

## MUNICIPAL YEAR 2016/2017 - REPORT NO.

### MEETING TITLE AND DATE Health and Wellbeing Board

Director of

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<b>Agenda - Part: 1</b>	<b>Item: 9</b>
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**Subject:**

**LISTENING TO LOCAL  
VOICES ON MENTAL HEALTH**

**Wards: ALL**

**Cabinet Member consulted:**

**Approved by:**

### 1. EXECUTIVE SUMMARY

'Listening to Local Voices on Mental Health' is Healthwatch Enfield's recent thematic report on adult mental health services in Enfield.

For over two years Healthwatch Enfield sought the views of more than 220 mental health service users, professionals, and carers on their experiences of the support and services available within the borough. Through a robust methodology, the organisation gathered an evidence base and identified key themes that should improve the provision of mental health services across Enfield. These themes included:

- (1) availability of support
- (2) seamless integrated care
- (3) a person-centred approach
- (4) communications

Some 29 different Recommendations arose across these four themes, generated by the users of mental health services in Enfield. Featured in many of the Recommendations was an underlying constant: the need to use co production to implement these Recommendations and to develop mental health care in Enfield.

## **2. RECOMMENDATIONS**

Health and Wellbeing Board members are asked to:

- (1) endorse the Recommendations within Healthwatch Enfield's Report entitled "Listening to local voices on mental health";
- (2) endorse Healthwatch Enfield's proposal that the HWB commence co-production of an Action and Project Plan to implement the Recommendations to improve mental health services in Enfield;
- (3) actively consider what staff time and other support they can give to co-production of the Plan and its subsequent delivery;
- (4) support having the Report come to the December public HWB meeting, when specific pledges of staff time will be sought to co-produce an Action and Project Plan.

## **3. BACKGROUND**

Soon after its launch in late 2013, Healthwatch Enfield became aware of quite widespread concerns that existing mental health support and services were not satisfactorily meeting the needs of local people. The health and social care watchdog heard these concerns from colleagues in local voluntary and community sector (VCS) organisations, including members of our Reference Group who generously shared their views with Healthwatch Enfield also heard directly from local people at events, such as a consultation on the draft Enfield Mental Health Strategy in January 2014. In 2013 and early 2014, reports by the Care Quality Commission on wards at St Ann's and Chase Farm Hospitals also revealed a number of serious issues and the Care Quality Commission took Enforcement Action against St Ann's Hospital in January 2014.

With its explicit role as a consumer champion and having a wealth of information at its disposal (as outlined above), Healthwatch Enfield committed resources to engage with over 220 local people to ascertain individual's perception of mental health services in Enfield.

## **4. ALTERNATIVE OPTIONS CONSIDERED**

Not applicable

## **5. REASONS FOR RECOMMENDATIONS**

Healthwatch Enfield's report "Listening to local voice on mental health" amplifies voices of local residents and should be utilised to enhance mental health services provision within the borough to ensure the services are more person-centred and more effective in meeting individual needs.

Health and Wellbeing Board are being asked to endorse the Report, its Recommendations and means of implementation as the Board:

- (1) has the influence and decision-making powers to impact service design;
- (2) has strategic influence over commissioning decisions.

For more guidance check Enfield Eye: [http://enfieldeye/downloads/file/9380/report\\_writing\\_guidance](http://enfieldeye/downloads/file/9380/report_writing_guidance)

## **6. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS**

### **6.1 Financial Implications**

Not sought

### **6.2 Legal Implications**

Healthwatch Enfield has a statutory role to make people's views known in order to improve services.

## **7. KEY RISKS**

The risk of failing to implement the Report is that the future design and commissioning of services is not reflective of the evidence base contained within the "Listening to local voices on mental health" Report, making provision less effective, more costly to the wider health and social care system and unresponsive to individuals' needs.

A risk of developing a co-production approach to implementation of the Report is that public expectations of what can be delivered are excessively raised, compared to what is achievable. This risk would need to be mitigated during the co-production process by openness about any constraints, but also a genuine willingness by all parties to co-produce.

## **8. IMPACT ON PRIORITIES OF THE HEALTH AND WELLBEING STRATEGY**

**8.1** Ensuring the best start in life: – not applicable to the short, medium and long term actions for this priority, as outlined within Enfield Joint Health and Wellbeing Strategy 2014-2019.

**8.2** Enabling people to be safe, independent and well and delivering high quality health and care services:

Implementing the Recommendations of "Listening to local voices on mental health" would contribute to the delivery of high quality mental health services, help to improve service users' mental health, and promote a move towards parity of esteem within Enfield.

**8.3** Creating stronger, healthier communities:

Through amplifying the voices, perceptions and opinions of local people "Listening to local voice on mental health" demonstrates the role that community cohesion plays in improving health and wellbeing.

**8.4** Reducing health inequalities – narrowing the gap in life expectancy:

People with mental health problems tend to have poor physical health outcomes and a shorter life expectancy. Implementing the Recommendations in the Report would contribute to improved

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mental health within Enfield and therefore would contribute to a narrowing of one aspect of the life expectancy gap.

- 8.5** Promoting healthy lifestyles: – although not specifically targeting this priority, supporting people to have better mental health does give them a better foundation on which to build a healthier lifestyle.

**9. EQUALITIES IMPACT IMPLICATIONS**

Not applicable

**Background Papers**

The Report, 'Listening to local voices on mental health' is attached.