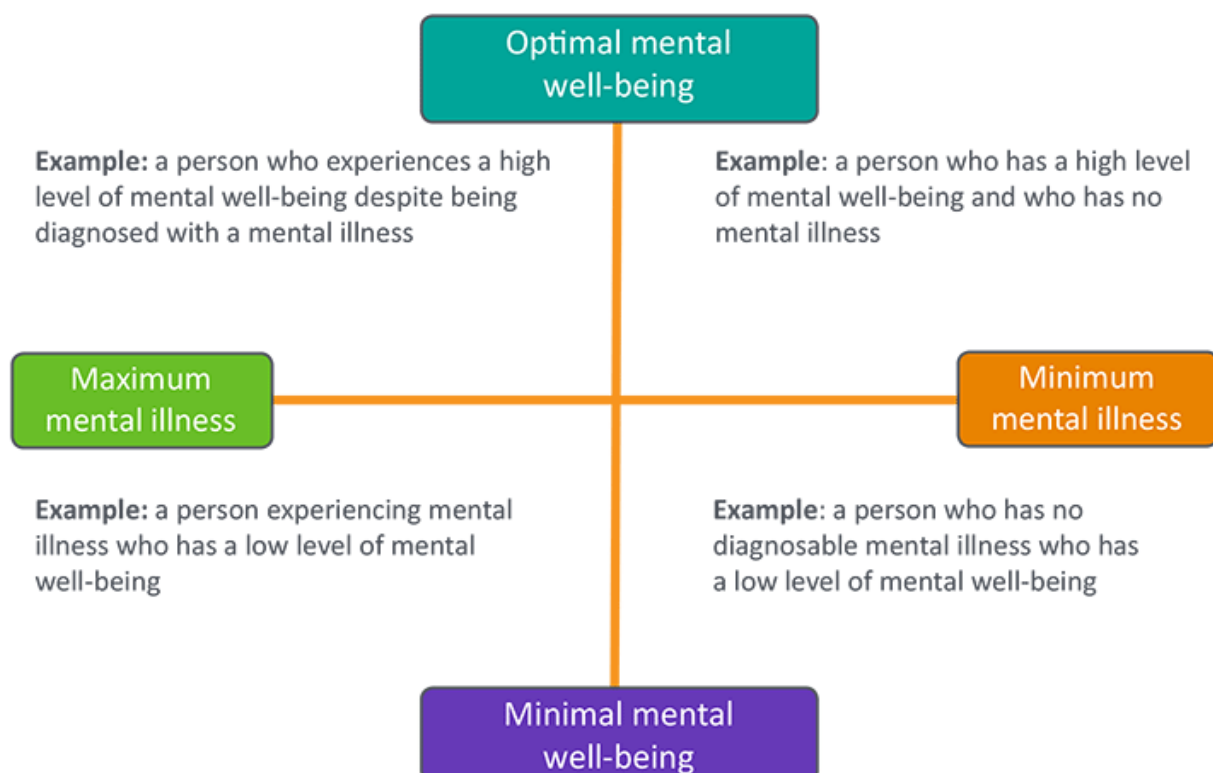
Mental health is more than the absence of mental illness. Good mental health underpins everything we do, how we feel, act and behave. It is an essential individual, family, community and business resource that needs to be protected and enhanced. There is often a circular relationship between mental health and issues such as housing, employment, family problems or debt.

People with higher levels of good mental health and wellbeing have better general health, use health services less, live longer, have better educational outcomes, are more likely to undertake healthy lifestyles and are more productive at work, take less time off sick, have higher income, have stronger social relationships and are more social.

## 1.5 Definitions

- **Mental Health:** the World Health Organisation defines mental health to be “a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”. The concept of mental health is recognised to include the two distinct spectrums of mental wellbeing and mental illness (see Figure 1). The presence or absence of mental illness can be unrelated to the presence or absence of mental wellbeing.
- **Mental Wellbeing:** a positive state of mind and body, feeling safe and able to cope, with a sense of connection with people, communities and the wider environment
- **Mental Illness:** a condition that impacts a person's thinking, feeling or mood, and may affect his or her ability to relate to others and function on a daily basis. Experiences of mental illness can vary from person to person.
- **Recovery:** for many the concept of mental health recovery is about staying in control of their life despite experiencing a mental health problem. Professionals in the mental health sector often refer to the ‘recovery model’ to describe this way of thinking. Putting recovery into action means focusing care on supporting recovery and building the resilience of people with mental health problems, not just on treating or managing their symptoms.
- **Services:** where used, the term ‘services’ is intended to refer to all forms of provision; for example outreach, community development activities through to clinics.

**Figure 1: Mental health continuum showing distinct spectrums for wellbeing and illness**



## 1.6 National Context

[No Health Without Mental Health](#) (2011) clearly outlines that mental health is everyone's business and good mental health and resilience are fundamental throughout life to our physical health, our relationships, our education, our training, our work and to achieving our potential. The benefits of good mental health and wellbeing also have wider social and economic benefits which require a multi-agency approach to overcome the challenge of stigma and discrimination. This national strategy was supported in 2012 by the publication of an ['Implementation Framework'](#). The strategy notes that the cost of mental health problems to the economy in England is estimated at £105 billion, and treatment costs are expected to double in the next 20 years.

The [Public Health Outcomes Framework](#) (2012) introduced the Department of Health's overarching vision for public health, outcomes to be achieved and indicators that will help all parts of the local health and social care system to understand how well we are improving and protecting health locally. It included a number of outcomes specifically relevant to mental health, including settled accommodation, employment, self-reported well-being and reducing health inequalities.

The [Mental Health Crisis Care Concordat](#) is a national agreement between services and agencies involved in the care and support of people in crisis. It 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 Southend Health and Wellbeing Board signed up to the principles laid out within the Mental Health Crisis Concordat in December 2014.

The duty to undertake Joint Strategic Needs Assessments (JSNA) is set out in Section 116 of the Local Government and Public Involvement in Health Act (2007). This duty commenced on 1st April 2008. JSNAs are the means by which local leaders work together to understand and agree the needs of local people, with the joint health and wellbeing strategy setting the priorities for collective action. JSNAs establish local patterns of need and, in partnership with other stakeholders, make recommendations for local investment, service developments and commissioning.

## 2. Aim and objectives of contract

### 2.1 Aim

The aim of the MHNA is to identify the mental health needs of the adult population resident in Southend-on-Sea, in a meaningful way, in order to inform and support commissioning of health, public health, well-being and social care services.

### 2.2 Objectives

The principal objectives of the MHNA are as follows:

- **Involvement of stakeholders** - conducting a mental health needs assessment can stimulate the involvement and ownership of various stakeholders, including those with lived experiences of mental illness, in the process.
- **Intelligence** - to provide a baseline of current mental health in Southend-on-Sea which can be used to measure the impact of interventions or service development.
- **Planning** - to inform service requirements (i.e. for how many people, the effectiveness of these services, the benefits that will be expected, and at what cost).
- **Efficiency** - having assessed needs, measuring whether or not resources have been appropriately directed (i.e. do those who need a service get it? Do those who get a service need it?).
- **Equity** – to identify where inequalities exist, and to identify actions necessary to reduce health inequalities (such as through early identification, increasing access to care and improving the allocation of resources between and within different groups).

### 3. Service Description

#### 3.1 Service outcomes

The Provider will ensure that the MHNA will achieve the following:

1. Update and review the 2010 JSNA section 1.5 ('Indicators of mental health need') summarising the current mental health status of adults in Southend.
2. Describe the Southend adult population at increased risk of developing mental health problems, with reference to the distribution of risk and protective factors for mental health.
3. Outline and map the current and future services, including those in the voluntary and community sector, which support the mental health needs of adults in Southend.
4. Ascertain the views of the public, service users, carers and other stakeholders, of mental health assets, needs and gaps in current provision.
5. Summarise the evidence for the delivery of high quality and cost effective interventions for mental wellbeing promotion, mental ill-health prevention and treatment.
6. Identify areas for improvement and make recommendations in collaboration with stakeholders regarding mental health promotion, prevention and treatment, where appropriate

#### 3.2 Provider responsibilities

- The Provider will produce the MHNA for adults in Southend-on-Sea. The MHNA will meet the service outcomes set out above and the Provider will deliver this to meet the aims and objectives of the mental health needs assessment.
- The Provider will ensure that the MHNA conforms to the Southend-on-Sea JSNA template (Appendix A) and includes exploration of locally relevant topics (including those set out in Appendix B).
- The Provider will take into account and comply with relevant regulations and guidance associated with the effective promotion, prevention, management and treatment of mental health, in line with the Authority's requirements. The Provider will ensure that all documentation is prepared to a high standard and is in-keeping with current regulations and guidance.
- The Provider will work autonomously, either remotely or on site (Civic Centre Southend-on-Sea), in adherence with the Authority's policies. The Provider will provide on-site and remote support to facilitate delivery of the MHNA, as necessary.
- The Provider will be required to work collaboratively with the Authority's public health department and other staff working in the departments of Place, People and Corporate Services. The Provider will be required to work in partnership with a range of stakeholders (including those set out in Appendix B). The Provider will be required to organise and attend meetings with stakeholders, including people with lived experiences of mental ill-health.
- The Provider will think broadly and creatively regarding the benefits which can be gained through the development of services in the area, in collaboration with other stakeholders, and incorporate this within the MHNA, including identifying areas where collaboration can deliver more efficient and cost-effective outcomes.
- The Provider will be required to successfully deliver the MHNA so that it meets the Authority's needs, conforms to best practice and adheres to all relevant legislation, regulations and guidance.

- The Provider will be required to produce a complete draft MHNA within 10 weeks, and a complete final MHNA within 12 weeks, and shall ensure that both meet the approval of the Authority. The Provider will be required to provide fortnightly written updates to the Authority's nominated lead in the public health department on progress made in delivering the MHNA.

### 3.3 Governance and oversight

- The Provider will ensure any staff engaged to deliver the Services and/or work on the MHNA fully adhere to relevant information governance policies of the Authority; particularly those that concern the use of IT equipment, electronic devices and related communications media.
- The Provider will abide by the Authority's relevant health and safety and patient confidentiality policies, specifically those related to patient confidentiality (Caldecott Guidance).
- All physical outputs and intellectual property relating to public health services (reports, data etc.) become and remain the property of the Authority. The Provider will ensure that an appropriate project plan is developed and maintained and all relevant outputs are captured and recorded.
- The Provider will report to and be supervised by a manager that will be nominated by the Authority's public health department.
- The Provider will ensure any staff engaging with vulnerable adults, including people with lived experiences of mental ill-health, have provided evidence of DBS (enhanced) clearance to the Authority.

## 4. Service Deliverables

The Provider will:

- 4.1 Develop a project plan which demonstrates how and when the Provider will meet the requirements, and deliver its services in line with that project plan. The plan should include consideration of the following;
  - Engagement process
  - Identifying local needs
  - Mapping current pathways and provision
  - Gap identification
  - Recommendation development
- 4.2 Ensure the MHNA is accurate and contains all information required by relevant guidance, best practice and the existing evidence base.
- 4.3 Identify and present current service provision. This should include maps which identify the geographical spread of services provided in the area.
- 4.4 Agree with the Authority the scope and content of any formal consultation exercise(s) prior to commencing them.
- 4.5 Consult with a wide range of stakeholders, including people with lived experiences of mental ill-health, on mental health issues that affect people in Southend on Sea.
- 4.6 Ensure that any consultations are conducted in accordance with regulations and has at least one formal consultation period (minimum period of 60 days) regarding the needs assessment.
- 4.7 Support programmes for mental health within Southend-on-Sea covering statutory, voluntary and private sector organisations where they already exist.

- 4.8 Ensure that the MHNA takes account of existing Southend-on-Sea strategies in order to prevent duplication of work and multiple consultations with health groups, patients and the public. This should include the Health and Wellbeing Strategy, NHS Southend Clinical Commissioning Group 2 & 5 year strategic plan, Southend health and social care Better Care Fund, and Health Pioneer Pilot work streams specifically the Prevention & Engagement work stream.
- 4.9 Produce a draft of the MHNA for review and comments by the public health department which meets the Authority's approval and timescales.
- 4.10 Produce a complete final version of the MHNA which meets the approval and timescales of the Authority.
- 4.11 Establishes a system through which the outcomes of the needs assessment can be maintained and/or updated by the Authority's public health department if appropriate.

## 5. Scope

### 5.1 Inclusion

The MHNA will assess the needs of the following:

- Adults resident in Southend-on-Sea (aged 18 years +)

### 5.2 Exclusion

The MHNA will not assess the needs of the following:

- Children and young people under the age of 18
- All individuals with learning disabilities regardless of age
- All individuals diagnosed with dementia regardless of age

### 5.3 Applicable national standards

The Provider will deliver the service deliverables in accordance with all applicable national standards including [‘Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies’](#) (Department of Health, 2013) (as may be updated from time to time).

### 5.4 Applicable local standards

The Provider will deliver the Services in alignment with the following local documentation (as may be updated by the Authority from time to time):

- Southend on Sea Joint Strategic Needs Assessment
- Health and Well-being Strategies

## 6. Contract period and payment terms

The contract shall be for an initial period of three months commencing on 1<sup>st</sup> June 2015 with the option for the Authority to extend the contract period if necessary.

Payment to the Provider for delivering all services outlined above will be no more than £24,000. Any application bids in excess of this amount will be excluded.

This contract will be paid for as a single block payment upon receipt of the final MHNA that meets the approval of the Authority. Any costs accrued by extending the contract period will be borne by the Provider.

## 7. Required Insurances

The Provider will ensure that it maintains appropriate levels of insurance to meet its potential liabilities in relation to this service

## Appendix A – Topics for inclusion

*The following intelligence was compiled following discussion with members of the Southend Health and Wellbeing Board in March and April 2015. In order to maximise the relevance of the mental health needs assessment to both the stakeholders and population of Southend, the Provider should tailor the MHNA to include the following topics.*

Topic	Detail
Mental Health Promotion	In order to improve the mental health of the population, it is important for action to be taken at various levels – including mental health promotion. The MHNA should summarise the evidence base, collate examples of local work which promotes mental health and identify if there are any gaps.
Mental Illness Prevention	In order to improve the mental health of the population, it is important for action to be taken at various levels – including mental illness prevention. The MHNA should summarise the evidence base, collate examples of local work which contributes to the prevention of mental illness and identify if there are any gaps.
Recovery Support	In order to improve the mental health of the population, it is important for action to be taken at various levels – including promoting recovery and improving outcomes for people who have mental illness. For example, the Southend 2013 Community Mental Health Profile reported the number of people with mental illness or disability in settled accommodation was statistically significantly below the England average. Some stakeholders have noted anecdotally a need for further information regarding how we support people in recovery following a mental health episode or crisis (including accommodation and discharge processes). The MHNA should summarise the evidence base, collate examples of local work which supports recovery and identify if there are any gaps.
Prevalence of Mental Illness	Much epidemiological data will not have changed since the last JSNA on Mental Health (written in 2010), as the Adult Psychiatric Morbidity Survey (2014) is not due to be published before 2016. However data ought to be updated in light of the 2011 UK Census and other reliable data sources where possible.
Crisis Support	Organisations across South East Essex (including Southend) have signed up to the Mental Health Crisis Care Concordat. An action plan is being developed and overseen locally by the CCG System Resilience Group. The Public Health team are currently doing a report examining current rates, trends and population risk factors for suicide. Other organisations have been tasked with examining service utilisation and patient experiences. The MHNA should include any relevant outputs from this work, where available. It would also be helpful to summarise the evidence base for preventing mental health crisis, including suicide. The MHNA should explore opportunities to improve access to supported housing and other accommodation provision for people with mental health problems. The MHNA should identify the impact of housing issues on people experiencing a mental health crisis.
Complex Needs	Nationally research suggests that between 22% and 44% of adult psychiatric inpatients also have problematic drug or alcohol use, with up to half being drug dependent. Service providers have identified concerns regarding not being able to meet the needs of individuals with both substance misuse and mental health problems. Furthermore, a report from the Southend Association of Voluntary Services (SAVS) highlighted service users had identified that the current provision for people with complex needs – including the separate issues of dual diagnosis, personality disorder, homelessness and those with chaotic lives – was insufficient. The MHNA should explore these issues, clarifying the population need and current patient experiences.



Common Mental Disorders	The 2000 Adult Psychiatric Morbidity Survey estimated that the rate of people in Southend-by-Sea with a common mental disorder was above the national average (as reported in the 2010 JSNA). A report from SAVS highlighted service users had identified that the current provision of IAPT was not meeting current need and many reported difficulty accessing timely support for low-level mental health difficulties. The MHNA ought to specifically outline the needs of older people with common mental disorders. The MHNA should review current provision to meet this need, and identify if there are any gaps.
Long-Term Conditions	The 2014 Long-Term Conditions (LTC) JSNA Chapter reported that the Southend population has a higher than average number of individuals with multiple-LTCs. Many of these individuals will have mental health needs, which they may or may not be receiving support for. The MHNA should summarise the evidence base, collate examples of local work where the holistic needs of individuals with LTCs are supported (physical and mental health) and identify if there are any gaps.
Transition to adult services	The CAMHS service covering Southend is currently undergoing a procurement process, and it is anticipated that the mental health needs of children and young people will be included within this process. However it is important to ensure we are supporting young people when they transition from CAMHS to adult services. The MHNA should review current arrangements and identify if there are any gaps.
Hoarding	The excessive acquisition of many items and not being able to throw them away, resulting in unmanageable amounts of clutter has been noted to be a growing concern in Southend. The MHNA should review the evidence base regarding tackling hoarding, and identify if there are any gaps in provision.
Benchmarking Service Provision	It is intended that this MHNA will identify the current and future mental health needs of adults in Southend-on-Sea. As part of this process it would be helpful to have current service provision outlined and mapped. Where appropriate service activity and outcomes should be benchmarked
Psychological Interventions	It would be useful to map the availability of psychological interventions across patient pathways. This should consider patients with mental health issues as well as patients with long-term conditions, across primary, secondary and tertiary care.

## **Appendix B – List of stakeholders**

*Please note this list is not exhaustive. Additional stakeholders are likely to be developed during the mental health needs assessment process.*

- Essex County Fire and Rescue Service
- Essex Police
- East of England Ambulance NHS Trust
- Southend University Hospital NHS Foundation Trust
- NHS Southend CCG
- General Practitioners in Southend-on-Sea
- Southend Drug and Alcohol Commissioning Team (Southend-on-Sea Borough Council)
- People, Place and Public Health departments (Southend-on-Sea Borough Council)
- Southend Healthwatch
- Southend Association of Voluntary Services (SAVS)
- Southend Mind
- Southend Rethink
- Richmond Fellowship
- Trustlinks
- Family Mosaic
- South Essex Partnership University NHS Foundation Trust (SEPT)
- Breakthrough
- Carers Breakthrough
- Together Advocacy Centre
- Hart View (Mental Health Rehabilitation)
- Growing Together
- Aran Homes
- Safer Places
- REASON
- Job Centre Plus
- Citizens Advice Bureau
- Southchurch Foodbank
- Relate South Essex
- Streets Ahead
- Parkwood Healthcare Health Trainer Service
- Churches Together
- Cruse Bereavement Care (Southend-on-Sea)
- Southend Carers Forum
- South Essex Family Mediation