

OFFICIAL



Item No: 09

Meeting Date: Wednesday 1st December 2021

Glasgow City Integration Joint Board

Report By: Susanne Millar, Chief Officer

Contact: Jacqueline Kerr, Assistant Chief Officer, Adult Services and North West Locality / Interim Chief Social Work Officer

Phone: 0141 314 6250

Funding to Support the Increase in Eating Disorder Presentations Due to the COVID-19 Pandemic: Mental Health Recovery and Renewal Fund

Purpose of Report:

This report seeks approval for the planned use of the non-recurring emergency NHS Greater Glasgow and Clyde (NHSGGC) financial allocation 2021/22 to meet the urgent needs of eating disorder patients and services.

Background/Engagement:

A Scottish Government letter of 10th September 2021 confirmed allocated emergency (non-recurring) funding to NHS Greater Glasgow and Clyde of £988,457 over financial year 2021/22 from the Scottish Government's Mental Health Recovery & Renewal Fund. Informal engagement with staff indicates temporary hours would be possible from existing part-time staff input.

Recommendations:

The Integration Joint Board is asked to:

- a) Approve the proposed utilisation of the non-recurring funding 2021 / 2022 allocation of the mental health recovery and renewal fund. Full year effect will not exceed £988,457, indicative expenditure quarter 4, Jan – Mar 2022 £246,000.
- b) Note the equal split of 2021 / 2022 funding resource between Child & Adolescent and Adult Eating disorder services;
- c) Note the planned use of the eating disorder allocation from the mental health recovery and renewal fund; and
- d) Receive an updated progress report on any Mental Health Division Performance Unit assurance and written agreement of the Scottish Ministers to 12-month funding at a future meeting.

OFFICIAL

OFFICIAL

Relevance to Integration Joint Board Strategic Plan:

Aligns with the IJB Adult and Children's Transformational Change Programmes and key priorities of early intervention, prevention and harm reduction in addition to public protection keeping vulnerable people safe from harm.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Contributes to National Health & Wellbeing Outcomes; 4: Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services; 5 Health and social care services contribute to reducing health Inequalities; 7 People who use health and social care services are safe from harm and; 9 Resources are used effectively & efficiently in the provision of care services.
Personnel:	Non-recurring funding requires temporary additional hour's appointments for existing staff and high turnover staff posts. Staff partners will be involved in shaping these workforce developments.
Carers:	Carers will be supported as an element of additional temporary service enhancement
Provider Organisations:	Commissioned service input will be subject to governance tender processes where temporary funding and service input is possible in the timescales 2021/2022.
Equalities:	Temporary operational changes which have been required during the pandemic to ensure that patients are safely and effectively treated have not all been subject to the levels of public engagement and formal consultation which are ordinarily delivered. It remains the position that any proposals for the permanent change of a local service will be considered in the normal way, including those surrounding major service change and Ministerial approval, once the pressures currently experienced reduce.
Fairer Scotland Compliance:	There is some evidence that overall, symptoms of eating disorders are distributed equally across levels of socioeconomic status. This temporarily supports more universal access to the detection and diagnosis of eating disorders in diverse subgroups, and to combat barriers to help-seeking experienced by people

OFFICIAL

OFFICIAL

	who do not conform to the demographic stereotype of an eating disorder. The approaches identified will be delivered within extant commissioning and procurement strategy and will support the design and delivery of health and social care services to ensure that the city supports the delivery of a Fairer Scotland.
--	--

Financial:	Non-recurring funding requires temporary additional hour's appointments for existing staff and high turnover staff posts and one-off commissioned input subject to governance tender processes where such service input is possible.
-------------------	--

Legal:	None
---------------	------

Economic Impact:	None
-------------------------	------

Sustainability:	The currently non-recurring nature of the funding has implications for longer term sustainability. This will be monitored under the mental health strategy.
------------------------	---

Sustainable Procurement and Article 19:	Where commissioning is possible 2021/2022 this will be considered as part of all commissioning and procurement undertaken by GCHSCP.
--	--

Risk Implications:	Without endorsement of this paper there is a risk that GCHSCP will not be able to provide the identified emergency in year high quality and responsive eating disorder services for children, adolescents and adults.
---------------------------	---

Implications for Glasgow City Council:	None
---	------

Implications for NHS Greater Glasgow & Clyde:	There is a low level possibility of negative public reaction if not approved
--	--

Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input checked="" type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

OFFICIAL

1. Purpose

- 1.1. This report seeks approval for the planned use of the non-recurring emergency NHS Greater Glasgow and Clyde (NHSGGC) financial allocation 2021/22 to meet the urgent needs of eating disorder patients and services.

2. Background

- 2.1 The Scottish Government established a National Review of Eating Disorder Services that reported in June 2021, identifying 15 recommendations. The first of these recommendations was:

“Emergency funding should be provided to rapidly meet the urgent needs of eating disorder patients and services as a direct result of an increase in the number and severity of eating disorder presentations related to the Covid-19 pandemic. Funding should prioritise physical health stability, risk reduction, support inpatient discharge and prevent admission to hospital.”

- 2.2 The Scottish Government letter of 10th September 2021 (Appendix 1) confirmed allocated emergency (non-recurring) funding to NHS Greater Glasgow and Clyde of £988,457 over financial year 2021/22 from the Scottish Government’s Mental Health Recovery & Renewal Fund.
- 2.3 The formal Scottish Government allocation letter for the 2021-22 funds is due to be issued in due course from national Health Finance. The Government outlined funding to specifically be used to support the delivery of eating disorder support and treatment in both Child & Adolescent Mental Health Services (CAMHS) and Adult Mental Health Services. The Government expectation is the funding be split equally to support both populations and services. The expectation includes CAMHS and Adult Mental Health Services working together to ensure need is met at a local level.
- 2.4 The purpose of the funding and expectations around delivery include:
 - i. To enable expansion of medical, nursing, dietetic and therapist time, and additional support workers (including peer and carer support workers) in this financial year. This could include providing temporary hours to staff members to dedicate to service development; scoping, pathway development and drafting operating procedures, training and supervision with clinicians outside of their service.
 - ii. To contract the third sector to provide support services to work alongside NHS eating disorder services if necessary.
 - iii. To purchase essential equipment and resources, such as IT equipment and books to support individuals and families.
 - iv. To refurbish rooms to allow for the physical monitoring of patients.
 - v. To provide further and relevant training for staff, such as Family Based Treatment for Anorexia Nervosa, Adolescent Focused Therapy and Cognitive Behavioural Therapy for Eating Disorders.
 - vi. To prioritise the physical health of patients and reduce risk. This could include commissioning additional specialist inpatient beds if necessary.

OFFICIAL

OFFICIAL

2.5 The funding made available is for the current financial year, 2021-22. If an underspend arises or is expected to arise in this financial year, this must be notified to the Directorate for Mental Health and Social Care as soon as possible so they can consider whether this should be returned to Scottish Government. The funds should be used entirely for the purpose outlined above and should not be top sliced or used for any other purpose. Any additional areas where the NHS Board or Health and Social Care Partnership would like to spend the funding shall be subject to the written agreement of the Scottish Ministers.

3. Current Eating Disorder Hosted Services (in GCHSCP)

3.1 Children and Young People with Eating Disorders in Glasgow and Clyde (Connect – ED)

Connect-Eating Disorders is a Tier 4 hosted specialist Board wide service for all Children and Young People with Eating Disorders in Glasgow and Clyde. Connect-ED provide services for under 18 year olds in Greater Glasgow and Clyde. The Connect-ed team work closely with all the community teams across the HSCPs and have a role in discussing treatment options plans for commencing treatment.

3.2 Glasgow and Clyde Adult Eating Disorder Service (AEDS)

The Glasgow and Clyde Adult Eating Disorder Service (AEDS) is a hosted Board wide specialist team offering care delivery as recommended in the NHS QIS document (Eating Disorders in Scotland 2006). Access to the Adult Eating Disorder Service works through the existing pathway and works closely with all the HSCPs community mental health teams across.

3.3 In-patient Care for Children & Adolescents and Adults

People who need to be admitted to mental health hospital services for care are currently admitted to existing services within Skye House (adolescent inpatient unit Stobhill site) and Armadale Ward (adult acute admission ward Stobhill site).

3.4 Intensive CAMHS Team (ICAMHS)

The ICAMHS team is a Tier 4 Hosted team who support Children and Young People who require intensive support associated with meal time management as both an in-reach service to the Royal Hospital for Children and a community service.

3.5 Recovery and Renewal Fund Eating Disorders 2021 / 2022

The table in the following section indicates the proposed use of emergency funding for NHSGGC. The priorities for 2021 / 2022 include:

3.6 Child and Adolescent Eating Disorder

- i. Expand meal time management capacity
- ii. Extend physical monitoring (inc. bloods, blood pressure, height and weight) capacity
- iii. support maintaining young people in communities

OFFICIAL

OFFICIAL

- iv. preventing admission,
- v. Increase supports available to young people after a period of hospitalisation to return home
- vi. support physical health monitoring and the creation of a weekly clinic to manage the demand and
- vii. training materials and equipment and supply of assessment tools
- viii. Acute physical inpatient stabilisation pathway for Young People 16yrs plus
- ix. Expand numbers of trained and supervised staff to deliver Family Based Treatment and CBT-ED

3.7 Adult Eating Disorder Service

- i. expand overall AED service capacity, minimise need for extra supervision & training, and medical monitoring clinics, non-medical professional medical monitoring & venepuncture
- ii. extend low intensity psychological therapies support for anxiety management, meal supports and psychological groups.
- iii. improve data, audit, information activity production and options for evidence based manualised approaches
- iv. develop a MARSIPAN (Management of Really Sick Patients with Anorexia Nervosa) physical acute site pathway
- v. increase support for groups and supported meals and new psychoeducational group for people waiting for treatment
- vi. prioritise patient focused transitions from CAMHS from age 18 -25 using transition care planning guidance
- vii. peer worker support in the community and in-reach to people in hospital and
- viii. additional training, supervision, training materials, educational and medical equipment, manuals for service users, standardised test and outcome measures

4. Conclusions

4.1 Proposed use of emergency 2021/2022 funding for NHSGGC.

Element	Allocation £'000s
<u>Child & Adolescent</u>	
<i>7.04 wte nursing skill mix & dietetics</i>	362
<i>0.4 Consultant & SAS medical</i>	7
<i>Competency training-based packages and equipment incl. paediatric nursing</i>	5
<i>Commissioning Third Sector pathway & engagement support peer work</i>	71
<i>User / carer engagement</i>	9
CAMHS Eating Disorder Sub Total (full year effect)	£494
CAMHS Eating Disorder Indicative 2021/22, Q4	£123

OFFICIAL

<u>Adult</u>	
5.0 psychology skill mix	243
4.0 nursing, transitions, allied health professions	193
1.2 peer workers	37
Equipment & training materials	7
Training workshop / schema supervision	5
User/carer engagement	9
Adult Eating Disorder Sub-total (full year effect)	£494
Adult Eating Disorder Indicative 2021/22, Q4	£123
NHS GG&C Total (full year effect)	£988
NHS GG&C Total Indicative 2021/22, Q4	£246

SAS Doctor - Originally short for 'Staff Grade and Associate Specialist', but also groups together other nationally recognised grades including clinical medical officers, hospital practitioners and clinical assistants.

- 4.2 Given the timescales and recruitment challenges, services cannot fully spend the funds 2021/2022. Discussion will continue with the Scottish Government, initially via the established regular programme of engagement that takes place between the Mental Health Division Performance Unit and the Mental Health Leads in NHS GG&C and Assistant Directors and HSCP Service Heads. This will impact on the extent to which the priorities are met. Spending will be maximised and indicatively, for emergency one-off spend on eating disorders 21/22, will be circa £246,000 (Jan-Mar Q4).

Funding has been confirmed until 31st March 2022 and future funding will be confirmed as part of the overall budget process. This will, as usual, be subject to final agreement through the annual budget process. Such confirmation will be provided following approval of the annual Scottish Budget by the Scottish Parliament.

- 4.3 Eating Disorder Strategy
All posts will be fixed term or additional hours for existing part-time clinical colleagues. The primary longer term need of the service is more specialist beds and early intervention which are not possible without significant revenue investment and restructuring.

The proposals for 2021/2022 are consistent with the National Review of Eating Disorder Services longer term development recommendations and also the in-year Government funding and expectations around delivery.

5. Recommendations

- 5.1 The Integration Joint Board is asked to:
- Approve the proposed utilisation of the non-recurring funding 2021 / 2022 allocation of the mental health recovery and renewal fund. Full year effect will not exceed £988,457, indicative expenditure quarter 4, Jan – Mar 2022 £246,000.

OFFICIAL

OFFICIAL

- b) Note the equal split of 2021 / 2022 funding resource between Child & Adolescent and Adult Eating disorder services;
- c) Note the planned use of the eating disorder allocation from the mental health recovery and renewal fund; and
- d) Receive an updated progress report on any Mental Health Division Performance Unit assurance and written agreement of the Scottish Ministers to 12-month funding at a future meeting.

OFFICIAL

OFFICIAL



Direction from the Glasgow City Integration Joint Board

1	Reference number	011221-9
2	Report Title	Funding to Support the Increase in Eating Disorder Presentations Due to the COVID-19 Pandemic: Mental Health Recovery and Renewal Fund
3	Date direction issued by Integration Joint Board	1 December 2021
4	Date from which direction takes effect	1 December 2021
5	Direction to:	NHS Greater Glasgow and Clyde only
6	Does this direction supersede, revise or revoke a previous direction – if yes, include the reference number(s)	No
7	Functions covered by direction	Child and Adolescent Eating Disorder Services and Adult Eating Disorder Services
8	Full text of direction	NHS Greater Glasgow and Clyde are directed to implement the proposals in relation to Eating Disorder Services, hosted by Glasgow City Health and Social Care Partnership, as identified at 4.0 of the report as part of the spending proposals for the first tranche of the mental health recovery and renewal fund.
9	Budget allocated by Integration Joint Board to carry out direction	The funding allocation for this Direction of £988,000 will be maximized in the timescale for 2021/2022. Quarter four actual spend indicatively £246,000.
10	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
11	Date direction will be reviewed	1 December 2022

OFFICIAL

Directorate for Mental Health and Social Care
Angela Davidson, Deputy Director



Scottish Government
Riaghaltas na h-Alba
gov.scot

T: 0131-244 1221
E: Angela.Davidson@gov.scot

NHS Chief Executive
NHS Board Chair
Director of Finance
Mental Health Lead
Eating Disorder Lead
IJB Chief Officer
Chief Finance Officer

10 September 2021

Dear Colleague,

MENTAL HEALTH RECOVERY & RENEWAL FUND: FUNDING TO SUPPORT THE INCREASE IN EATING DISORDER PRESENTATIONS DUE TO THE COVID-19 PANDEMIC AS OUTLINED BY THE NATIONAL REVIEW OF EATING DISORDER SERVICES

As outlined in correspondence dated 2 August 2021, **NHS Greater Glasgow and Clyde** will be allocated **£988,457** over financial year 2021/22 from the Scottish Government's Mental Health Recovery & Renewal Fund in response to the [National Review of Eating Disorder Services](#)' recommendations. Recommendation 1 Covid-19 Response, outlined providing emergency funding to NHS Boards to support services to meet the urgent needs of eating disorder patients and services as a direct result of an increase in the number and severity of eating disorder presentations related to the Covid-19 pandemic.

A formal Scottish Government allocation letter for the 2021-22 funds will be issued in due course from our colleagues in Health Finance.

Background

The Recovery & Renewal Fund supports the delivery of actions set out in the [Mental Health Transition and Recovery Plan](#) to respond to the mental health need arising from the pandemic, and will also benefit the full agenda for mental health and wellbeing in line with the four areas of key need set out in the Plan.

The remainder of this letter provides detail of the allocation, as well as requirements for monitoring and reporting on the impact of this spend to ensure the delivery of best value.

Purpose of Funding

The purpose of this funding is to respond to Recommendation 1: Covid-19 Response from the National Review of Eating Disorder Services:

“Emergency funding should be provided to rapidly meet the urgent needs of eating disorder patients and services as a direct result of an increase in the number and severity of eating disorder presentations related to the Covid-19 pandemic. Funding

should prioritise physical health stability, risk reduction, support inpatient discharge and prevent admission to hospital.”

Specific use of funding

As outlined in correspondence, the funding should be used to support the delivery of eating disorder support and treatment in both Child and Adolescent Mental Health Services (CAMHS) and Adult Mental Health Services, and **therefore we expect the funding to be split equally to support both populations and services**. We expect CAMHS and Adult Mental Health Services to work together to ensure that need is met at a local level.

The purpose of the funding and expectations around delivery are set out below. Any additional areas where the NHS Board or Health and Social Care Partnership would like to spend the funding shall be subject to the written agreement of the Scottish Ministers.

- To enable expansion of medical, nursing, dietetic and therapist time, and additional support workers (including peer and carer support workers) in this financial year. This could include providing temporary hours to staff members to dedicate to service development; scoping, pathway development and drafting operating procedures, training and supervision with clinicians outside of their service.
- To contract the third sector to provide support services to work alongside NHS eating disorder services if necessary.
- To purchase essential equipment and resources, such as IT equipment and books to support individuals and families.
- To refurbish rooms to allow for the physical monitoring of patients.
- To provide further and relevant training for staff, such as Family Based Treatment for Anorexia Nervosa, Adolescent Focused Therapy and Cognitive Behavioural Therapy for Eating Disorders for example.
- To prioritise the physical health of patients and reduce risk, this could include commissioning additional specialist inpatient beds if necessary.

Governance

As outlined in correspondence dated 2 August 2021, the Minister for Mental Wellbeing and Social Care asked Boards to nominate an Eating Disorder Lead(s) who will be the main point of contact for this funding. It might be helpful for the Health Board or Health and Social Care Partnership to form an Eating Disorder Working Group, if it does not already have one, to ensure that the funding is being used and distributed appropriately across both CAMHS and Adult Mental Health Services.

Spend this financial year

This funding is provided for the current financial year, 2021-22. If an underspend arises or is expected to arise in this financial year, this must be notified to the Directorate for Mental Health and Social Care as soon as possible so we can consider whether this should be returned to Scottish Government. The funds should be used entirely for the purpose outlined above and should not be top sliced or used for any other purpose.

You are asked to provide a profile of spending for the year in response to this letter, which sets out expected spend by the end of October and December 2021, and by the end of March 2022. This should include which areas from the above section on 'Specific use of funding' your Board intends to use the funding for. This will be used to support progress monitoring and reporting, and to inform in-year adjustments to ensure best use of funds across the wider R&R Fund budget.

Progress Monitoring and Reporting

Progress will be discussed via Mental Health Division Performance Unit's regular programme of engagement with Mental Health Leads in Boards. Using the profile provided, as mentioned above, progress on the identified use of funding would be monitored, for example this could include, on the numbers of staff trained/hours of training provided, how many additional over time hours were funded, what equipment has been purchased, and if any additional beds were commissioned. The focus will be on how this additional investment translates into enhanced eating disorder performance and improved patient outcomes.

A template for reporting on this can be found in **Annex A**.

This will complement and be co-ordinated as part of wider arrangements which support scrutiny and reporting, including local governance arrangements, workforce planning, Annual Operating Plans and board review processes.

Investing in a whole-system approach focused on the needs of service users will ensure that demand can be met at the earliest possible stage as people are increasingly able to access the right service in the right place at the right time. Achieving this will require working across boundaries to deliver prevention, early intervention and post-clinical support, and signposting to wider preventative and complementary supports outside NHS and clinical provision.

I hope that this letter has been helpful, and I would be grateful if you could pass this letter on to any relevant interests within your organisations.

If you have any questions, please contact Sophie Avery in the Scottish Government's Directorate for Mental Health and Social Care at Sophie.Avery@gov.scot

Yours sincerely,

ANGELA DAVIDSON

BOARD TEMPLATE: 2021 RECOVERY & RENEWAL FUND ALLOCATION – EATING DISORDER SERVICES

Funding: Please forecast expenditure as accurately as possible based on current information.

2020-21 Allocation (£)	Quarter 3 (£)	Quarter 4 (£)	Total allocation (£)
Forecast			

Delivery: Complete for all areas that apply. Please quantify deliverables and milestones where possible e.g. number of staff recruited/trained/increase in patients seen/reduction in waiting times/improvement in patient outcomes by [amount].

To enable expansion of medical, nursing, dietetic and therapist time, and additional support workers			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	
To contract the third sector to provide support services to work alongside NHS eating disorder services if necessary			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	
To purchase essential equipment and resources			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	
To refurbish rooms to allow for the physical monitoring of patients			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	
To provide further and relevant training for staff			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	
To prioritise the physical health of patients and reduce risk			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	
Other agreed areas of spend			
High level deliverables:			
Key milestones			
By end Q3 (Dec):		By end Q4 (March):	