



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

REPORT TO CABINET MEMBER FOR HEALTH AND COMMUNITIES

4 July 2022

Report of the Director - Public Health

Mental Health Training Addition - mental health skills based training

1. Divisions Affected

Countywide

2. Key Decision

2.1 This is not a Key Decision

3. Purpose

3.1 This report seeks approval from the Cabinet Member for Health and Communities to:

- a) develop and deliver two different mental health training sessions which will complement the existing provision. One training session is a brief skills-based mental health conversation training for staff and volunteers across Joined Up Care Derbyshire and the second is similar training for Derbyshire residents including parents
- b) the allocation of £0.084m of the Contain Outbreak Management Fund to Derbyshire Community Health Services (DCHS) by way of grant for this purpose.

4. Information and Analysis

4.1 Background

The Covid19 pandemic has led to a significant increase in the number of people experiencing mental ill health with an additional estimated 60-

70,000 people in Derbyshire County requiring some support. Related to the pandemic, there have been increases in the risk factors which contribute to emotional distress, such as social isolation, financial difficulties, employment issues and anxiety over catching Covid-19.

- 4.2 Mental health need is emerging at various points of contact in the community, call centres, council departments and health settings and there has been a locally reported increase in crisis presentations.
- 4.3 Some population groups have been more adversely impacted by the pandemic, these include children and young people, parents, older adults, people with a disability, clinically extremely vulnerable, LGBTQ+ and people from an ethnic minority. The 2021 Derbyshire My Life My View survey found that 51% of young people would ask their parents for help or information with issues such as mental health and 49% their friends, indicating that expertise needs to extend beyond 'professionals'.

4.4 Current situation

Public Health commissions universal mental health training for staff and wider workforce, with a focus on population and preventative approaches to mental health. This training role is offering useful and accessible training for colleagues across Derbyshire. Currently, Public Health offers three core universal training offers for volunteers and staff and has committed to the continued commissioning of training which delivers competencies as part of a revised and interconnected framework to provide the most effective skills to people in different roles.

- 4.5 Public Health is driving forward a system-wide focus on population mental health, a preventative, non-medicalised whole system approach to mental health. The current universal staff training offers from the Public Health Mental Health Team, to which there are some limits, are:
- Mental Health Awareness and Suicide Awareness and Prevention training are valuable and provide a key mechanism in culture shift around anti-stigma – but do not cover practical skills on how to begin and have conversations about mental health. It has been agreed that these will be combined and recommissioned from 2023.
 - Mental Health First Aid – A key course, but it requires a 2-day commitment. This may be more intensive than some people feel they need for their role, or employers can/will support.

4.6 Complementary universal staff training system-wide offer

Joined Up Care Derbyshire has committed to the ongoing commissioning of the Quality Conversations Programme, a programme linked closely to Public Health. Quality Conversations has become a well-respected skills-based conversation training approach which is being further adopted

across the system to enable a shift in organisational culture and a way of working to be more holistic at the point of contact. The focus of the skills-based learning is on person-centred conversations and supporting people to make changes that are important to them. It is not focussed on specific skills for conversations about mental health, which feedback suggests staff would value

4.7 Identified training gap

It has been identified that in addition to the existing training offers, there is a need for skills-based training around having confident and asset-based conversations about mental health for staff, volunteers and Derbyshire residents. This will support a preventative and population health approach to mental wellbeing, any place at any time.

4.8 A training gap has further emerged through the pandemic. Feedback from frontline staff, such as those in Live Life Better Derbyshire, Council Call Centres, Social Prescribers and Community roles, has indicated that they are encountering more people with, and higher levels of, emotional distress. These groups can potentially play a significant role in promoting preventative and positive mental health. The 2021 Derbyshire My Life My View survey also highlighted that young people commonly reach out to friends or parents when experiencing mental distress. This feedback and evidence highlights the importance of a whole community approach to having Quality Conversations about mental health.

4.9 A training offer would also complement the work of the system-wide population mental health steering group that is working to embed a population mental health approach across the system and as a golden thread throughout. Supporting staff to attend this training would be an action that organisations could take as part of buy-in to a population mental health approach. Participation in training would provide attendees with the knowledge, confidence and skills to be active partners in taking a population approach to mental health. Engaging with communities to shape and participate in this training would be positive for building relationships and trust and for supporting community capacity and assets.

4.10 The proposed training would be an in-house developed training offer, enabling links to existing local programmes, the system's training gaps and would consider developments such as e-learning and accreditation. The content would be co-produced with staff teams and local people so it meets the needs of the system. The training would align with the 'Quality Conversations' programme to build on the Derbyshire system's established communication skills programmes. The funding would enable the delivery of 20 full day and 40 half day workshops to 1,600 staff and

volunteers via face-to-face or virtual sessions. In addition, community wellbeing style workshops and sessions targeted at people in the community and parents would also be delivered. The precise split of the different types of workshops is to be fully-scoped as part of co-produced development.

4.11 Proposed additional skills-based training offer

The proposed training will cover skills to:

- open-up conversations about mental health, in non-mental health settings
- have helpful conversations about mental health and wellbeing, in non-mental health settings;
- wrap-up the conversation helpfully, including signposting to mental health services and other services that can support mental wellbeing.

Staff training sessions would be three hours long with significant time for skills-based practice in break-out rooms.

4.12 Proposed model for staff training delivery

The proposal is that this training offer is linked to Quality Conversations and is managed as part of that programme, as a Quality Conversations Plus module. The Quality Conversations model is to work with providers able to offer interactive training on conversation skills training. The training will draw on a system-wide team to support. Furthermore, Quality Conversations training was co-designed by Public Health, and is currently being accredited, made into an e-learning package to be used in local universities as a foundation course. This proposed add-on course could have the same reach/impact.

4.13 Proposed model for resident sessions training delivery

This will be linked to and managed as part of the Quality Conversations programme but will be delivered as an independent strand entitled Quality Conversations in Communities (or similar). Work will be developed to include engagement with local community groups, to deliver community conversation events that offer opportunities for people to develop their skills around having mental health conversations. Communities will co-design the training with the delivery organisation. A budget for training development will be included.

4.14 Evidence

4.15 There is strong local evidence for this practical skills and conversation training gap, through training requests received from organisations by the Public Health mental health team for training from internal and external partners many of which we responded to with bespoke sessions during the pandemic. Demand is also highlighted by the update of the Public

Health Wellbeing Counsellor post (community and voluntary sector) which has been operational since December 2021 and already has signed up over 160 employees/volunteers in need of, or interest in, wellbeing support. A recent Quality Conversations Derbyshire Dialogue session highlighted, that the general public who attended would like non-mental health staff to have increased skills in conversations about mental health, in non-mental health settings.

- 4.16 National research highlights the need for this skill-set, across a range of settings – not just mental health services. For example, a recent MIND survey identified that 40% of GP appointments now involve the topic of mental health (MIND, 2018). Peer-reviewed research highlights the benefit of staff having skills in mental health conversations. As one study suggested, recognising this (mental health needs) and offering supportive, validating conversations can help contain distress and activate patients' own coping resources (Mitchell et al. 2011). A systematic review of 19 studies of mental health training programmes for public sector workers suggested they resulted in increases in knowledge and confidence, with short-term positive behaviour changes (Booth et al. 2017). The authors recommended that training include practical role play approaches and aim to provide generic skills that could be used in multiple situations; this is a key part of our proposed intervention.

5. Consultation

- 5.1 The pilot training offer will be developed with input from a Healthwatch survey set up to specifically support this project. The general public have been asked for their views to help shape the training offer will include experiences shared.
- 5.2 The training will be piloted with a range of staff teams from local organisations. Discussions are underway with one DCHS team and two other services. It will be co-produced with staff based on this learning by the DCHS Psychology team.
- 5.3 This paper has included provision for engagement and input from experts by experience, which will be a core component of developing the programme, evaluating it and iterating it. Listening to the voices of our local people and communities with lived experiences will help to shaping up this training support for our staff, based on what our communities tell us is needed.

6. Alternative Options Considered

- 6.1 Do nothing. This would miss the opportunity to increase Derbyshire colleagues, volunteers and residents skills and confidence in discussing mental health.
- 6.2 Commission an off-the-shelf mental health training offers that might be deemed suitable, however research has not identified an appropriate training offer. If a suitable training offer were available nationally, it would be much harder to tailor the offer to our specific system needs such as not duplicating existing offers.

7. Implications

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

8. Background Papers

- 8.1 None identified

9. Appendices

- 9.1 Appendix 1 – Implication

10. Recommendation(s)

That the Cabinet Member for Health and Communities:

- a) Approves the development and delivery of two different mental health training sessions which will complement the existing provision. One training session is a brief skills based mental health conversation training for staff and volunteers across Joined Up Care Derbyshire and the second is similar training for Derbyshire residents including parents
- b) approves the allocation of £0.084m of the Contain Outbreak Management Fund to Derbyshire Community Health Services (DCHS) by way of grant for this purpose.

11. Reasons for Recommendation(s)

- 11.1 There is a training need across the Joined Up Care Derbyshire workforce, and gap in the current training offer. The pilot work and peer-reviewed evidence suggests the training proposed will meet this need.

11.2 Quality Conversations is a well-respected accessible skills-based programme, that Public Health co-created and continues to steer, so it fits to work with the programme to commission and deliver this training

11.3 This model of commissioning and delivery means the programme aligns with our local priorities and grows our local assets and capacities. These conversations will be happening within Derbyshire, so local staff, who are local residents, are invested locally will add value to the programme

12. Is it necessary to waive the call in period?

12.1 No

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Appendix 1

Implications

Financial

1.1 Since the start of the pandemic, the Council has received a number of different grants to support the response to Covid-19, one of which is managed by Public Health. For 2022/23, based on allocations carried forward from 2021/22, there is £17.627m available from the Contain Outbreak Management Fund. £0.084m will be allocated from Contain funding to fund the additional mental health skills based training outlined in this report.

Legal

2.1 The Council has power to provide grants under the general power of competence set out in section 1 of the Localism Act 2011.

2.2 The Council's Financial Regulations state that grants below £0.100m require Cabinet Member authorisation.

2.3 The Council's standard grant agreement shall be used to set out the terms and conditions for which the grant is made. This includes conditions for clawback of funding in certain circumstances and states that the Council is not liable for any employment liabilities.

Human Resources

3.1 N/A

Information Technology

4.1 N/A

Equalities Impact

5.1 N/A

Corporate objectives and priorities for change

4.1 Delivers against the Derbyshire County Council Plan Outcome of resilient, healthy and safe communities.

Delivers against the Derbyshire County Council Service Plan Outcome PH7 - Worked with partners to promote positive mental wellbeing and improve support for local people, including the prevention of suicide.

Delivers against the Outcomes Based Accountability (OBA) indicators and measures for mental health and wellbeing, as well as impacting several of the OBA priorities.

Delivers against the ambition to embed population mental health approaches across the Joined Up Care Derbyshire system.

Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)

7.1 N/A