Health and **Wellbeing** Board Hertfordshire

HERTFORDSHIRE COUNTY COUNCIL

HEALTH AND WELLBEING BOARD 15 December 2015 at 10.00 AM

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1.0 Purpose of report

1.1. As part of Health and Community Services (HCS) contribution to the Year of Mental Health, to report on the progress of the Mental Health Project, established in May 2014.

2.0 Summary

- 2.1. Apart from improving an individual's financial position, and hopefully their mental health and well-being, the project also hopes to show benefits for the NHS in reduced hospital admissions, fewer GP visits, reduced medications and other interventions. The team of 4 advisers (2 full-time and 2 part-time), recently supported by one additional temporary full-time adviser until September 2016, are managed by the MAU but are a resource for the community-based teams in the new quadrants, supplying advice, support, training and expertise as well as taking-on casework.
- 2.2 There were 782 referrals to this project for the period 1 July 2014 up to 30th September 2015.
 - Based on the outcomes of cases where results have been finalised (as of 30 September 2015), the project will show increased income to the individuals who have been assisted of £3.2m, around £81 per service-user per week. This figure excludes the value of one-off payments, such as debt write-offs and challenges.
- 2.3. The advisers are spending on average 2hrs 38mins per case in meeting with the client and 1hr 48mins per case in follow-up, a total of 4hrs 26mins per case. If we take the rough base cost of each adviser as £24 per hour (£140,000 annual cost of project, divided by 3 advisers @ 37 hours per week for 52 weeks), each intervention is costing around an average of £112, but gaining on average £4,212 per service-user per year (most of which will continue beyond one year, creating a substantial cumulative effect over time).

- 2.4. As a result of this cost/benefit analysis, and at the request of the Scrutiny Committee on May 28th 2015, Commissioning identified £40k of underspend in the HWAS budget in the financial year of 2015-16 that has now been allocated to the MAU to employ an additional adviser from October 2015 to September 2016. The aim is to reduce waiting lists for the service that have grown because of the popularity of the service amongst NHS staff and service-users.
- 2.5. Most of the advice concerns applications for the DWP's new Personal Independence Payment as well as resolving difficulties with benefits such as DLA, ESA and housing benefit. In one recent case, an adviser managed to convince the DWP that an alleged £82,000 overpayment of benefit, going back 9 years, had been wrongly decided, and the client was actually debt-free. A serious and immediate risk of self-harm or suicide was therefore averted.
- 2.6. A key aim is to reduce the demand on NHS staff and resources. This is monitored through a questionnaire, some of which is reproduced below:-
 - i) "The involvement of the MAU has had a positive effect on my service-users well-being"
 73% strongly agreed, 27% agreed. No-one disagreed
 - ii) "The involvement of the MAU has allowed me to spend more time focusing on clinical issues"
 - 74% strongly agreed, 26% agreed. No-one disagreed
 - iii) "Has the involvement of the MAU helped prevent a crisis or crises?" 12% said No. 88% said Yes
 - iv) "Has the MAU prevented or reduced the need for your team's involvement with the service-user?"
 - 61% said Reduced
 - 11% said Prevented
 - 28% said Neither
- 2.6. The project also uses a 'before and after' survey developed by the Universities of Warwick and Edinburgh (WEMWEB) to measure emotional and mental well-being. This survey uses a positive score of between 3 and 8 as indicating a meaningful improvement in mental health and well-being. For those given advice by the MHP, the positive score is 10.1, which is a substantial measure of success.

3.0 Recommendation

3.1 To note this project and the contribution it is making to mental health well-being.

4.0 Background

4.1 In April 2013, the Department for Work and Pensions ceased to operate a crisis loan and community care grant service. The funding

that had been used for these provisions were transferred to local authorities.

As a result, the MAU had discussions with colleagues in Hertfordshire Partnership Foundation Trust and in Public Health - and it was jointly agreed that service users with mental health problems were being particularly affected by changes to the benefits system, appeals, homelessness and debt.

Specialist clinical staff within the NHS and HCC reported devoting a large amount of time in trying to resolve benefits related problems. The MAU therefore requested and were awarded a portion of the HWAS budget to employ three specialist benefit and debt advisers for a one year pilot to work exclusively with people living with mental ill health. The aim was threefold:-

- 4.2. to improve the mental health and well-being of service users by reducing stress and anxiety over debt, benefits and housing security;
- 4.3 to provide increases in income for individuals that substantially exceed the cost of the project (so meeting a greater level of needs than individual grants would have met under the initial HWAS scheme) and;
- reduce NHS costs by reducing demand for clinical, GP and consultant interventions, medications, hospital admissions and specialist staff time.
- 4.5. As a result, 4 staff (3 w.t.e) were recruited to commence work in June 2014, initially on one year contracts. This was extended in January 2015 to cover the period until March 31 2016, using the HWAS funding once more.
- 4.6. Although the initial overall level of DWP funding for local welfare assistance has now been reduced for the next 3 years, it has been agreed that this project, because of the success achieved, should be subject to a further 3 year service level agreement, to continue until March 31 2019 as part of a Crisis Mental Health Intervention Service. There will be separate provision for local CAB to be contracted to provide benefits, debt and budgeting advice and assistance for people using local food banks.

Report signed off by	Iain MacBeath
Sponsoring HWB Member/s	Iain MacBeath
Hertfordshire HWB Strategy priorities	Improving mental health and emotional
supported by this report	wellbeing
Needs assessment Consultation with HPFT staff and Public Health staff in January-April 2014.	
Equality and diversity implications. All of the service-users that advisers are	

working with and for are on a low income, often with debt problems, and have chronic or acute mental health problems.

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PIP	Personal Independence Payment
DLA	Disability Living Allowance
ESA	Employment and Support Allowance
MHP	Mental Health Project
HWAS	Herts Welfare Assistance Scheme