

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker	Executive Lead Member for Adult Social Care and Public Health
Date:	16 July 2024
Title:	Savings Programme 2025: Reducing the Hampshire County Council contribution to Wellbeing Centres
Report From:	Director of Adults' Health and Care
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Purpose of this report

1. The purpose of this report is to seek approval from the Executive Lead Member for Adult Social Care and Public Health on the reduction of funding for Mental Health Wellbeing Services in Hampshire. This would involve reducing the annual contribution of Hampshire County Council from £1,281,777 to £625,000 and reducing the overall contract value from £4,944,152 to £4,287,375 per annum.
2. This report follows the 'Making the Most of your Money' Stage 1 Consultation in July 2023, the Executive Member decision on the 19 September and the meeting of the full County Council on the 9 November 2023 where Hampshire County Council's medium term financial strategy and the Directorate's savings proposals for 2025 were approved subject to further consultation and executive decision making where necessary.
3. Full details of the current funding arrangements for the Wellbeing services contracts is set out in section 41 of this report, however it should be noted that Hampshire County Council funding comes from 2 separate funding sources; its Public Health budget and its Adult Social Care budget. The funding that the County Council is proposing to cease in this report, is the Adult Social Care element of the overall Hampshire County Council funding.

Recommendations

4. That the Executive Lead Member for Adult Social Care and Public Health provides approval to reduce the annual contribution of Hampshire County Council by £656,777 per annum (£1,695,025 over the remaining total life of the contract to August 2027 if extension options were taken) and to modify the relevant contract as set out in this report.

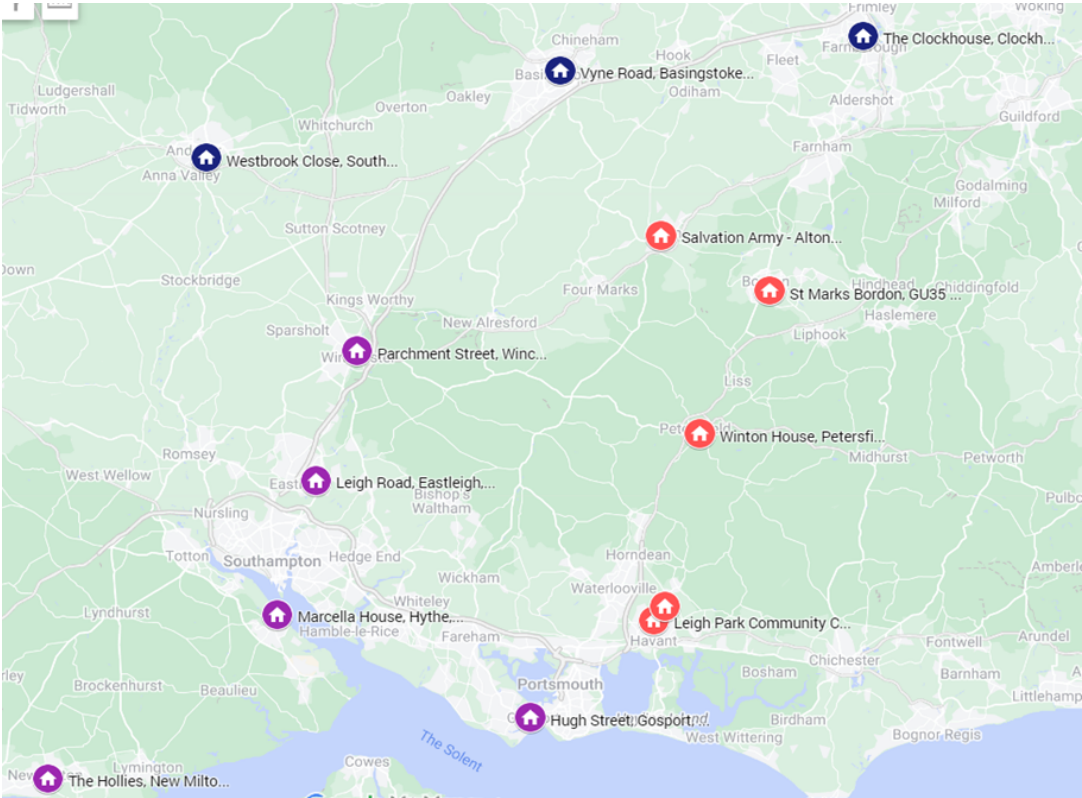
Executive Summary

This report seeks to:

- 5. Provide an overview of the Mental Health Wellbeing Services and what they deliver in the context of wider mental health service provision across Hampshire.
- 6. Consider the impact of the proposed cessation of Adult Social Care funding on the people who use the services as well as the service providers and the other commissioning partners.
- 7. Describe the engagement that has contributed to this work and highlight the actions that would be taken should it be decided to cease the funding as proposed.

Contextual Information

- 8. The Wellbeing Services are currently commissioned by Hampshire County Council in partnership with Hampshire and Isle of Wight Integrated Care Board (HIOWICB) and Frimley ICB. People do not need to have Care Act eligible needs to access the service. There is no specific legal duty for the County Council to provide the service or fund the service.
- 9. Wellbeing services are delivered from a number of physical locations, referred to as Wellbeing Centres, which are situated at 13 locations across Hampshire. These are non-clinical settings, offering people the opportunity to meet others with experience of mental health issues. They are located in easy to access High Street locations throughout Hampshire, illustrated in the map below. Further information regarding physical locations can be found in Appendix 1.



10. The services are operated by Hampshire Mind Community Interest Company. A Community Interest Company (CIC) is a special type of limited company which exists to benefit the community rather than private shareholders. Hampshire MIND Community Interest Company is comprised of three delivery partners;
 - Solent MIND (West Hampshire)
 - Andover MIND (North Hampshire)
 - Havant and East Hants MIND (East Hampshire)
11. The current Wellbeing Services contracts are held by Hampshire County Council. Funding is also provided by Hampshire and Isle of Wight Integrated Care Board (HIOW ICB) and Frimley Integrated Care Board. These arrangements have been in place since 2012.

Services Provided

12. The Mental Health Wellbeing Services are non-clinical settings, open to anyone who wishes to use the service (self-referrals) or who are referred from an appropriate professional. They can be accessed by people aged 18 and over, with no upper age limit. There are no Care Act eligibility requirements for people to access the service. People with mental health needs will often present with a wide range of issues. In some cases, people will require support with both their mental health issues and their wider circumstances.
13. The focus of the Wellbeing Services is on prevention and early intervention, through to recovery and maintenance, by providing both structured groups and programmes and unstructured opportunities through more informal settings such as drop ins to people to help improve their mental and emotional wellbeing. Support is tailored to the individual and programmes of support differ in duration, frequency, and intensity.
14. The support on offer across all the centres is consistently delivered regardless of which centre is accessed and covers the following key areas:
 - Short-term programmes of recovery-based courses.
 - Assistance to learn skills/self-help techniques to manage mental health.
 - Sign posting to other relevant services such as weight management and smoking cessation programmes, Severe Mental Illness health checks, psychological therapies, crisis services and counselling services.
 - A keyworker system is in place to help assist people through their recovery journey.
 - Wellbeing and emotional support, delivered either face to face, via the telephone, text, email or video calls.
 - Peer Support from people who have experienced Mental Health issues themselves.
15. Activities are varied and designed to support people working towards to recovery and helping promote, support, and maintain their mental wellbeing. These include, but are not limited to:
 - Anxiety management and low mood.

- Decider skills (emotional coping skills).
 - Men's groups.
 - Young Person's groups.
 - Creative workshops. (i.e. arts and crafts)
 - Activity-based groups (i.e. yoga, walking)
16. Data from the period 1 September 2022 to 31 August 2023 shows that there were 3238 referrals to the services. Of these, 58.5% were self-referrals, 28.6% were from the NHS, with only just over 1% of referrals coming from a social care professional. The remainder of the referrals came from other sources such as housing departments, social prescribers, voluntary and community groups etc. Measuring outcomes for those people is harder to quantify. Based on the available data it is not possible to build a clear business case for the provision of adult social care funding to these services.
 17. As part of the Community Mental Health Transformation Programme approach, Hampshire and Isle of Wight ICB has invested significant additional funding (£3,069,865 per annum from 01/09/2022) into the development of a Primary Care Network (PCN) wellbeing offer. (PCNs are groups of General Practices that work together with other services in their local areas to provide more joined-up and personalised care).
 18. The PCN element of the service, for the Hampshire and Isle of Wight ICB is currently in addition to the 'core service offer', although forms part of the same service specification and contract. It is aimed at those adults who are currently not accessing any other mental health services but are requesting support within Primary Care for their mental health which may be related to any source such as work, stress or ongoing emotional difficulties. The aim is to better support people in the early stages of distress in order to generate positive health and wellbeing outcomes and to reduce the likelihood of escalating poor mental health.
 19. These Mental Health Wellbeing Services are a part of a wider range of Mental Health services in Hampshire which are either provided directly by, or commissioned by, the County Council or the NHS. Details of these services, as well as the wider Mental Health provision in Hampshire, are set out in the sections 20-40 of this report.

NHS Mental Health Service Provision in Hampshire

20. The NHS is the main provider of both inpatient and community mental health services. Its long-term plan requires Integrated Care Boards to maintain Mental Health Investment Standards (MHIS). The MHIS requires all ICBs in England to increase their planned spending on Mental Health services by a greater proportion than their overall increase in budget allocation each year.
21. In April 2021 NHS England started new recurring funding for Integrated Care Boards (circa £1billion per annum, nationally) to deliver new and integrated models of primary and community mental health supporting patients to live well in their communities. This is called Mental Health Transformation. In addition to

the headline Long Term Plan commitment, the NHS has set out additional goals for this transformation: more, faster, better care, and for all.

22. There is a wide network of services provided by a variety of NHS organisations and the voluntary sector across Hampshire. This can be a complex landscape for people to navigate and there is some variation in the offer between different areas of the county. However, there are also services which are available across Hampshire, outlined below.
23. Crisis Resolution Home Treatment Teams provided by Southern Health NHS Foundation Trust (SHFT). These provide intensive support for people experiencing an acute or 'crisis' episode during their mental illness, within their own homes. Also known as 'hospital at home' teams, this service is available 24 hours a day, 365 days a year. Their aim is to support and to help people remain independent and continue living as normal a life as possible, even when they are very unwell. The teams consist of psychiatrists, clinical psychologists, nurses, occupational therapists and support workers.
24. Community Mental Health Teams. SHFT provides a wide range of community-based mental health services for people who need ongoing support for their mental health issues. Tailored to individuals, they use psychological interventions, group and one-to-one therapy and social and emotional support, as well as medication options. For 'functional' mental illnesses, including conditions such as depression, schizophrenia, mood disorders and anxiety, SHFT focuses on a person's recovery from illness, rather than just their treatment. They also help adults over 65 with 'organic' mental illnesses, usually caused by a disease affecting the brain, such as Alzheimer's, provide community-based health care and support to enable people to live as independently as.
25. Early Intervention and Psychosis Service provided by SHFT. This offers assessment, treatment, and support to people (between the ages of 14-65 years old) who may be experiencing their first episode of psychosis, and is delivered in the community, either in or near individuals' homes.
26. Talking Therapies. italk is a talking therapy service in Hampshire, delivered by SHFT and Solent Mind, who work with patients using a variety of techniques including Cognitive Behavioural Therapy (CBT). It works alongside GPs to help people to recover from the most common mental health problems like anxiety, depression, OCD, PTSD and phobias.
27. Eating Disorders Service provided by SHFT. This provides assessment and treatment for people with eating disorders, including anorexia nervosa, bulimia nervosa, binge eating disorder and some atypical eating. The service offers a person-centred approach to care, working with individuals to plan a treatment package that is best suited to their needs.
28. Recovery College provided by SHFT, offers educational courses about mental health recovery and self-management to complement existing services. The courses are delivered online in virtual classrooms and face to face in community venues, on subjects related to mental health recovery, wellbeing and self-management.

Surrey and Borders Partnership NHS Services

29. There are a number of services that are particular to North-East Hampshire, provided by Surrey and Borders NHS Trust.
- Community Mental Health Recovery Services (CMHRS) supporting people with severe or enduring mental health problems back on the road to recovery
 - Home Treatment Team: Surrey Heath & NE Hants. This offers home visits to people in Northeast Hampshire who are aged between 18 to 65 years and suffering from a mental health crisis. The service will also aim to support young people who are 17 years as part of their transitioning care plan from the CAMHS service.
 - Early Intervention in Psychosis (EIP) Teams. These provide specialist treatment and care for people aged between 14 and 65 who have signs of psychosis

Primary Care Networks

30. In addition to the PCN funding element that is provided to the Mental Health Wellbeing Services, Primary Care Networks also deliver Mental Health services directly to patients in their local area. Whilst there is some local variation in regard to delivery, PCNs offer a core service offer as described below;
- A Mental Health practitioner connected to each PCN to provide a combined consultation, advice, triage and facilitate onward access to treatment services.
 - Social Prescribing Service working with GPs, nurses and other primary care professionals to link patients to community and non-clinical services such as the Home and Well service provided by Hampshire Citizens Advice.
 - Health and wellbeing advisors who are equipped to help with a range of issues, including, social isolation, loneliness, emotional well-being, healthy lifestyle choices, getting out and about, life-changing events such as birth retirement or bereavement, long-term health conditions, loss of confidence/purpose, poor health linked to housing or housing issues and accessing work, training and volunteering.
 - Peer Support with people using their own experiences to help each other. There are different types of peer support, but they all aim to; bring together people with shared experiences to support each other; provide a space where to enable people to feel accepted and understood; treat everyone's experiences as being equally important.
31. Information about the distribution of Primary Care Networks can be found in Appendix 2

Public Health Hampshire

32. Hampshire County Council has a duty to improve the health of the population and reduce health inequalities under its Public Health functions. This includes promoting and enabling good mental wellbeing, preventing mental ill health throughout the life course and across different population groups. This also includes specific responsibilities around the prevention of suicide.

33. The link between poor mental health and Substance Misuse is well understood. In line with its Public Health duties the County Council commissions substance misuse services, which provides open access for anyone with a drug or alcohol problem from 9 hubs, and additional satellites, across Hampshire. The service offers range of interventions including clinical support, medical and prescribing support, one to one key worker structured support, group work, counselling and a range of recovery & support activities including employment, education, harm reduction and blood borne virus vaccination and testing. These services are not impacted by the proposals in this report.

Additional Resources

34. In addition to the resources provided by the NHS, there are a number of national and local voluntary sector organisations that can be accessed either online, via the telephone or in person. These range from smaller local groups such as Men's Sheds through to national organisations such as Samaritans and Rethink Mental Illness.
35. Details regarding both local and national organisations that support mental health issues can be found on the Connect to Support Hampshire website.

Adult Social Care Mental Health Service Provision in Hampshire

36. The County Council's Adults' Health and Care directorate anticipates it will spend approximately £26.8 million in 2024/25 to support people with their eligible social care needs relating to their mental health problems.
37. This is done through a range of services, including the provision of Information and Advice, direct social work assessment and intervention, safeguarding responses, and reablement, care provision within someone's home, Technologically Enabled Care (TEC) and digital assistance as well as Direct Payments.
38. The direct social work interventions are undertaken by four Community Social Work Team and an Intermediate Care Team (focused on those people with more complex long-term needs). There is also an Approved Mental Health Professionals (AMHP) Team. AMHPs are mental health professionals responsible for coordinating assessment and admission to hospital if a person is sectioned under the Mental Health Act.
39. Adults' Health and Care also commissions services such as residential and nursing care, shared lives and supported living for those with an eligible need under the Care Act 2014
40. The County Council has no specific legal duty to fund the Wellbeing Services. Access to Wellbeing Services is not dependent upon eligible social care needs. Indeed, people who access them often do not have eligible social care needs. Currently only around 1% of referrals to the service are from adult social care.

Current Funding Arrangements for Mental Health Wellbeing Services

41. Funding for the Mental Health Wellbeing Services is currently provided by Hampshire and Isle of Wight ICB, Frimley ICB, and Hampshire County Council. The Hampshire County Council contribution is made up of funding from its Public Health budget and Adult Social Care budget. A summary of the current

funding arrangements is contained within the table below. A more detailed breakdown is contained in Appendix 3.

Total Annual Funding Arrangements:

Annual Funding Contributions	Core Wellbeing Service	PCN Wellbeing Service	Total
HIOW ICB	£475,866.00	£3,069,865.00	£3,545,731.00
Frimley ICB	£116,644.00	£0*	£116,644.00
HCC	£1,281,777	£0	£1,281,777
Total	£1,874,287.00	£3,069,865.00	£4,944,152.00

*Frimley ICB deploy their corresponding funds to alternative services in NE Hants

Proposed Changes

42. It is proposed that the Adults' Social Care funding contribution of £656,777 per annum for the Wellbeing Service ends on 31/01/2025. If approved, from the 01/02/2025, the service would continue to be funded by the Hampshire and Isle of Wight ICB, Frimley ICB and Hampshire County Council via its Public Health funding contribution. The remaining total funding is proposed to remain at £4,287,375 per annum.
43. The Adults' Social Care funding for this service has been identified as a potential saving in relation to Savings Programme 2025 (SP25). This programme has been established to help the County Council manage a projected budget deficit of £132 million in the 2025/26 financial year.
44. The total saving to the County Council from 01/02/2025 to the end of the contract (if all extension options were taken up) on 31/08/2027 would be £1,695,025.
45. Although it is proposing to withdraw its funding towards the service, Adults' Health and Care is proposing that it continue to hold the contract and continue to provide contract management of the Mental Health Well Being service until the end of the initial three-year contract term on 31 August 2025. The commissioning partners have indicated this is the most favourable solution for them, as it would provide optimal stability for the service and allow them to focus on the redesign work required with Hampshire MIND CIC to account for the reduced budget available from 30 November 2024. Adults' Health and Care would continue to provide this service without charge to partners.
46. The County Council also provides two buildings for the use of the Wellbeing Services (111 Leigh Road, Eastleigh and 3 Vyne Road, Basingstoke) for 'peppercorn rent' levels. No change to this arrangement is proposed. Taking into account market rent values and maintenance costs, the financial value of the County Council's provision of these two buildings is approximately £45,000 per annum.

Contractual Considerations

47. If the proposed decrease in funding is agreed the process set out in the contract would be followed to vary the contract as a permitted modification. It is proposed that six months-notice is provided to enable the necessary re-design work to be completed and implemented.

Co-commissioners' Position

48. Hampshire and Isle of Wight ICB, Frimley ICB and Public Health Hampshire have all confirmed that they are currently planning to maintain their funding contributions until at least the end of the initial three-year contract term on 31 August 2025.

Impact on Service Provision

49. No potential site closures have been identified as a result of these proposals; Farnborough Wellbeing Centre has already been identified for closure due to high rent levels and is likely to close irrespective of the proposal outlined in this paper, however a new site in Aldershot has been acquired to relocate wellbeing services.
50. Hampshire MIND CIC have assessed a range of potential impacts that may be caused by a reduction in funding from Hampshire County Council. This may include a reduction in the volume and scale of specific activities, and in the accessibility of the service.
51. If the proposed funding reduction is approved, it would be for Hampshire MIND CIC and commissioners to make decisions regarding the type and volume of activity to be provided in the future within the remaining £4,287,375 per annum funding for the service. The re-design work may mitigate some of the potential impacts.
52. The County Council's Adults' Health and Care teams have assessed that the proposed reduction in service capacity would have a negligible impact in regard to the County Council's Adult Social Care functions. It is not envisaged that the reduction in core service offer would cause a significant increase in people seeking a Care Act assessment or subsequently requiring a funded social care service.

Options for future re-design

53. There have been several preliminary meetings between Hampshire MIND CIC and commissioners to discuss issues related to the impact of the potential withdrawal of Adult Services funding and the future delivery of the services, pending this decision.
54. There would be a need for commissioners and Hampshire MIND CIC to continue the necessary re-design work over the coming months if the decision is made to withdraw Adult Services funding. This would require ongoing partnership working between Hampshire MIND CIC, commissioners and people who use the services to make the most effective use of the remaining £4,287,375 per annum funding.

55. The Local Authority Public Health Team have indicated as part of the public health duties, interventions for the population of Hampshire to maintain a focus on suicide prevention and activities that promote good mental health and wellbeing are supported.
56. Commissioners from Hampshire and Isle of Wight ICB and Frimley ICB have indicated their requirements around a retention of the direct support offer including 1:1 sessions for those with more complex and enduring mental health issues.
57. Given these positions and the views expressed by people who use the services in section 66, it is likely that a mixed economy of service provision would be most preferable as the outcome of any future service re-design.
58. Options for the service re-design could consider the entirety of the remaining £4,287,375 per annum funding and how this could be best deployed to meet the requirements of the relevant commissioners and the people who use services. This may include a review of referral pathways and eligibility criteria providing more flexibility in how Hampshire MIND CIC deliver the services. This may include breaking down the artificial distinction between what is currently referred to as the 'core offer' and the 'PCN offer.' This would be in alignment with the 'No Wrong Door' approach to Mental Health Services.
59. Additionally, Hampshire MIND CIC have indicated that there may be options to increase the use of volunteers and experts by experience (people who themselves have experienced mental health issues) to offset any potential reductions in the numbers of paid staff.

Consultation and Engagement

Formal Consultation

60. In 2023 Hampshire County Council launched it's 'Making the Most of Your Money' Stage 1 Consultation. This consultation focused on proposals to address a predicted annual budget shortfall of around £132 million forecast for the 2025/26 financial year. The consultation described savings proposals amounting to £28.7 million for Younger Adults, against a total budget of £208.9 million.
61. Within these savings proposals there was reference to a review of the funding arrangements for Mental Health Wellbeing Services. At the beginning of the consultation MIND Chief Executives were fully briefed on the Wellbeing Services review and they encouraged people using the service to take part in the consultation. 12 consultation responses specifically referenced the Wellbeing Services from two groups of respondents:
 - People who have used the service (current and former), their families, others with a connection to the services.
 - Staff (or volunteers) from the Wellbeing Centres.
62. General themes highlighted from the feedback received from people who have used the services:
 - Any change or reduction in wellbeing centres would increase mental ill health.

- Impact of any reduction would necessitate the use of more technology and also see a decrease in longer term support options.
 - Accessing the wellbeing centre is important in helping an individual to maintain their mental health and emotional wellbeing, being able to live a life and contribute to the wider community.
63. General themes highlighted from the feedback received from staff and/or volunteers from the Wellbeing Services:
- It's a service that clients trust which support people in crisis as well as recovery.
 - Great value placed on the model of peer support particularly for those clients who have enduring mental health issues.
 - Without these services people could become increasingly unwell and need to access more expensive high demand services particularly in the NHS but also wider such as social care and the police.
 - Bridges the gap between primary and secondary mental health support.
 - Offer immediate support, access to a variety of service offers and don't generally operate a waiting list.
 - Offer local job opportunities, a route into volunteering and potentially then onto paid employment.

Focused Engagement

64. To gain more detailed insight into the views of people who use the Mental Health Wellbeing Services, an engagement exercise was undertaken between 12th February 2024 and 1st April 2024 with 247 responses received. This engagement exercise asked people to respond to the question 'Tell us which services at the Wellbeing Centre are important to you'. This was conducted in order to support decision making and provide valuable information for partners should proposals be taken forward.
65. Findings from the engagement exercise will be shared with co-commissioners at the ICBs and Public Health to support the service remodelling work which would be required should this recommendation be approved. The table below is a high-level summary of the findings. (To support analysis of the findings, the responses have been grouped into several key headings, with the number of times that heading was referenced and as a percentage of all responses).

Heading	Number of times this heading was referenced in responses	As a percentage of all responses
Type of offer / service delivery	208	84.21%
Outcomes	108	43.72%
Location	99	40.08%
Specific activities	81	32.79%
Inclusivity	55	22.27%
General feedback	26	10.53%
Environment	17	6.88%

66. From the 247 responses, 208 (84.21%) made a reference to the type of service delivery with 41.7% referencing group work as important and 34% referencing 1:1 work as important. This indicates that people who use the service value a mixed economy of service provision. This balance between provision of services for people with more complex needs and meeting the mental health needs of the wider population would need to be considered in any future re-design.
67. Of the 108 respondents who referenced a specific outcome, the highest number, 25%, mentioned diversion of demand from other NHS services, with 19.44% mentioning reduction in isolation and suicide prevention respectively. This indicates that the services could continue to play a key role in the NHS and Public Health agenda in Hampshire.
68. Of the 99 respondents who mentioned location, the highest number, (26.26%) mentioned the importance of a supportive and non-clinical environment, indicating that the services are regarded as accessible and welcoming.
69. 81 of the respondents mentioned a specific activity. Of these, the highest number, 32.1%, mentioned Arts and Crafts, followed by Mindfulness/Meditation (12.35%) and Creative Writing / Poetry (11.11%). From these figures it would appear that people who use the services are enjoying these activities and a varied timetable could be provided in a new service model.

Equality Impact Assessment

70. A formal Equality Impact Assessment (EIA 597) has been carried out on these proposals, a summary of which can be found below.
71. The proposed reduction in funding may have a negative impact on people with mental health issues.

72. Additionally, people with other protected characteristics may be more likely to experience mental health issues than the general population, and therefore may be disproportionately impacted by any reduction in capacity or accessibility in this service.
73. People in rural areas may be additionally impacted by any reduction in accessibility of the service, for instance, opening times, due to transport issues.
74. The specific needs of people with protected characteristics could be taken into consideration in any future re-design to mitigate impacts as far as possible.

Mitigation

75. Hampshire and Isle of Wight ICB, Frimley ICB, Public Health Hampshire and Hampshire MIND CIC have confirmed that wellbeing centres can continue to operate despite the potential withdrawal of the Adults' Social Care funding. It has also been confirmed that funding could move across elements of the contract and be reshaped to meet NHS and Public Health priorities.
76. Should the Adults' Social Care funding be removed from the contract then it is therefore likely that the service would require remodelling by the remaining partners in conjunction with Hampshire MIND CIC. The feedback from the engagement exercise, which was undertaken with people who use the service, to determine what people value the most out of the service would be shared with co-commissioners to help inform ongoing discussions about any service design. A summary of the engagement exercise can be found in sections 65-70 of this paper.
77. Hampshire MIND CIC have stated that there may be opportunities to increase the use of volunteers if required.
78. The County Council has agreed to continue to hold and manage the wellbeing services contract until at least August 2025 to enable NHS and Public Health partners to focus upon optimising and transforming services.
79. The County Council could continue to provide premises at Vyne Road Basingstoke and Leigh Road in Eastleigh for a "peppercorn" rent. Adults' Health and Care has also offered to consider the accommodation requirements of the wellbeing centres as part of work being completed by the County Council's 'Hampshire 2050' directorate.

Conclusions

80. The Mental Health Wellbeing Services provide a valued service, supporting the Mental Health needs of the general population of Hampshire. The commissioning arrangements have, to date, provided a good example of partnership working between the NHS and the County Council.
81. The County Council's financial position is public record, with a £132m budget shortfall predicted for 2025/26. The Council has a legal duty to deliver a balanced budget. The County Council faces a number of difficult decisions in response to this situation.
82. Adults' Health and Care currently contribute 13.28% of the total funding to Hampshire MIND CIC for Mental Health Wellbeing Services but has no specific legal duty to provide or fund these services.

83. The cessation of ongoing revenue funding from Adult Services budget for Mental Health Wellbeing Services would provide savings of £656,777.00 per annum to Hampshire County Council. This is a total of £1,695,025 over the remaining total life of the contract if extension options were taken.
84. Ongoing funding contributions from HIOWICB, Frimley ICB and Public Health Hampshire are proposed to remain at £4,287,375 per annum.
85. NHS and Public Health commissioners could use a period of service re-design to ensure future service delivery continues to meet their requirements and meet the needs of the people of Hampshire. Discussions regarding the options for service re-design have commenced and would be informed by the engagement exercise that has been undertaken with people who use the services.
86. Commissioners from Adults' Health and Care could continue to provide contract management support for the Mental Health Wellbeing Services contract until the end of initial contract term in August 2025. This would allow commissioners from the NHS and Public Health Hampshire to focus on the necessary service redesign, in partnership with Hampshire MIND CIC.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	Yes
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	Yes
People in Hampshire enjoy being part of strong, inclusive communities:	Yes

Other Significant Links

Links to previous Member decisions:	
<u>Title</u> Medium Term Financial Strategy Update and Savings Programme to 2025 Savings Proposals	<u>Date</u> 09 November 2023
Direct links to specific legislation or Government Directives	
<u>Title</u>	<u>Date</u>

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

EQUALITIES IMPACT ASSESSMENT:

Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

Equalities Impact Assessment:

Title: Savings Programme 2025: Reduction of funding for Mental Health Wellbeing Services

Service Affected - Mental Health Wellbeing Services

Description of the service/policy/project/project phase - The Younger Adults service within the Adults' Health and Care (AHC) directorate provides social care services for 7,250 people overall. This includes all people over 18 years with learning disabilities and people of working age with physical disabilities and mental health problems. Those receiving services have been assessed as eligible under the Care Act 2014. The support provided includes support work, residential care, day services, direct payments and other services. In the financial year 2023/24 Hampshire County Council planned to spend £185 million on care and support for Young Adults.

The Younger Adults Mental Health service contributes to the funding of wellbeing centres in Hampshire with the majority of funding provided by Hampshire and Isle of Wight Integrated Care Board. Additional funding is provided by Frimley Integrated

Care Board and from Public Health Hampshire. Funding from the NHS has increased in recent years due to investment from NHS England in the Community Mental Health Transformation programme.

Wellbeing Services are delivered by the voluntary sector and serve a total of 14,000 people with centres in Havant, Fareham, Eastleigh, Basingstoke, Farnborough, Winchester, Andover, Gosport, Hythe and New Milton with some satellite bases in rural areas. Many services are open access and no services are subject to assessment of Adults' Health and Care eligibility. Services include support for people with anxiety, depression and other mental health problems. Most services are time limited and include a mixture of group sessions, 1:1 sessions and peer support.

New/changed service/policy/project - Reduction of funding for this service of £656,777.00 per annum. Impact would be dependent upon whether other agencies are able to review and increase their funding or provide services differently to maintain output. A reduction in output (range and availability of services) is a possibility. It is possible that some people who would have previously accessed the service would no longer be able to as a result. It is possible that some people who use wellbeing services who are eligible for social care services could have their wellbeing service offer reduced. Wellbeing services are not dependent upon eligibility under the Care Act 2014.

Engagement - No specific formal consultation has been carried out on this proposal. It formed part of and was referenced in the Making the Most of your Money budget consultation (2024-2026) completed in Autumn 2023.

This proposal generated specific feedback as part of the Making the Most of your Money consultation. Individuals and organisations that support people with mental health issues, expressed concern at the impact this could have on the mental health services for people. The 2 Integrated Care Boards have been fully engaged and have had the opportunity to consider the potential impact that this proposal would have on delivery of services via the Mental Health Wellbeing Centres.

A direct engagement exercise has been undertaken with people who use the Wellbeing Services, to determine what are the most important features of the service.

From the 247 responses, 208 (84.21%) made a reference to the type of service delivery with 41.7% referencing group work as important and 34% referencing 1:1 work as important. This indicates that people who use the service value a mixed economy of service provision. This balance between provision of services for people with more complex needs and meeting the mental health needs of the wider population would need to be considered in any future re-design.

Of the 108 respondents who referenced a specific outcome, the highest number, 25%, mentioned diversion of demand from other NHS services, with 19.44%

mentioning reduction in isolation and suicide prevention respectively. This indicates that the services could continue to play a key role in the NHS and Public Health agenda in Hampshire.

Of the 99 respondents who mentioned location, the highest number, (26.26%) mentioned the importance of a supportive and non-clinical environment, indicating that the services are regarded as accessible and welcoming.

81 of the respondents mentioned a specific activity. Of these, the highest number, 32.1%, mentioned Arts and Crafts, followed by Mindfulness/Meditation (12.35%) and Creative Writing / Poetry (11.11%). From these figures it would appear that people who use the services are enjoying these activities and a varied timetable could be provided in a new service

Equalities considerations - Impact Assessment

Age

Public Impact – Neutral

Staff Impact - Neutral

Rationale: There is no known impact currently. People can receive services from Wellbeing Services from across the age range from 18 years old. Access is not based upon eligibility for services provided by Adults' Health and Care and service recipients are not necessarily known to Adults' Health and Care. Factors relating to age would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Disability

Public Impact - Negative - Medium

Staff Impact - Neutral

Rationale

These proposals would impact upon people with mental health problems who currently access the Wellbeing Services and potential future users of the service. Some choices that are currently available may cease to be available or may be less accessible (reduced frequency and/or duration).

It is possible that some people who would have previously accessed the service would no longer be able to as a result of this review. It is possible that some people who use Wellbeing Services who are eligible for social care services would have their Wellbeing Service offer reduced or ceased although wellbeing centre services are not dependent upon eligibility under the Care Act 2014.

Mitigation: Where people may have a social care need, they can request an assessment under the Care Act. Assessed Care Act eligible outcomes would still be met in line with legislation. Social Workers and Practitioners would discuss potential options with individuals who are eligible for services as part of the review and re-assessment process.

The directorate would work closely with the NHS and voluntary sector to identify and mitigate impacts. Impact would be dependent upon whether other agencies are able to review and increase their funding or provide services differently to maintain output. This will include an element of remodelling to account for the reduction in AHC funding and any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

There are also a range of other NHS mental health services available to people including Community Mental Health Teams, Early Intervention and Psychosis Service, Talking Therapies, Eating Disorders Service, Recovery College, Inclusion Substance Use services.

There also services provided by Primary Care Networks including a Mental Health Practitioner connected to each PCN, Social Prescribing Service and Health and wellbeing advisors.

Gender Reassignment

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: Research indicates that transgender and gender non-conforming (TGNC) individuals are at a high risk of adverse mental health outcomes due to minority stress—the stress faced by individuals categorised as stigmatised social minority groups. Based on this, people undergoing gender reassignment may be more likely to use the Wellbeing Services are therefore may be disproportionality impacted by any change to the availability or accessibility of the service.

Mitigation: Factors relating to gender reassignment would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Pregnancy & Maternity

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: According to Public Health England Perinatal mental health problems affect between 10 to 20% of women during pregnancy and the first year after having a baby. Based on this, pregnant women may be more likely to use the Wellbeing Services are therefore may be disproportionality impacted by any change to the availability or accessibility of the service.

Mitigation: Factors relating to pregnancy and maternity would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Race

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: The [Adult Psychiatric Morbidity Survey](#) showed disparities in mental ill-health by ethnicity in England. For example, rates of psychotic disorder experienced by Black men (3.2 per cent) and Asian men (1.3 per cent) were higher than among white men (0.3 per cent), although for women no significant difference by ethnicity was observed.

Compared to people of white ethnicity, Black women are more likely to experience a common mental illness such as anxiety disorder or depression, older South Asian women are an at-risk group for suicide and Black people are 4 more times likely to be detained under the Mental Health Act.

The higher prevalence of mental ill health in minority ethnic groups may mean that these groups may be disproportionality impacted by any change to the availability or accessibility of the service.

Mitigation: Factors relating to race would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Religion or Belief

Public Impact - Neutral

Staff Impact – Neutral

Rationale: The project would have a neutral impact on people who have the protected characteristic of religion or belief. Practitioners will ensure that religion or belief is respected, and care provision is based on individual need. Access to wellbeing centres is not based upon eligibility for services provided by Adults' Health and Care and the people are not necessarily known to Adults' Health and Care. Factors relating to religion or belief would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Sex

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: The Adult Psychiatric Morbidity Survey suggests variation in the population's mental health by gender. In 2014, 1 in 5 women (19.1%) reported symptoms of common mental disorders, compared with 1 in 8 men (12.2%). Women were also more likely than men to report severe symptoms (9.8% of women, compared with 6.4% of men). Emerging data also suggests different impacts by gender of the COVID 19 pandemic.

The higher prevalence of mental ill health in women may mean that women may be disproportionality impacted by any change to the availability or accessibility of the service.

Mitigation: Factors relating to sex would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Sexual Orientation

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: According to the BMC Paper 'Sexual orientation and symptoms of common mental disorder or low wellbeing: combined meta-analysis of 12 UK population health surveys' In the UK, LGB adults have higher prevalence of poor mental health and low wellbeing when compared to heterosexuals, particularly younger and older LGB adults.

The higher prevalence of mental ill health in these LGB groups may mean that these groups may be disproportionality impacted by any change to the availability or accessibility of the service.

Mitigation: Factors relating to sexual orientation would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Marriage & Civil Partnership

Public Impact - Neutral

Staff Impact - Neutral

Rationale: The project would have a neutral impact on young adults who have the protected characteristic of marriage or civil partnership. The wellbeing centre review would be undertaken with individuals, regardless of whether they are married or in a civil partnership. Where appropriate, carers assessments will be offered to partners of individuals who may be undertaking caring roles. Factors relating to marriage and civil partnership would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Poverty

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: Research by Public Health England has concluded that poverty can be both a cause and a consequence of mental health problems. Across the UK, men

and women in the poorest fifth of the population are twice as likely to be at risk of developing mental health problems as those on an average income. Unemployment and unstable employment are also both risk factors for mental health problems.

Based on these statistics, it is possible that people who currently use the Wellbeing Services may be more likely to experience poverty than the general population, and therefore may be disproportionately impacted by any change to the availability or accessibility of the service.

Mitigation: Factors relating to poverty would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Rurality

Public Impact - Negative - Low

Staff Impact - Neutral

Rationale: The Wellbeing Services are delivered from physical locations (the Wellbeing Centres) located in major population centres across Hampshire. No locations have been identified as at risk of closure due to this change. The Wellbeing Services deliver a range of in person, virtual and telephone support which is accessible to those who cannot reach the physical location of a Wellbeing Centre.

However, any general reduction in the availability or accessibility (frequency / duration) of 'in person' services is likely to have an adverse impact on people from rural communities who wish to access those services who may already be at a disadvantage due to transport issues.

Mitigation: Factors relating to rurality would be considered in any future remodelling work to ensure people with this protected characteristic were not unduly impacted by this change.

Appendix 1 – Location details by provider

Provider	Location 1	Location 2	Location 3	Location 4
Andover MIND	3 Vyne Road, Basingstoke, RG21 5NL	The Clockhouse, Clockhouse Road, Farnborough, GU14 7QY	Westbrook Close, South Street, Andover, SP10 2BN	
Solent MIND	111 Leigh Road, Eastleigh, SO50 9DS	Parchment Street, Winchester, SO23 8AU	31 High Street, Gosport, PO12 1DF	Marcella House, Jones Lane, Hythe, SO45 6AW The Hollies, 1 Barton Close, New Milton, BH25 6NN
Havant & East Hants MIND	Main Hub Leigh Park Community Centre Way, Havant, PO9 5BG Additional Venues: Staunton Country Park & Café, Stable Cottage, Petersfield Road, Havant, PO9 5HD The Meridian Centre, Elm Lane, Havant, PO9 1UN	St Marks, Pinehill Road, Bordon, GU35 0BS	Salvation Army, Market Street, Alton, GU34 1HD	Winton House, 18 High Street, Petersfield GU32 3JL

Appendix 2 – PCN / GP populations by Lot area

Lot 1 South West			
9 PCNs	Registered population 18 +	Number of GPs	District/s
Avon Valley	33,416	4	New Forest
Chandlers Ford	24,811	2	Eastleigh**
Coastal (WH)	11,200	1	New Forest
Eastleigh Health	26,169	4	Eastleigh**
Eastleigh Southern Parishes	41,612	4	Eastleigh**
New Forest	30,334	3	New Forest
Romsey and North Baddesley	34,683	3	Test Valley**
Totton	30,817	2	New Forest
Waterside	34,606	3	New Forest
TOTAL	267,648	26	3
** Means the District appears in more than 1 lot.			

Lot 2 North, Mid Hants and North East			
10 PCNs	Registered population 18 +	Number of GPs	District/s
A31 Practices	26,427	4	East Hants**
B-Connected Care	30,277	3	Basingstoke & Deane
Camrose, Gillies and Hackwood Partnership (CGH)	34,365	1	Basingstoke & Deane
Mosaic	30,672	2	Basingstoke & Deane and Hart & Rushmoor
Winchester Rural West	30,436	2	Basingstoke & Deane
Whitewater Loddon	30,686	3	Basingstoke & Deane and Hart & Rushmoor
Andover	48,565	5	Test Valley**

Winchester City	49,085	3	Winchester City**
Winchester Rural North and East	35,783	6	Winchester City** and Test Valley & East Hants**
Winchester Rural South	43,097	4	Winchester City** and Eastleigh**
TOTAL	359,393	33	7
** Means the District appears in more than 1 lot.			

Lot 3 South East			
9 PCNs	Registered population 18 +	Number of GPs	District/s
Coastal (Fareham & Gosport)	31,529	3	Fareham
Fareham & Porchester	36,468	4	Fareham
Gosport Central	28,415	1	Gosport
Gosport West	38,537	5	Gosport
Sovereign	30,278	3	Fareham
East Hants	63,280	9	East Hants**
Havant and Waterlooville	48,933	6	Havant and Winchester City**

Appendix 3: Current funding arrangements

Breakdown of Funding including Adults' Social Care and Public Health Hampshire.

Annual Funding Contributions	Core Wellbeing Service	PCN Wellbeing Service	Total
HIOW ICB	£475,866.00	£3,069,865.00	£3,545,731.00
Frimley ICB	£116,644.00	£0	£116,644.00
Public Health	£625,000.00	£0	£625,000.00
Adults' Social Care	£656,777.00	£0	£656,777.00
Total	£1,874,287.00	£3,069,865.00	£4,944,152.00

Annual Funding by Lot Area

Total annual funding allocation by lot area:

Annual Contract Values by Lot	Core Wellbeing Service	PCN Wellbeing Service	Total
Lot 1 South West	£492,140.04	£986,742.32	£1,478,882.36
Lot 2 North, Mid & North East	£766,971.91	£1,096,380.36	£1,863,352.27
Lot 3 South East	£615,175.05	£986,742.32	£1,601,917.37
Total	£1,874,287.00	£3,069,865.00	£4,944,152.00

Breakdown of commissioner funding by lot area (AHC element greyed out):

Annual Funding Contributions: Lot 1 South West	Core Wellbeing Service	PCN Wellbeing Service	Total
AHC	£183,897.56	£0	£183,897.56
PH	£175,000.00	£0	£175,000
HIOW ICB	£133,242.48	£986,742.32	£1,119,984.80
Frimley ICB	£0	£0	£0
Total	£492,140.04	£986,742.32	£1,478,882.36

Annual Funding Contributions: Lot 2 North, Mid & North East	Core Wellbeing Service	PCN Wellbeing Service	Total
AHC	£243,007.49	£0	£243,007.49
PH	£231,250.00	£0	£231,250.00
HIOW ICB	£176,070.42	£1,096,380.36	£1,272,450.78

Frimley ICB	£116,644.00	£0	£116,644
Total	£766,971.91	£1,096,380.36	£1,863,352.27

Annual Funding Contributions: Lot 3 South East	Core Wellbeing Service	PCN Wellbeing Service	Total
AHC	£229,871.95	£0	£229,871.95
PH	£218,750.00	£0	£218,750.00
HIOW ICB	£166,553.10	£986,742.32	£1,153,295.42
Frimley ICB	£0	£0	£0
Total	£615,175.05	£986,742.32	£1,601,917.37