Supporting people with mental health issues during the Covid-19 pandemic

Sarah Morris and Ruth Lake

Social Work Teams

There are 1499 people open to Leicester City's Adult Mental Health social work teams, of whom 766 do not have a formal support package. These people are either being supported directly by social workers or care management officers, or remain open to the teams because, although they don't currently require support it is recognised that due to their mental health issues they may do so in the future and it is best that any future support be provided by the team that knows them best and whom they know they can contact if they have any concerns.

Adult Mental Health teams provide this professional support, rather than formal, paid support on a higher level than other service areas as it is recognised that people with mental health issues may require emotional and practical support on an ad hoc basis rather than regular, formal support with specific tasks daily or weekly. This intermittent support can often involve linking people in with other agencies or supporting them to do so themselves.

The Covid pandemic has highlighted this need. Workers within teams have spent a lot of time on the telephone simply talking to and listening to people. This connection with other people has been vital for people whose mental illness has been further impacted upon by the current situation, the anxieties and social isolation that this brings. Some people who were receiving formal support packages are now receiving less of this (as the groups they were attending have stopped or they do not want their provider coming into their home). Adult Social Care is in regular contact with providers and has provided guidance on how providers can continue to support people; whether this be through regular phone contact or supporting people to go out of their property to get fresh air and take exercise. However, there have also been new referrals to Adult Social Care, people who were managing their mental health independently prior to the pandemic but now require some additional support.

Generally, such people have not required a traditional support package, but instead have needed assistance with arranging accommodation, food or linking in with health services. Sometimes this can be resolved by supporting the person to consider what options are available in their local community or by signposting them to support that is available. However, Adult Social Care has had to arrange and fund B&B accommodation or even residential care for people who wouldn't generally be assessed as requiring Adult Social Care support but who are accepted as being vulnerable due to the current situation. This has included people who, due to their mental illness, have been unable to adhere to social distancing rules and so cannot remain in hostels, who have been unable to access general needs housing due to the closure of the Housing register or whose family have not been able to continue to provide support to them at this time. There have also been fewer accommodation options available to people being discharged from hospital.

Housing and Adult Social Care managers have met to discuss these issues and Adult Social Care have provided Housing colleagues with a list of those people who require housing, with Housing agreeing to include these people within their new pathway to restart the Housing register.

Support available through Contracted Providers

More broadly in relation to a wider support offer for those we may not have a statutory duty to we have in place a contract for Mental Health & Wellbeing Recovery Service (MHWRS) with Richmond Fellowship for the 'Life Links' service. This is an Open access service available to anyone in Leicester City that requires low level mental health support. This service is joint funded with the City CCG.

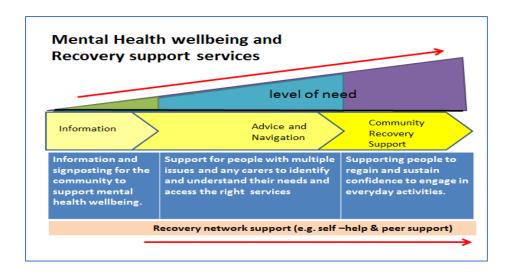
The intention behind the service is to build mental health wellbeing and recovery within local communities through the provision of information, advice, navigation and community recovery services, working in partnership with other providers and mainstream resources.

The objectives of the service include:

- a) Increase understanding of common mental health disorders across local communities and raise awareness of sources of support, with the purpose of challenging the stigma and discrimination associated with mental illness.
- b) Provide support to people experiencing mental health distress who require advice and information on mental health and wellbeing services in the locality.
- c) Enable individuals to maintain and improve their mental health wellbeing, or recover from mental illness, through better use of community resources.
- d) Promote independence by building individuals' emotional, social and economic wellbeing, through better access to self-help strategies, peer support and mainstream services.
- e) Become an integral part of the wider local mental health and social care system, developing effective relationships with and pathways into existing services.

The Figure 1 below summarises the approach used by the provider to deliver the service:

Figure 1: Service Approach



The current MHWRS providers should offer an information and signposting service for the locality population. Information should be easily accessible and available via multiple routes e.g. a drop-in service, user-friendly website, telephone and other technology solutions where possible. Providers should also have up to date information on a range of local and national services, tools and other resources that could support a person's mental health wellbeing (e.g. information on relevant wellbeing apps).

In addition, the providers work with local mental health networks to undertake activities to promote mental health wellbeing within the locality, targeted at people who are most likely to be experiencing mental health problems or who are at risk of requiring additional support to manage their mental health needs.

This includes such aspects as:

- Advice and Navigation
- Community Recovery Support
- Peer Support and mentorship

Referrals can be made by GP's / Social Workers / CPN's but people can also self refer. Open access service for information and advice and navigation but mental health diagnosis required for community recovery support.

The Information, Advice and Navigation elements of provision are open access to the general public, and people can be referred by health and social care professionals or community and faith organisations. People may request face to face appointments where they feel they would benefit from more in-depth support.

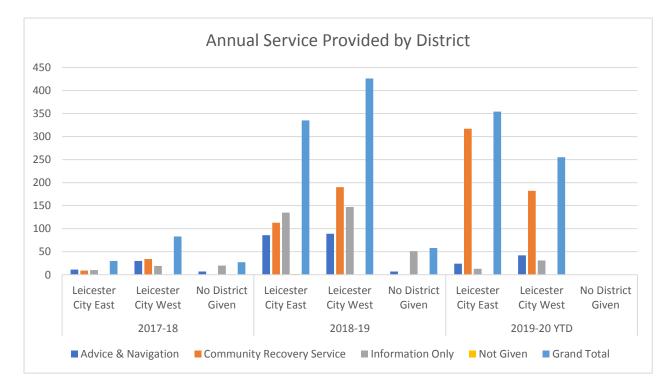
Referrals for the Community Recovery Support come from health or social care professionals or by self-referral. The Provider is expected to use their professional judgement to determine which individuals are deemed suitable for Community Recovery Support. The Provider will request permission from the individual to obtain supporting information from the General Practitioner or a Health and Social Care Practitioner about their diagnosed mental health problem, and to gather information about any risks in order to refer into the service. The service may refuse provision of support if this permission is denied.

These services are free to eligible individuals and people are not be expected to contribute towards support from any Personal Budgets they may be receiving.

In 2019/20, the main source of referrals have been people self referring into the service (42%). This has remained the main source of referrals since the contract commenced. Other referral sources include other VCSE organisations, social workers, Job Centre Plus officers and GP's.

Generally, the service is able to see someone within 5 days of initial contact for community recovery support.

The table below shows the numbers of interventions across the different service categories over the lifetime of the contracts. This demonstrates more focus on community recovery support as the services have developed and staff at Life Links have confirmed that most people request face to face support.



In addition, Life Links has an Advisory Group (made up of people accessing the service), which ordinarily meets quarterly to discuss ideas for service improvements and creates peer support opportunities. Volunteers (including former and current people accessing the service) are then able to participate in setting up and delivering peer support groups, aiding their own recovery journey

Multi agency planning for the future

Leicester City Council is working with Health and voluntary sector colleagues to develop a 'pathfinder' site within the City that will aim to provide much more joined

up support to people requiring mental health support within the community, via their GP service and through that community (alongside rather than purely via professional services).

The Public Health Team is also working with colleagues across the East Midlands to develop a model for planning the mental health 'surge' that is predicted to follow the Covid-19 pandemic; to understand the numbers and the sort of support that people might require.