

New vision to make mental health everyone's business

Urban allotments, reading groups and computer training for the over 50s are just some of the initiatives featured as part of a new approach to public mental health and well-being.

'New Horizons' sets out a dynamic new approach to improving well-being for the whole population, aiming for the first time to create a powerful alliance that can target the root causes of poor mental health.

As well as health services, the response of local authorities and education will be critical. From schools to employers, and the

NHS to the criminal justice system, New Horizons makes mental health everyone's business.

One in six of us experience a mental health problem at any one time. Mental health care has been transformed over recent years, and services in England are now recognised as international leaders, but New Horizons aims to take that even further.

Care Services Minister Phil Hope said: "Better mental health and well-being is vital for a healthy society. People with mental health problems are more likely to do other things that

damage their health, such as have a poor diet, smoke or take drugs. So promoting good mental health is a key part of tackling many other health inequalities.

"Over the last ten years of the national service framework we've transformed mental healthcare but now we want to go further. Our aim is to build on recent achievements, whilst simultaneously taking the next logical step – helping to prevent mental health problems from developing in the first place. New Horizons will help us do this.

"We want to involve everyone in building mentally healthier communities, which is why it is important that people up and down the country tell us what they think about the ideas set out in New Horizons."

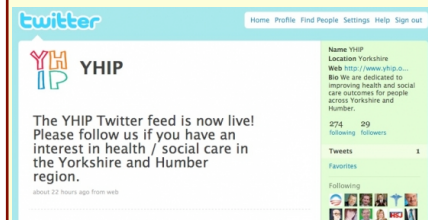
"Poor mental health is already believed to cost the economy £77 billion a year, with predictions that the cost in terms of GDP will double to over 10% by 2026."

To contribute to the New Horizon consultation please visit www.dh.gov.uk/mentalhealth.

Download the [full document](#).



Twitter feed is working a tweet!



You can now follow the latest news from YHIP on Twitter.

Twitter is a free internet service that allows people to communicate through the exchange of quick, frequent updates.

With an estimated 5 million users, it is one of the fastest growing social networking sites in the world and is particularly well used by the public sector and government to communicate.

Twitter enables us to post small snippets of information (or 'tweets') with updates on what's happening at YHIP that may be of interest to our followers.

The sheer number and range of people we can instantly reach across the UK with a single 'tweet' makes Twitter a very practical use of resources.

If you're on Twitter, why don't you follow us? You can access our feed at www.twitter.com/yhip. You can also see our feed embedded into the YHIP website: www.yhip.org.uk/twitter

Workforce Development: Mental Health Awareness

The requirement for mental health promotion in the field of criminal justice has been a key consideration for mental health services since The National Service Framework for Mental Health was published in 1999. More recently the Bradley report has once again repeatedly highlighted a critical need for staff working in the criminal justice system to be trained in the relevant issues. OHSC's Mental Health Awareness Training project is targeting these staff specifically and, to date, has delivered Mental Health Awareness Training courses and Mental Health First Aid (www.mentalhealthfirstaid.csip.org.uk) courses to over 500 staff from criminal justice system agencies across the Yorkshire and Humber region.

Training was commenced in May at Bishopgarth Police Training College in Wakefield. Four days in total were delivered to a broad mixture of staff from Police, Probation and Prison backgrounds. The high standard of support and cooperation provided by Sergeant Dali Kaur Simmons, her colleagues and the college created an excellent environment for the trainer to deliver and evaluate the material and content. This support was invaluable in the early stages of the project and cannot be understated. Sergeant Simmons described the one day course as "excellent training, the best in 17 years of policing. Everyone should get it."

Training has subsequently been delivered across the region and the support and facilities provided by our stakeholders have

been of a uniformly high standard. To date the training has received an overwhelmingly positive response and it is anticipated that additional training days around child and adolescent mental health issues will be added to the itinerary soon. In addition to these courses the project includes plans for a series of Masterclasses around specific issues to be hosted by OHSC but delivered by regional experts in fields such as Personality Disorder, Learning Disabilities and Mental Health Legislation.

Project Manager and Mental Health Trainer Andrew Stimpson, "There is a huge appetite for awareness training from staff across the region and a thirst for knowledge around a variety of issues that is not consistently provided by their native training departments. OHSC is committed to providing training support to all of the relevant agencies as a regional resource. The potential effect of this project on agencies engaged in work with offenders may prove to be profound. In addition it offers the opportunity for regional specialists to make connections and forge relationships with those agencies. This can only be of benefit to all of our agencies but more particularly to service users and members of the wider community who deal with and suffer as a result of the issues and lack of knowledge and awareness traditionally inherent in the criminal justice system."

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Developing child and adolescent mental health services for children with learning disabilities

Developing child and adolescent mental health services (CAMHS) for children with learning disabilities (LD) is part of Public Service Agreement 12, and therefore a high priority strategically. On an individual level, children and young people with a learning disability should not be denied access to services that all children get. Often this was the case, and on examination, a lot of this seemed to be about mainstream CAMHS staff feeling unsure how to work with a child with a learning disability and therefore felt they couldn't provide a service.

To help to increase the confidence and abilities of CAMHS workers, the regional CAMHS Programme commissioned York University to develop a new learning module: Learning disability and child and adolescent mental health. We used some money that had come into the region from the Department of Health via the National CAMHS Support Service for 'CAMHS Sustainability'. The commission was to develop and learning outcomes and set up the content to meet these aims, using various teaching and learning strategies. Alongside the original commission we built in a new one to develop the Virtual Learning Environment (VLE) around this course and see how it could be integrated.

The module is aimed at mainstream CAMHS staff working at all tiers of service, not at specialist LD/CAMHS workers. This is an important part of ensuring that children with learning disability do not experience discrimination when trying accessing services.

A module development team of key stakeholders and interested parties was set up and included health staff, University staff, third

sector staff, the CAMHS regional Programme and the Valuing People regional worker. From the beginning, members wanted a strong focus on service user involvement. Members of the development group worked very hard and put in a lot of effort to developing the programme, and some had extensive teaching input onto the course. Many thanks are due to people on the steering group who made this course a priority and really helped to shape it.

Places on the first run of the course (up to a maximum of 15), a pilot, were paid for as part of the commission with the intention that the module becomes part of the Continuing Professional Development (CPD) offer from York University.

A celebration day was held on the 17th July 2009 to give the students the opportunity to let others know what they had done on the course and what changes this had made to their practice. This ranged from teaching others in CAMHS about the needs to working more closely with LD workers, and thereby sharing expertise.

The evaluation of the course showed that students reported enhanced knowledge and insight, and that the reflective blog which required students to make connections between the module content and their practice was seen as positive. Students acknowledged that the service user theme was strong, but would like to see more service users involved in the delivery; earlier orientation to the University's electronic systems would be useful; and they would like a more extensive skills component

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Offender Health & Social Care Programme – Alcohol

The first project, October to April 09, was commissioned by the regional Home Office Government Office, in collaboration with YHIP, Department of Health, National Treatment Agency and Lifeline. The key aims of the Project were to scope the treatment needs of adult offenders with alcohol misuse problems, the available provision for these offenders, commissioning arrangements, application of the Models of Care for Alcohol Misusers (2006), and to provide recommendations for change to an integrated model of treatment for these offenders. The project involved collecting information from Prisons, Probation, Police, National Treatment Agency, local women offenders projects, A&E departments, Fire Service, alcohol services and Providers, PCT's and service users.

Methodology included data collection, literature reviews, focus groups, questionnaires, interviews. Key findings included: High levels of alcohol misuse, at harmful levels, amongst offenders, particularly younger male prisoners serving short sentences or on remand. The need for increased provision of interventions within offender settings (Police custody, Probation, Approved Premises, Prisons). Significant gaps in provision for 'alcohol only' users within prisons, and continuity in and out of prisons. The need for a co-ordinated regional response to alcohol misuse, and for the sharing of practices between localities and settings. The full report, executive summary and appendices, can be found on the YHIP website under Offender Health.

The current project, 09/10, will carry forward the findings and recommendations of the first report. The main aims are: To promote

the provision of Identification and Brief Advice (IBA) across a wide range of offender settings. To scope the needs of, and provision for, young offenders with alcohol issues. To develop a workforce plan, highlighting the training needed for those working with alcohol misusing offenders, including access to targeted IBA training for criminal justice staff. To review further the local commissioning arrangements for this client group, and recommend a best practice model. To review how localities are meeting the recommendations from key policies (including Lord Bradley, National Audit Office).

To date, the project manager has provided support visits to the region's prisons, to promote the use of IBA and assist establishments to comply with the new Prison Healthcare Indicator on alcohol. A review of the police station alcohol arrest referral schemes is almost complete, and the next stage is to provide support to Approved Premises and local women offenders' projects.

Julia Fazackerley, Project Manager, said "the current project is allowing us to build on the findings of the first project and provide a hands-on approach to assist our partners in addressing the evidenced gaps and inequalities. Since the project began there is a real feeling that the needs of this client group are being better understood, and the standardised pathways and interventions that are being put into place are leading to a more coherent regional model".

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Health Trainers in the Criminal Justice System

The NHS gave a commitment that from 2006, NHS Health Trainers would be providing advice, motivation and practical support to individuals in their local communities, DH, (2004). To date there are more than 3100 Health Trainers either trained or in training and have seen approximately 60,000 clients within this time.

The DH then furthered this by committing to ensure 'all' communities would have Health Trainers and Health Trainer Champions providing a voluntary service.

The development of this has been increased by the implantation of Health Trainer Champions within a prison setting.

There is increased statistical evidence that offenders, (community and prisons) are collectively some of the most unhealthy people nationwide, Wormith et al, (2007). The current data collected over the past few years indicates that there is higher than average rates of psychiatric illness, drug and alcohol problems, Hep B and Hep C, along with higher rates of chronic disease and long term conditions within the offender population in comparison to general communities.

The project currently being undertaken by Offender Health & Social Care is to improve prison and community health by training and employing offenders to be Health Trainer Champions, (HTC), in the Criminal Justice System, (CJS) and to commission two pilot Health Trainers within the Bradford and Wakefield districts; recruiting ex offenders or

people who are familiar with the system, giving them the knowledge to competently signpost and promote health within their communities.

There are many positive outcomes, for example:

- Once the Health Trainers are fully operational this will improve health awareness and support for offenders to access mainstream health and social care services, making them more self aware of services within these fields.
- The increased knowledge of sign posting offenders to health & healthier lifestyles will improve and ensure all advice and guidance given to clients is constructive and clear.
- HTC's will gain links with Community Health Trainers enabling them to offer quality aftercare services. This will enable offenders with any problems encountered to have immediate assistance which could have a possible link in reducing reoffending.
- Offenders will gain an accredited qualification on completion of the training.
- The project is now well underway, a pilot scheme has been under taken in HMP Everthorpe and we now have HTC's signposting within the establishment. The 13 other establishments within the region are all signed up and keen to implement the project and using collaborative working with Prisons, local PCT's and area Health Trainer Hubs giving us solid foundations to build a very successful and sustained project.

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YHIP Newsletter

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Regional Commissioning Framework to improve the mental health and emotional wellbeing of children in contact with the youth justice system

Each year in Yorkshire and Humber 25,000 children (about 5% of all 10 – 18yr olds in the region) have some level of contact with the Youth Justice System (YJS). Most receive a reprimand or a final warning, but about 1000 are given formal supervision orders with a youth offending team (YOT). The region also has 480 places in children's secure units, although at any given time at least a third of these are occupied by children from other parts of the country.

Studies have shown that the children with most contact with the YJS are three times more likely than their peers to have diagnosable mental illness. There are also high levels of substance misuse, learning disability, and self harm. Difficult family backgrounds, high levels of poverty, homelessness and school exclusion are very common and ensure that emotional and psychological wellbeing needs are also very high. 30% have been in local authority care.

Despite the widespread acceptance of these factors, the age for criminal responsibility in England and Wales (10yrs) is one of the lowest in the Western world; and we tend to focus far more on offending behavior than the welfare needs of the children involved, despite the fact that they are arguably some of the most vulnerable in our society. Consequently custody is still frequently seen as the only option despite the fact that it is expensive (100k – 250k per annum) and ineffective – 80% of young people released from custody are reconvicted within two years.

In March 2007, in recognition of these circumstances, the DH and YJB jointly produced a commissioning framework requiring each region to take a strategic review of the mental health needs of children and young people in the YJS, in order to ensure that a coherent and consistent approach could be put in place.

YHIP Offender Health and Social Care undertook a mapping exercise in autumn 2007, looking at access to mental health services in

children's secure units in the region. This established that existing resources and pathways were inconsistent and fell short of the guidance set out in the Commissioning Framework. In March 2008 Yorkshire and Humber Specialised Commissioning Group, agreed to support further work to develop a regional commissioning model, with funding made available from the YJB, the DH, and YHIP CAMHS.

The programme's products to date include:

- Initial mapping of commissioning and provision
- Set up of a widely representative Expert Reference Group
- Consultation with children in the YJS through a tender with CANA (a Barnardo's project)
- Development of, and consultation of a high level regional care pathway, service specification, workforce development plan, and quality indicators framework
- Recommendations for a regional commissioning model
- A well attended regional stakeholder conference
- Production of a cost analysis of MH unit in YOTs and secure settings, costs per child in order to establish some possibilities for a leaner approach to better outcomes for the children's Mental Health and emotional well being.

All of the above work has been based on the key principle that children and young people should be able to access the right level of advice and intervention for their mental health and emotional and psychological needs, at their earliest point of contact with the YJS, wherever they are in the region.

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Event - CAMHS are Changing

- Thorpe Park Hotel and Spa - Leeds
- 20th Oct 2009, 9:30am to 4pm.
- "Child and Adolescent Mental Health Services Are Changing"

A Free One Day Conference for Yorkshire and Humber.

A conference organised by the CAMHS Programme within the YHIP Children, Young People and Families Programme to focus on the service improvements occurring within CAMH services. This conference will be of interest to anyone interested in how CAMHS are changing, service improvement or children's services.

The conference will be chaired by Government Office, and have presentations from the

Strategic Health Authority, the National Advisory Council for CAMHS, the regional CAMHS Programme and have workshops run by people who have made service improvement in CAMHS.

- For more Information please [download the event flyer](#)
- To book a place at the conference please [download the event booking form](#)
- [Directions to Thorpe Park Hotel - Leeds](#)

Upcoming event

◆New Horizons Consultation Event

The Marriott Hotel, Leeds, 8th Oct 2009, 9am to 4pm

New Horizons: Towards a shared vision for mental health will form the foundation stone of the Government's vision for improving mental health services and population mental wellbeing in England. The Strategic Health Authority in Yorkshire and Humber are therefore seeking to support the national consultation process by facilitating a regional workshop and providing a regional response to the Department of Health.

[Flyer - New Horizons Consultation Event 8th October 2009](#)

To register for a place at this consultation event please download and complete the [booking form](#).

Return contact details can be found at the bottom of the booking form.

Would you like your programme / project to feature in the YHIP newsletter?

If so please contact **Michael Vinegrad** to submit copy and images for inclusion in the newsletter. email: michael.vinegrad@yhip.org.uk telephone: 07884 475466
