

Croydon's Integrated Mental Health Strategy Action Plan 2014-2019

1: Increasing access to mental health services

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead
Improve access and experience of services for BME service users.	CCG to work with providers to develop individual improvements and responses. SLaM and CCG to develop BME focused CQUIN to improve service user experience in this area.	Aug-14	Mar-19	MH Commissioning CCG
Reduce the use of inpatient settings for BME service users	<ol style="list-style-type: none"> 1: Develop Enhanced Range of Community Provision of services. 2: Understand reasons for continued pressure on bed days and inpatient care. 3: Working group to be convened to address issues of high levels of in patient use which would include a specific focus on the levels of use and length of stay of service users from BME backgrounds. 4: Invest in Early Intervention in Psychosis Services so that 50% of referrals receive a NICE approved care package within two weeks of referral 	Oct-14	Mar-17	MH Commissioning CCG
Increase the referrals and take up of talking therapies for BME service users.	Reprocurment of IAPT services with new service in place in 1st Oct 2017.	Apr-15	Apr-19	MH Commissioning CCG

Reduction in the use of overspill beds for inpatients in acute care	Improve discharge planning and processes to reduce length of stay	Oct-16	Mar-17	CCG / Croydon Council
Increase access rates and capacity of IAPT service	Additional investment of 700k into IAPT services for year 14/15 which will be recurrent. There is a review of current Voluntary Sector Talking Therapies provision and its potential IAPT inclusion	Apr-14	Apr-19	MH Commissioning CCG
Support MH Needs of offenders sooner	Recommendation from closing the gap and area to explore in 2015/16	Oct-15	Apr-19	Croydon Council

2: Strengthening partnership working and integrating physical and mental health

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead
Aim to reduce mortality rates for people with a serious mental illness	Enhance Crisis Care Options In Croydon	Jun-15	Apr-19	MH Commissioning CCG
Improve physical health support to mental health service users	1: Develop a Physical Health CQUIN with SLAM 2: Undertake Physical Health Pilot throughout 2015/16 3: Improve Smoking Cessation rates of People with Serious Mental Illness in 2015/16 4: Develop a Parkrun in the North of the borough with a focus on Mental Health. 5: Align the MH Strategy with Croydon CCG out of Hospital Strategy and SW London STP 6: Review of Primary Care Support	Apr-15	Mar-16	MH Commissioning CCG
Ensure Mental Health Community are included within Croydon's Improved Whole Population Health Promotion	Develop and deliver the Croydon Live Well Programme	Aug-15	Apr-17	Public Health Croydon Council
Ensure carers services are appropriate and fit for purpose	Recommission Carers Support and Counselling Services.	Apr-15	Nov-16	Croydon Council

To Reduce attendance at A&E's	<p>1: Develop closer working relationships with colleagues across urgent, emergency and MH care.</p> <p>2: Develop and Implement Crisis Care Concordant Action Plan</p> <p>3: Co-ordinate service delivery and funding for winter pressures and strategic residence</p> <p>4: Develop a service to core 24 standard.</p>	Apr-15	Mar-19	MH Commissioning CCG
Medication adherence	Increase knowledge and confidence of pharmacy services to support people with their Mental Health.	Jan-15	Apr-19	MH Commissioning CCG / CCG Pharmacy Leads
Ensure the partnership and governance has wide and appropriate membership to implement the strategy	TOR, governance, and mental health strategy action plan to be addressed and next MH partnership board meeting	Dec-15	Review Dec-16	MH Commissioning CCG

2: Strengthening partnership working and integrating physical and mental health

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead
Ensure all services provide good intelligence and that targets are clear	Work will begin on both voluntary and secondary care to ensure that each service is clear and we understand data that relate to its key areas. Additionally, each service area will have updated key performance indicators and service spec's. Each service area will be tackled individually and will involve engagement and consultation with all stakeholders and include views service users.	Jan-15	Apr-19	MH Commissioning CCG
Secure long term provision of the London Street Triage Service	<ul style="list-style-type: none"> 1: Street Triage service has been secured 2: Service is monitored monthly by 4borough commissioners 3: 2nd Wave of promotion currently being planned to increase take up of service by professionals including MET police. 	Sep-14	Dec-16	MH Commissioning CCG

Section 3: Starting early to promote mental wellbeing and prevent mental health

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead
Ensure the voluntary/third sector have an increased understanding of mental health preventative measures and primary care	Improve the co-ordination of Voluntary Sector Services and update the sector on current commissioning intentions leading to joint work to explore opportunities to develop services in line with local current need.	Sep-14	Mar-17	MH Commissioning CCG
Deliver timely advice and signposting to reduce the risk of escalating problems, and improve availability and access to universal services	1: Develop Early Intervention Services 2: Develop Early Detection Services	Apr-15	Mar-17	MH Commissioning CCG
Ensure that Postnatal depression services are effective and can respond to expected increase in demand over the next 10 years	We will review postnatal services as a project and involve service users in this work. From this review we will share the results and recommendations with the partnership board.	Mar-16	Mar-18	MH Commissioning CCG
Family Therapy	Access to family therapy identified in Closing the Gap, service area to be explored further in 15/16	Jan-16	Apr-19	MH Commissioning CCG
Peer support	Increase the range of peer support available in Croydon and the number of experts by experience supporting other service users	Jan-15	Mar-18	MH Commissioning CCG / Voluntary Sector

<p>Increase promotion and support for self-care. Increase choice and control of people using mental health services. Including increase of decision making.</p>	<p>All of the service reviews and future commissioning decision will include feedback from service users. Contracts and revise service specifications will include KPI's and targets for increasing choice and control of service users.</p>	<p>Mar-17</p>	<p>Mar-19</p>	<p>MH Commissioning CCG / Croydon Council</p>
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4: Improving the quality of life of people with mental health problems

Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead
Increase the choice and control of people using Mental Health services, through increased personalisation and using personal care and support planning to put people in control.	Croydon will work towards delivering Personalised Packages of self-directed support that meets assess need, that have a strong focus on promoting independence, recovery and resilience	Mar-17	Apr-19	Croydon Council
Ensure community -based support is available	1: Implement phase 1 & 2 of the 4 Phase Model. 2: Implement Phase 3 - Development of enhanced Primary Care Support	Mar-17	Apr-18	MH Commissioning CCG
Front line staff not equipped to deliver personalised training	Funding has been secured to deliver borough wide mental health awareness and first aid training to front line health and social care workers in Croydon to enhance service and experience of services by MH service users	Feb-15	Dec-15	MH Commissioning CCG

Promote the use of direct payments	Roadshows run by Direct Payments team promoting APS payment cards – attended by MH staff	Mar-16	Apr-19	Croydon Council
Enhanced Support for with MH who is a victim of crime	To work in close collaboration with the Community Safety team at Croydon Council	Oct-15	Mar-17	Croydon Council / London MET Police
Reduce Restraint	Identified as an area within the Closing the Gap report - to be explored 15-16 and as part of the ongoing AMH service development with SLaM	Nov-14	Mar-19	MH Commissioning CCG / SLaM
To coproduce a self-harm strategy with CYP, parents, education, camhs, voluntary sector, Croydon University Hospital and Commissioners to reduce the number of CYP attending ED in crisis.	To pull together an task and finish group to scope the issue <ul style="list-style-type: none"> o Numbers presenting to services o Prevalance rates o Type of presentations o Wider concerns Produce an action plan and timelines for the LTP submission to NHSE	Oct-16	Oct-17	CAMHS Commissioners

4: Improving the quality of life of people with mental health problems (cont)

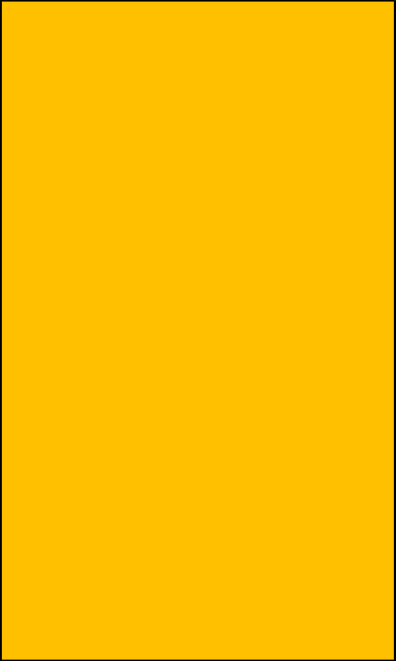


Aims of Integrated Mental Health Strategy 2014-2019	Actions	Expected Timescale start	Expected Timescale finish	Lead
Develop personal health budgets	It is a government priority to increase choice and control in public services. Guidance is expected to be developed by NHS England on how Personal Health budgets will be implemented and this project area will be developed in the future	Mar-16	Apr-19	CCG - Senior Programme Lead PHB
Review Reablement Service Pilot	Current pilot is being evaluated and a review of which will inform commissioning decisions.	Jan-15	Apr-15	MH Commissioning CCG
Review of Mental Health Day Services	A full review of Mental Health day services.	Mar-16	Apr-19	Croydon Council
Develop a housing and housing related support action plan	The Mental Health Diagnostic has identified that housing is a major issue which impacts on inpatient length of stay. A working group have been developed to explore the recommendations further and develop an action plan. This group will include representation from housing department.	Nov-16	Apr-17	MH Commissioning CCG
Review employment support services	A full review of council employment services is planned and will need to include closer working arrangements with established mainstream services, Job Centre Plus, Disability Employment Advisors information and signposting services.	Apr-16	Apr-17	MH Commissioning CCG

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	Outcome Measure	RAG Rating
Update October 2016		
<p>CQUIN agreed and in place for 2016/17 to focus on BME engagement. This will improve SLaM's understanding of working age BME patient experience when accessing to acute inpatient services. There will be a qualitative review and audit of patient's experience of SLaM inpatient and community services.</p> <p>This will be completed using focus groups facilitated by the Community Development Workers (CDW) and/or a wider group of service users, in partnership with local BME groups.</p> <p>SLaM to make recommendations for best practice approaches in reducing higher admission rates to acute in-patient services for BME populations as compared to their counterparts. Outcomes will be available in Q4 2016/17 and will include reducing the length of stay.</p>		
<p>1: Investments and enhancements (Oct 2014-March 2016) made in the following community teams as part of the Adult Mental Health Model (AMH) through 2015/16; Assessment and Liaison Teams & Promoting Recovery CMHT Primary Care MH Support Clozapine Initiation Extension Home Treatment Team Personality Disorder Service Home Treatment Enhancement & DBT</p> <p>2: Despite the investment in community settings there has been increased pressure on bed days and length of stay. As a result of this pressure there has not yet been a reduction on inpatient use. To address this a MH Diagnostic has been jointly commissioned by both CCG and SLaM to explore the reasons why in detail. The Diagnostic has now been completed on the 25th Sept.</p> <p>3: An Action Plan will be developed that seeks to bring stakeholders together to address recommendations and findings in the report. This report and working group will convene between Oct 2016 and March 2017 to achieve the recommendations in the diagnostic.</p> <p>4: Investment in Early Intervention psychosis services has occurred and the service is now equipped to meet this standard. In M5 Croydon's performance to date is over 60% of people identified as having a first episode have received treatment within two weeks,</p>	<p>To reduce health inequalities within the borough, to address the impact of alcohol, tobacco and substance misuse, self-reported wellbeing, to increase social contact for social care clients and carers</p>	
<p>IAPT services expanded significantly in 2015/16, however due to a change in the financial envelope available to the CCG, the IAPT service investment has been temporarily halted. This has meant that the proposed approach to increase BME engagement has not been possible and this is now being taken forward with ongoing engagement with local BME groups. Increasing the access of BME service users using IPAT will be a key consideration for the re-procurement of IAPT with a new holistic service anticipated to be running from 1st Oct 2017.</p>		

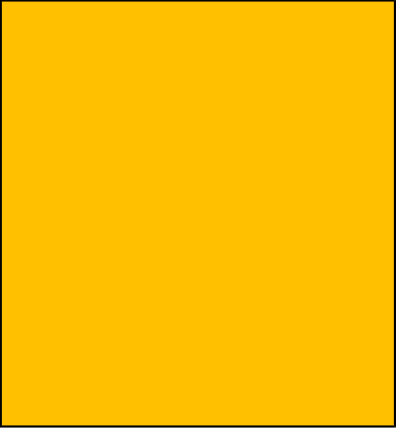
<p>Levels of inpatient care remains high with significant pressure on bed usage. The working group will develop and follow an action plan to lead on the findings of the MH diagnostic with the overall aim of reducing inpatient usage and length of inpatient stay.</p>		
<p>The CCG is currently working with SLaM to agree the access target for 2016/17 in response to revised levels of funding available and progress made in 2015/16. Over the last two years the IAPT service has expanded considerable from 3.75% in 2013/14, 6.9% in 2014/15 to 10.37% in 2015/16. Increasing IAPT remains a key component of the 5 year forward view.</p>	<p>To improve access to better mental health services and treatments</p>	
<p>SLAM have expanded their Criminal Justice MH team to provide MH staff in Croydon Custody suite which diverts people to help and support at the earliest opportunity.</p>	<p>To improve access to better mental health services and treatments</p>	

h	Outcome Measure	RAG Rating
Update October 2016		
<p>The Crisis Line is operational from December 2015. In Qtr1 2016/17 it took 376 calls from Croydon users and typically takes 35 calls per week. The service is evaluating currently numbers of people potentially diverted from A&E.</p> <p>SLaM are currently carrying out a review of Crisis Home Treatment Teams with the aim of working toward a revised 24hr HTT team which is due to start in October 2016. Detail on the intended outcomes and service delivery models will follow completion of the review.</p> <p>Place of Safety - The 4boroughs, (Lambeth, Southwark, Lewisham, Croydon) Local Authority Leads are working to centralise the place of safety to one site, across all 4 boroughs led by each Local Authority, with a proposed start date of November 2016.</p>	To increase service users confidence in a Healthy life expectancy . To narrowing the life expectancy gap associated with Mental Health Service users	
<p>1: Physical Health CQUIN in place for 2016/17. These CQUIN will risk assess and develop clear pathways for interventions and signposting for all cardio-metabolic risk factors.</p> <p>2: Physical Health Pilot took place through 2015/16. Two nurses were temporarily employed at Mind. The nurses provided outreach PH checks and smoking cessation advice on a twice weekly basis</p> <ul style="list-style-type: none"> • They provided a total of 7 sessions over a 4 week period. They saw 35 people with the nurses offering physical health checks which included BP, height, weight and waist measurements as well as dietary/weight management advice. The results of the pilot are being considered to inform future commissioning plans. <p>3: Smoking Cessation - The CCG and Public Health worked together to expand the Mind smoking cessation service and provide additional training over three levels o to 56 staff. .</p> <p>4: Continuing to work with local authority to progress development of Parkrun. Team of Volunteer co-ordinators has been developed and a course has been identified with Council approving its use. event directors now need to be confirmed.</p> <p>5: Develop links between the Transforming Adult Care Teams and integrate MH into MDT's, Drug and Alcohol services, Urgent Care reviews and out of hospital strategy.</p> <p>6: Public Health and the Local Authority lead on the commissioning of the Active Minds Service which supports with MH problems become more physically active.</p>	Improve health and wellbeing through promotion of sports, participation rates in sporting activity, % adults meeting at least minimum levels of physical activity, adult obesity rates	
<p>Croydon's Public Health team have led on the Croydon Live Well programme that is now operational. This includes an online platform 'Just be' which focuses on behaviour and MH wellbeing. The service signposts to existing health services commissioned locally, including where people are eligible, with a more intensive offer. Currently the service is being developed further to explore how it can include a targeted offer for people with severe mental illness, (SMI).</p>	Tackle health inequalities within the borough	
<p>The Carers service and Counselling services have been recommissioned. The Counselling service will prioritise any carers referred for its service.</p>	Self-reported wellbeing, social care carers with as much social contact as they would like	

<p>1: The Hospital A&E Mental Health Liaison Meeting now occurs monthly, and has been operational since July 2015. membership has been developed and now includes input from LAS, Police and Social Work beginning to attend regularly. The group will be developed to lead on the Crisis Care Action Plan. There is current pressure on the MH referrals at CHS, and the number of patients breaching the 4 hr target. This is subject to a detailed action plan for improvement between CCG, SLaM and CHS.</p> <p>2: The Crisis Care Concordat Action plan has been reviewed and accepted as Dark green (improving) by DoH/Mind, and is available online http://www.crisiscareconcordat.org.uk/explore-the-map/</p> <p>3: In 2014/15 the group worked together to identify and secure best local use of Winter resilience funding which led to the introduction of a second liaison Nurse throughout 2015/16. The group continues to support collaboration including current development and sharing of escalation protocols and improvements to data in order breach's are measured accurately by both CHS and SLaM using same criteria.</p> <p>4: Croydon undertaking a 4-borough pilot to remodel the liaison psychiatry services in line with the core 24 model.</p>	<p>To reduce attendance at A&E</p>	
<p>The CCG is currently undertaking a pilot project aiming to reduce relapses resulting in attendance/admission in secondary care. This is to be achieved by upskilling community pharmacy staff with training, specifically aimed at Health Champions in Healthy Living Pharmacies (HLP) to identify people that may benefit from greater help and support with their medicines. Addressing barriers to conversations, signposting to local services and escalating concerns. The project also aims to foster better relationships between professionals that support people with SMI, for example CMHT, community pharmacy and practice staff. This project will run from April 2016-March 2017.</p>	<p>Tackle health inequalities within the borough</p>	
<p>Complete - the Mental Health Partnership has been meeting quarterly since Dec 2014 with agreed terms of reference and diverse attendance including service user representatives, carers, Voluntary Sector, SLaM and Primary Care. The partnership needs to strengthen its role to continue supporting the progress made by developing a rolling action plan jointly owned and supported by all members.</p>	<p>To ensure there are clear Governance arrangements in place which can underpin the deliverance of the strategy.</p>	

h (cont.)	Outcome Measure	RAG Rating
Update October 2016		
<p>A Technical group has been set up to improve data reporting from SLaM and ensure there is a joint understanding between the CCG and SLaM of key reporting metrics.</p> <p>There has been an initial meeting with voluntary sector providers around refocusing the service provision. Part of this work will entail updating service specs and key performance indicators.</p>	To manage CCG & Council finances in a prudent manner	
<p>1: Complete - the 4Borough 24/7 MH Crisis Support Line has been developed and is in place since Dec 2015, it formally replaces the street triage pilot and is now an ongoing established service. It has been promoted throughout the borough at service user groups and the MH partnership.</p> <p>2: Detailed service reports are provided each Quarter and SLaM have an action plan to continuously improve the service. In the last two qtr's (Qtr 4, 2015/16 and Qtr1, 2016/17) the service took 429 and 504 calls in Croydon respectively.</p> <p>3: A second wave of promotion is currently being planned to increase the usage from the Police.</p>	To reduce crime in partnership with local police	

problems	Outcome Measure	
Update October 2016		
<p>Voluntary Sector Workshop delivered in September 2016 to providers and members of the Partnership Board. The workshop covers the Commissioning Intentions and priorities for 2016/17. Feedback is being collected and will be sent to providers and MH Partnership Members, and will lead to further actions being developed. A more detailed action plan will be developed following dialogue with providers and next steps.</p> <p>Tie in with Together for Health project leads to develop strategy for increasing understanding of preventative measures and primary care among voluntary sector organisations.</p>	To help local families at an early stage	
<p>1: Early Intervention Psychosis Services had extra investment in 2015/16 and service was reconfirmed to be able to capture referral times to treatment times and improve on the average wait. The service has been reporting against the national standard since it came into effect in April 2016, and is currently supporting over 50% of patients with a NICE approved care package within 2 weeks of referrals. The service Year to Date has seen 105 referrals to the service, 35 referrals were eligible for and 24 were seen within two weeks. this is currently 61.5% against the 50% target.</p> <p>2: Coast Service has been developed (April 2015) to support early detection of patients at risk of developing psychosis to intervene before a first episode occurs.</p>	To increase access to better mental health services and treatments	
<p>The CCG is currently participating in a bidding process to improve community access as part of the Implementing the NHSE 5year forward view.</p>	To increase access to better mental health services and treatments	
<p>Provision of Family Therapy has been included in the expansion of Early Intervention in Psychosis services to ensure that the service can meet holistic needs, the staffing capacity has been in place since April 2016.</p>	To help families at an early stage	
<p>The Mind Service simplified its referral process in order to increase referrals, and uses a mixture of paid staff and volunteers, many of whom are ex-service users to deliver its service, The Hub. The service produced an evaluation in November 2015 which demonstrates its effectiveness in improving mental health and reducing the number of GP visits, use of secondary mental health services and hospital admissions made by regular service users. The service reduces isolation and loneliness, helps with form filling, and benefits advice, as well as providing an affordable hot meal.</p> <p>The Imagine service has User-led groups which have a number of trained members in peer support. Along with staff they are supporting around 100 group members with 1-2-1 support meetings. The areas/activities being covered are areas such as housing/healthy eating/ education/volunteering & employment. In terms of people's well-being this is regularly being measured through the Warwick Edinburgh questionnaire. Plans in place to produce a detailed report in early January looking back on the year.</p>	To prevent people from becoming isolated	

<p>Commissioners are seeking to ensure patient experience is recorded for contracted services in 17/18, so that we can better monitor patient satisfaction with services. Continued carer and service user representation at the Mental Health Partnership Board meetings.</p>	<p>To reduce health inequalities within the borough, to address the impact of alcohol, tobacco and substance misuse, self-reported wellbeing, to increase social contact for social care clients and carers</p>	
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	Outcome Measure	RAG Rating
Update October 2016		
Awaiting update	Self - reported wellbeing, & social care clients and carers with as much social contact as they would like	
<p>1: The AMH Model phase 1 & 2 have been implemented throughout 2015/16. This has resulted in the following enhancements to the community provision available, Assessment and Liaison Teams & Promoting Recovery CMHT Primary Care MH Support Clozapine Initiation Extension Home Treatment Team Personality Disorder Service Home Treatment Enhancement & DBT</p> <p>The CCG, SLaM and Mental Health Strategy Steering Group have developed an AMH dashboard which is recorded the impact of the model. Further work to refine this is being undertaken from the MH Technical group to ensure the dashboard accurately shows progress and outcomes of the model.</p> <p>2: The CCG is working on a bid to NHSE for primary care funding which will strengthen primary care practices, to further support patient with enduring and complex mental health needs in a community setting. This model aims to develop capacity aims to facilitate the flexible easy in/ easy out pathway between secondary, community and primary care. A more detailed action plan for implementation will be developed if bid is successful.</p>	To prevent people from becoming isolated, provide better access to mental health services and treatments, self-reported wellbeing, % social care clients and carers with as much social contact as they would like	
<p>SLaM are delivering No Health Without Mental Health Training across Croydon. To date; 26 Sessions have taken place 240 People have been Trained (by July 2016) Training continues until March 2017, the training provider will deliver 60 sessions. In phase 2 SLaM will also deliver sessions in Motivational Intervening and Train the Train Packages. Participants are currently being recruited for the phase 2 training sessions.</p>	Right people in right jobs	
	Task all council departments with improving health of residents	

<p>Croydon Council are now offering pre-paid cards as the default option for anyone wanting a direct payment. People using this system no longer need to submit quarterly returns and the Council has access to review how funding is being spent directly. 20 people have signed up and it is open to all service user groups.</p>	<p>To prevent people from becoming isolated, provide better access to mental health services and treatments, self-reported wellbeing, % social care clients and carers with as much social contact as they would like</p>	
<p>Awaiting update</p>	<p>tackle disability hate crime to increase the percentage of social care clients who feel as safe as they want and are satisfied with care</p>	
<p>The 15/16 SLaM CQC report identified reducing restraint as an area of improvement required for SLaM in 16/17. SLaM presented at the June 2016 Partnership board to discuss the progress they have been making on Reducing Restrictive Interventions (RRI). This included the national guidance and context and SLaM's internal approach. This includes a change from reactive to proactive engagement with patients to better manage risk and interventions. The plan includes training to be delivered across 52 inpatient wards, and covers de-escalation as preferred intervention. An audit was being carried out by SLaM in June 2016 and the results to be shared with the December partnership for review and ongoing monitoring of progress. the partnership recommended that ethnicity stats be included when recorded use of restraint.</p>	<p>To commission for the best hospital and healthcare services fro Croydon</p>	
<p>The deliberate self harm strategy is now included in the CAMHS Local Transformation Plan refresh, within Strengthening Croydon's provision of Crisis Care (Tier 4) and recognised as part of Croydon's Crisis Concordat. The CAMHS Crisis Care team has been delivering a service with extended hours (weekday till 10pm and 9-5pm on a Saturday) from August and data is being collated to develop and support further understanding of self –harm presentations, to inform strategy. Initial findings will be shared to support scoping by Task & Finish group in November led by Crisis Care Team Clinical Psychiatrist Lead.</p>	<p>To commission for the best hospital and healthcare services fro Croydon</p>	

	Outcome Measure	RAG Rating
Update October 2016		
A PHB provider has now been appointed and started to take over the management of existing clients on PHB. PHB's are currently offered to patients that are eligible for Continuing Healthcare. There are currently around 15 PHB's in operation. The PHB Policy is currently being developed and further roll out of the newly commissioned service will commence in January 2017.	To prevent people from becoming isolated, provide better access to mental health services and treatments, self-reported wellbeing, % social care clients and carers with as much social contact as they would like	
The University of York reviewed the Reablement Service in February 2015 and found the service had a positive impact on the service users Mental Health and generated good outcomes. The service continues and the report will be considered when formally reviewing the service.	To manage CCG & council finances in a prudent manner	
Following the development of the Joint Working Board, this review will now be jointly taken forward by both the CCG and Local authority.	Reduce social isolation and enable re-ablement and recovery	
A working group is being convened with an action plan which will include representation from housing. This group will be meeting regularly from Nov 2016 onwards.	To increase access to mental health services for those service users living in emergency accommodation	
Following the development of the Joint Working Board, this review will now be jointly taken forward by both the CCG and Local authority.	To increase employment and reduce poverty across all communities	