

Health and Wellbeing Strategy Report Update

TITLE: (BHWB Strategy Priority)	INCREASING EMPLOYMENT/ MEANINGFUL ACTIVITY MENTAL HEALTH RECOVERY AND EMPLOYMENT
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1. Background

The Mental Health Recovery and Employment service (MHRE) began in April 2018, it offers a more integrated way for delivering mental health recovery and employment services to patients. It will be closely aligned to community mental health services providing enhanced high quality specialist employment support to people within and stepping down from secondary care

2. Current Update on -: Activities, Progress and Developments?

MHRE began in April 2018. It is currently at a transitional stage. Although there have been a number of Job starts, the service is being monitored on the number of individuals gaining sustainable employment of over 13 weeks. As a result data will not be available until the end of quarter 2.

3. Current and Emerging Risk and Issues

1, Under the MHRE contract Individuals can be referred by a GP as long as the patient is on the practice SMI register. There is a risk that some individuals could instead be referred to Thrive Primary Care IPS randomised control trial commissioned by the West Midlands Combined Authority. This would result in individuals not receiving any IPS services they are entitled to, especially if they are selected to be part of the control group.

2, There is a risk of a delay in GP's confirming to providers that individuals are on the SMI register. This could result in a delay in individuals accessing the service.

4. What is your Ambition?

The programme will provide a Full Fidelity evidence based approach to employment support in line with the requirement of the 5 Year Forward View, which states that all CCG must commission Individual Placement Support services to support people into employment by 2020/21

MHRE provides IPS service a Full Fidelity IPS service following the 8 principles outlined by the Centre for Mental Health. these are:

- To ensure that no service user is excluded from the service
- Employment Support and treatment are integrated
- Job search is rapid and intensive
- Only minimal pre-work training is offered and that the focus should be on obtaining sustained employment.
- Service users are offered a Personalised Job search.
- IPS work with employers to develop links and support.
- Long term support in work, both before, during and after employment.
- Access to Welfare and benefits advice

4.1 What needs to happen to get there?

The MHRE service has been operating since April 2018, success of the service will be determined through monitoring KPI's and service user feedback.

4.2 What does this look like – Numbers, Impact & Outcomes?

<i>Quality and Performance Indicators</i>	<i>Performance Indicator(s)</i>	<i>Threshold</i>
Engagement in IPS service	Number of people engaged in IPS service (see note below)	2018/19 – 504 2019/20 – 560 2020/21 – 560
Paid Job Outcomes	Service Users in paid employment (reported under/over 16 hours per week and sustained for 13 weeks)	2018/19 – 120 2019/20 – 190 2020/21 – 190
Job retention	Number of people in existing paid employment who retain their employment	2018/19 – 12 2019/20 – 19 2020/21 – 19

5. How can the Health & Wellbeing Board Support you?

As the service has only been operating since April 2018, no support is required from the board at this stage. If, however, issues are identified in the future, support would be welcomed.
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6. What can the Health and Wellbeing Board Track and Influence?
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The Board could track the performance the project.
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