

BOARD OF DIRECTORS MEETING (Open)

Date: Wednesday 13 September 2017

Item Ref:

05

TITLE OF PAPER	Health, wellbeing and employment – the changing landscape
TO BE PRESENTED BY	Fiona Goudie, Clinical Director for Strategic Partnerships
ACTION REQUIRED	For information
OUTCOME	For Board of Directors to be aware of trust involvement in this area.
TIMETABLE FOR DECISION	To note bidding timescales for 5 Year Forward View Transformation Funding, likely to be Quarter 3-Quarter 4.
LINKS TO OTHER KEY REPORTS / DECISIONS	5 Year Forward View for Mental Health Implementation.
LINKS TO OTHER RELEVANT FRAMEWORKS BAF, RISK, OUTCOMES	Strategic objectives for future services and workforce transformation.
IMPLICATIONS FOR SERVICE DELIVERY AND FINANCIAL IMPACT	Implications of Work and Health Unit (WHU) Trial on IAPT and Emotional Wellbeing Pathways and new Community Mental Health Team (CMHT) model.
CONSIDERATION OF LEGAL ISSUES	

Author of Report	Fiona Goudie
Designation	Clinical Director – Strategic Partnerships
Date of Report	21 August 2017

SUMMARY REPORT

Report to: BOARD OF DIRECTORS MEETING

Date: 13 September 2017

Subject: Health, wellbeing and employment – the changing landscape

Presented by: Fiona Goudie, Clinical Director for strategic Partnerships

Executive Sponsor: Kevan Taylor, Chief Executive

Author: Fiona Goudie, Clinical Director for strategic Partnerships

1 Purpose

<i>For Approval</i>	<i>For a collective decision</i>	<i>To report progress</i>	<i>To seek input from</i>	<i>For information</i>	<i>Other (please state)</i>
		X	X	X	

To provide Board of Directors with a presentation and update on Trust, local and regional activity on Health, Wellbeing and Employment.

2 Summary

Background

There is ample evidence that good work is good for health and that unemployment is a major determinant of health inequalities. There are a range of key drivers across the public sector and in the NHS.

- The Work and Health Unit (WHU), a joint national team established in 2015 across the Department of Work and Pensions (DWP) and the Department of Health (DoH) has a one-off £115 million budget to pilot ways of joining up health and employment systems.
- Sheffield City Region (the local authority areas of South Yorkshire and surrounding districts governed by a Combined Authority of the leaders of those districts and associated Local Enterprise Partnerships) has already secured devolutionary success about employment including an early intervention pilot for people at risk of long term unemployment. It has also secured funding for a Health Led Employment trial based on Individual Placement and Support (IPS). IPS is an evidence based 'place then train' model originally developed within mental health services and since used effectively with substance recovery and homeless services. Employment specialists are highly skilled non clinical staff. The STP identifies join up between health, employment and welfare as a key part of its prevention strategy, trialling innovative ways to support people to get into and stay in employment (Employment Work Stream Chair – Kevan Taylor).

- In Sheffield a Local Implementation Board and Employment and Employability work stream has been established as part of Public Service Reform (Eugene Walker and Kevan Taylor – joint chairs) with the aim of establishing a single hub for employment and health supporting citizens and employers.
- SHSC has a track record of running a dedicated user employment service for people with complex needs. Although this is no longer a standalone service, our Education and Employment workers supervised by Occupational Therapists, signpost and refer individuals to other organisations for employment advice.
- Since January 2017 we have hosted 4 IPS workers funded via South Yorkshire Housing's £2.7m Building Better Opportunities Fund. Two of these staff are hosted within our Adult CMHTs, one in Learning Disabilities and one with the Substance Misuse service. Early learning has found this co location to be very beneficial as is rapid access to welfare and benefits advice (see customer case study Appendix 1).

Work and Health Unit Health Led – Individual Placement and Support (IPS) Trial

The Sheffield City Region has been successful in securing £4-6m investment from the Work and Health Unit to support 7,500 Barnsley, Bassetlaw, Doncaster, Rotherham and Sheffield residents over a 3 year period.

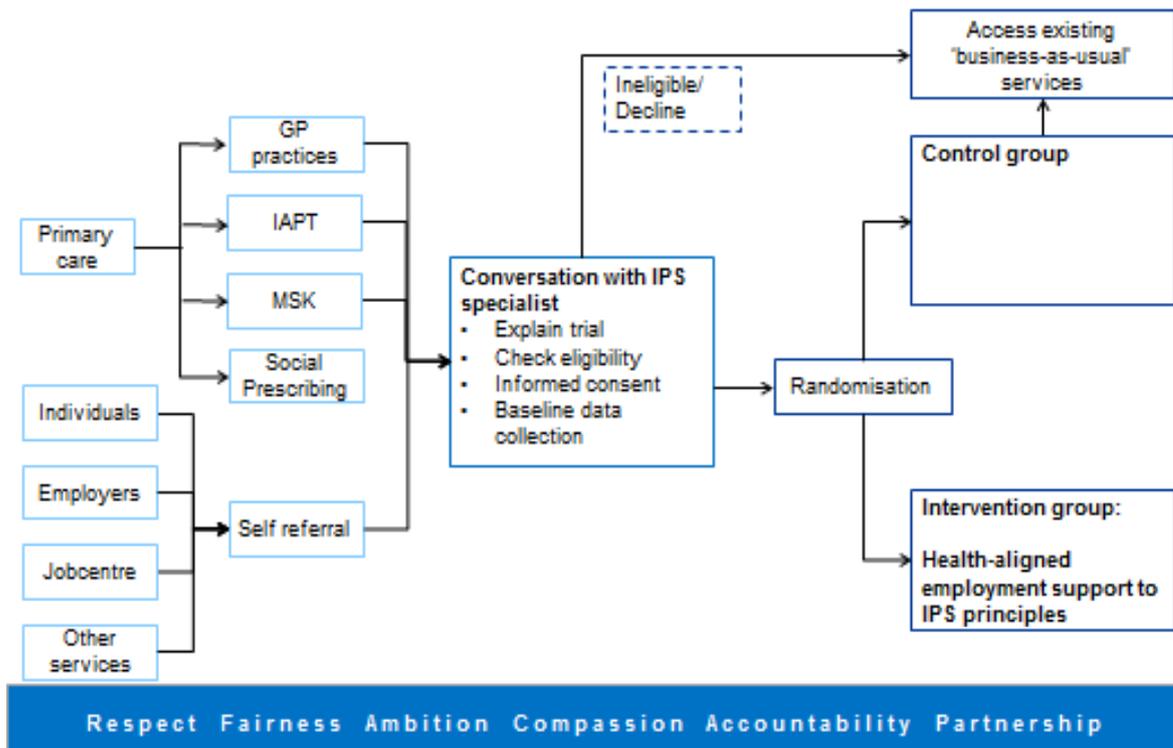
The trial will be available to individuals who have mild to moderate mental health issues or musculoskeletal problems, and are either unemployed and who want to or are able to work, or are employed but struggling to stay in work.

The Combined Authority has overall programme and governance responsibility for the trial but recognises that for it to be delivered effectively there needs to be a Clinical Commissioning Group (CCG) to lead the contracting on its behalf. There will be STP Chief Officer representation within this arrangement.

The STP is supporting the trial and has nominated Sheffield CCG to lead the procurement process.

This predicted ratio and local CCG commissioner knowledge will help to define the "lot" for each area, within the parameters of the overall programme, but will allow for local flexibility to meet the local services and market state in each area.

Health-led employment trial model



Five Year Forward View for Mental Health Transformation Funding for IPS

Nationally the 5 Year Forward View for Mental Health expects a doubling in the number of people with severe mental illness accessing Individual Placement and Support (IPS) to find and retain employment. NHS England is working with HEE and IPS specialists to develop a competency framework and workforce development strategy to support the planned expansion. Transformation funding will be available to STPs to expand access to IAPT. Bids likely to be requested in Q3-Q4 2017/18 with Funding allocated from April 2018.

3 Next Steps

- For the WHU Health Led Trial.** It is expected that the bulk of referrals for the Sheffield cohort will be made in Primary Care and via IAPT. The WHU will expect work to start by December 2017 and the procurement timescale is likely to reflect this. There is significant third sector and independent sector interest in bidding for this trial and the early intervention pilot. We expect SHSC involvement in procurement for Sheffield, given the referral pathways and possible co-location with IAPT/ Primary Care.
- For the Five Year Forward View for Mental Health Transformation Funding for IPS.** There is a North Region workshop on 26 September 2017 in Leeds. It is expected that this will provide information about the Transformation Funding bid and what will be required across an STP footprint. I have attended the Mental Health STP work stream and there is support to explore this together. We have also had an offer of support with bid writing from Sheffield City Region (SCR) colleagues engaged in the WHU Health Led Trial.

4 Required Actions

To note the potential impact on pathways, workforce and teams – including potential estates/emotional wellbeing hub space.

For EDG/BoD to be aware of the need to identify capacity to support the operational capacity of IAPT/Emotional Wellbeing service to build employment networks and partnerships given the current mobilisation of integrated IAPT.

To support the Trust in bidding with STP colleagues for transformation funding, building on the emerging infrastructure of the Sheffield City Region and Local Integration Board.

5 Monitoring Arrangements

Via EDG and TOG.

6 Contact Details

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Customer Case Study - DT

DT is 28 years old, supported within opiate services out of the Fitzwilliam Centre and has never worked. DT has a diagnosis of Bi-Polar disorder as well as substance misuse problems. Previously prescribed hydrocodone due to migraines, however, due to experiencing symptoms of bipolar disorder the medication caused rebound headaches and further mood disturbances resulting in a codeine dependency. Unfortunately his symptoms worsened and he found it difficult to access support.

DT is engaged in meaningful activities that include computer gaming, programming and DIY. DT has a night-time routine as his girlfriend works at a casino so he preferred the idea of night-shifts. DT wanted to work for Tesco and wanted the same days off as his partner. His Health and Wellbeing Coach has worked through sleep hygiene and grounding techniques for anxiety management.

Customer did not have a cooker at the start of the programme, one has since been obtained from an SYHA project. This has improved DT's wellbeing as his diet and health have both improved. Access to the cooker has enabled the customer to cook a wider range of food with a smaller budget and reduced the pressures within the household.

The customer has received benefit and debt advice as he had council tax arrears, budgeting problems and was awaiting PIP outcome. Our benefit and debt advisors are still working with DT.

Customer was supported with employability skills including: job searching, CV building and building on his strengths and transferrable skills. Following this support DT independently applied for a night-time Customer Assistant role at Tesco and was successful at obtaining an interview but unsuccessful at interview. DT's WEC discussed the possibility of a placement interview which was arranged through a BBO partner, Remploy. The store has provided feedback that he was the best candidate from the programme.

Since the work placement the customer has been offered a permanent job and is now working between 16-36 hours a week in a role that he wanted doing the hours that he wanted.

Prior to this job, the customer had never worked and was struggling with his health and wellbeing. As a result of BBO the customer is now in employment that is suited to his requirements and has drastically improved his health and wellbeing.