

Local authorities and the Community Mental Health Framework

Making partnership real

June 2021 briefing

A close-up photograph of a woman's hands playing an acoustic guitar. She is wearing several colorful, multi-layered bracelets on her left wrist and a gold ring on her left ring finger. The background is blurred, showing other people in a group setting.

Rethink
Mental
Illness.

Last year, we published a briefing asking local authorities to protect existing mental health social care services in the coming financial year. We did this because this year is a crucial time for people severely affected by mental illness, as the roll out of the Community Mental Health Framework¹ (CMHF), as part of the NHS Long-Term Plan², moves on to its next stage.

Local authorities provide invaluable social care and community support to people severely affected by mental illness through their responsibilities under the Care Act and the Mental Health Act and commissioning expertise in both community and housing support. The CMHF is a major opportunity to improve and develop strength based community focused and personalised mental health support.

We know that this moment of change comes at an extremely challenging time for local authorities and at a national level, we are lobbying for additional investment in mental health social care budgets. We will continue to play our role at a national level to help secure additional investment that allows them to do even more.

Funding will always be a key part of the conversation on the provision and integration of services, but the future outlined for community mental health support also proposes a new way of working for local authorities, the NHS, and the voluntary sector. This can lead to benefits for all involved, including the people we support.

In the recent past, austerity and other pressures have caused us all to struggle to work in an integrated collaborative way. Organisations that have traditionally worked more independently can have very different cultures. Collectively we need to be patient and be prepared to work in a more collaborative way focusing on the holistic needs of people severely affected by mental illness.

Making time together for a systemic change is hard, particularly during the COVID-19 pandemic, but this is something we can do together. That is how the trust and relationships to realise the CMHF's full potential for people severely affected by mental illness can be built as we shift our focus away from expensive crisis care.

What is the purpose of this briefing and who is it for?

Our briefing is designed to help those involved at various levels of your local authority to become more involved in the future of community mental health. It builds on the previous guides we have produced aimed at Sustainability and Transformation Partnerships (STPs) / Integrated Care Systems (ICSs),

Thinking Differently³ and Keep Thinking Differently⁴.

Many local authority areas have not always felt fully involved in the CMHF developments. We hope that this briefing can serve as a guide for how you can take the first steps to becoming more involved.

Our briefing sets out the new world we will move to, the opportunities for your local authority, and the difference your involvement can make. Current relationships will vary across the country, as will the shape of the new community mental health model but the values of cooperation, generous leadership, and partnership working should be universal.

Our hope is that your local authority can use this briefing to get involved in the opportunities that present themselves in your area and to forge them alongside colleagues from health, the voluntary sector and with users themselves. From those in leaderships positions, public health, commissioning roles, to those working in social care, and councillors themselves, the scope for local authority involvement is huge.

1 [NHS England, Community Mental Health Framework, 2019](#)

2 [NHS England, The Long-Term Plan, 2019](#)

3 [Rethink Mental Illness, Keep Thinking Differently, Continuing your journey of community mental health transformation, 2021](#)

4 [Rethink Mental Illness, Thinking Differently, A 'first steps' guide for STPs on transforming community mental health services for people with moderate to severe mental illness and with complex needs, 2020](#)

Why does the NHS Long-Term Plan and the Community Mental Health Framework matter?

Our Right Treatment, Right Time⁵ report set out a clear picture of the gaps in services for people severely affected by mental illness. For the first time, the CMHF can change this status quo.

By 2023/24 all STPs/ICSs will be delivering treatment to people with moderate to severe mental illness through integrated primary and community services, using a place-based approach. It will be underpinned by £975m of transformation funding per year delivered through STPs/ICSs, coupled with increases in Clinical Commissioning Group (CCG) baselines.

370,000 more people moderately and severely affected by mental illness can expect to receive treatment. The vision for the future of community mental health support is clear that the availability of and integration with non-clinical services will be fundamental to its success. We outlined how these pillars of support for people severely affected by mental illness should look in our Building Communities that Care⁶ report.

Where are we at with the Community Mental Health Framework now?

In November 2020, STPs/ICSs submitted their initial proposals for the future of community mental health in their area received feedback from NHS England and NHS Improvement. The bidding areas will have updated their submissions in January 2021 and in many areas will have included how they would work more effectively with social care.

Some local authorities will already have been involved in that process, but from our connections as a provider at a local level and our engagement with stakeholders at a national one, we believe that there is enormous scope for local authorities to become more involved.

Following feedback on these bids from NHS regional teams, funding to deliver transformation entered the system from April 2021. Although the process of change has begun, it is only the beginning. Many STP/ICS submissions only set out the intentions and a broad framework for their work.

There remains much to do in co-producing a local model of community care. The journey to 2023/24 and what it will mean for the relationships between the NHS, local authorities and providers is still taking shape.

It is not too late for the knowledge, expertise and relationships that local authorities have to help shape what this means for the future in their area. This is an opportunity for new ways of working in relation to partnership issues such as Section 117 aftercare, discharge from hospital, and the implementation of the support outlined in the Care Act.

⁵ [Rethink Mental Illness, Right Treatment, Right Time, 2018](#)

⁶ [Rethink Mental Illness, Building Communities that Care: A blueprint for supporting people severely affected by mental illness in their local communities by 2024, 2018](#)



Case study from Tim Baverstock, Deputy Director, Adult Social Care, Somerset County Council

“As one of the pilot sites for the Community Mental Health Framework (CMHF), in Somerset we have seen first-hand the importance of the NHS, local authorities, and the voluntary, community and social enterprise (VCSE) sector working together and the results that it brings. Although the funding for the CMHF is not part of our local authority budget, there have been enormous benefits in us taking a lead role not only for the people we support but also for ourselves. Local authorities can often facilitate and unlock relationships with community and voluntary sector groups and this is vital if the CMHF is going to make real change happen.

Somerset County Council has worked in partnership with Somerset NHS Foundation Trust, Somerset Clinical Commissioning Group, organisations from the local VCSE sector and crucially, experts by experience. Together, we have pooled our strengths to support whole communities by addressing the social, therapeutic, and wider determinants of mental illness.

We’ve broken down barriers, and enabled prevention and early intervention across Somerset. Our aims are clear. Together, we’re adopting a ‘no wrong door’ approach to services regardless of where people come into contact with us, improving transitions between primary and secondary care and support

for people in crisis, as well as helping people find housing, jobs, and volunteering opportunities, to name a few.

We’re already seeing our approach diverting people from acute services like emergency departments, and reducing out of area placements despite reduced bed capacity. Our local authority has been a key driver in this change and it could not be achieved without us being at the forefront.

Nationally, we are still in the early stages of a process of change that will set the path for community mental health across the country for years to come. There are still enormous opportunities for local authorities to take a lead role.”

What can local authorities do now?

Progress towards community mental health transformation, the level of involvement with different partners, and the priorities they seek to address, will vary across the country. This means details of the steps local authorities can take to increase their involvement in the next stage of STP planning will vary.

However, the steps outlined below can serve as a starting point for any local authority looking to increase their engagement in the future of community mental health:

- 1 Identify who within your local authority is best placed to become involved at a strategic level.** The new model of community mental health has the potential to impact on a wide range of local authority roles and positions including but not limited to housing and social care. Establishing which individuals can lead your engagement with your STP/ICS at a strategic level, which has decision-making powers, will help ensure that key issues in your area are addressed.
- 2 Reach out to the senior responsible officer for mental health at your local STP/ICS.** If you didn't work with the STP/ICS on their proposal for the CMHF, in the first instance contacting your local senior responsible officer for mental health will help you understand where they are with their plans and how your local authority can become involved.
- 3 Conduct a stock-take of relevant information.** Gather the information on any needs assessments you have conducted, plans you have in place to address local challenges, and any barriers you have identified that may hinder collaboration.
- 4 Collaborate with your local mental health providers.** Bring providers and any local user led groups with you as you become involved in the development of the community mental health model. This will build your relationships with them and mean their expertise can shape the future of community mental health in your area.
- 5 Review your commissioning processes.** Examine how your commissioning processes link to the redesign of community mental health, including any upcoming tenders, and analyse how they could be shaped by collaboration with your STP/ICS. Identify the commissioning expertise within your local authority that could contribute to its shape.
- 6 Reducing assessments** Work with trusted partners to reduce the number of assessments needed for people to get access their rights.
- 7 Prepare an assessment of your local mental health workforce.** The merging of clinical and non-clinical support must be deliverable according to the availability of the local workforce. Local authority contributions to this will be key, can help mitigate any challenges that are identified, and ensure you are contributing to discussions on the future.
- 8 Building relationships with Primary Care Networks (PCN) in your area.** PCN footprints will be key to the future of mental health support in your area. Building relationships with them is important, as their involvement in the CMHF will be key for how your local authority operates in the future.
- 9 Assess positive innovations that your local authority is undertaking that could support or lead the CMHF transformation.** This could include community-led support or strength-based practice.

What role can local authorities play and how can they get involved?

Taking a leadership role

STPs/ICSs are expected to demonstrate how they are working with local authorities, the VCSE sector, and experts by experience in the development and implementation of a new model of community mental health. The involvement of your local authority can help shape the priorities at an STP/ICS level. If your local authority is yet to be contacted to far, reaching out to the senior responsible officer for mental health at your STP/ICS will help you understand where they are in this process and who is best placed among the many relevant local authority roles to become involved.

Asset mapping and local challenges

A key element of shaping the new model of community mental health is community asset mapping. Non-clinical, local authority commissioned services are key to this. Public Health England has published guidance on the importance of community centred approaches⁷.

STPs/ICSs should have a holistic understanding of the non-clinical support in place in their communities. The availability and involvement of these services will help make sure that the aims of prevention and early intervention are met.

We recognise that many local authorities are already leaders in this approach. For example, you may be in a programme of asset based community development or strength based practice as part of local Care Act developments.

Your local authority may have participated in assessments of need either at a population level or for specific types of services (e.g. through Joint Strategic Needs Assessments). You may also already be taking action at a local level to address some of the challenges they have identified and be working with other partners, such as through Health and Wellbeing Boards, to do so. Sharing these plans and any local challenges will give STPs/ICSs a more complete picture of demand and supply and ensure that ties between the services you provide and others within your STP/ICS footprint, are built. This will improve coordination of support for service users, help deconstruct barriers, and build new relationships between different services.

Engaging with providers and user-led groups

The knowledge and expertise of mental health providers can be an invaluable resource in shaping the future of community mental health. STPs/ICSs will be looking to build connections with providers across the population they work in. Providers are a key piece in the jigsaw between the NHS and local authorities. They have insights into where the gaps between services are and the type of support that the people they work with need.

The main point of contact for many providers will be your local authority. This means that you can act as the bridge between them and STPs/ICSs. Many providers commissioned by a local authority, particularly smaller providers that operate only at

a local level and are targeted at key parts of your community, will never have engaged with STPs/ICSs before and may not be aware of planned changes to community mental health. They may also lack the capacity to become strategically involved in the process independently.

Similarly, the user-led groups in your area will have a wealth of knowledge and expertise that can be key to the redesign of community mental health, but they may also be unaware of the changes that are due to take place or need support in making a contribution.

Your local authority can bring providers and user-led groups with you as you become more involved at STP/ICS level. This will strengthen relationships with both and equip them to be leaders in the future of community mental health.

A new approach to commissioning and local authority expertise

As part of the new approach to community mental health, STPs/ICSs will be looking to commission services in a more collaborative way, based on longer term partnerships and encouraging new relationships between services. This should see closer working between health, local authorities and the voluntary sector on the services in your area. It has the potential to amplify the efforts of all the partners involved in the work they do to support people severely affected by mental illness.

⁷ Public Health England, Community-centred public health: Taking a whole system approach, 2020

The expertise your local authority has in commissioning services will also be crucial to those working at an STP/ICS level. In many non-clinical areas, such as supported housing, your local authority will commission the majority of services available in your area.

That knowledge of how the services based on social model of mental health should be procured will be invaluable to STPs/ICSs as they establish the future of community mental health in their areas. It will also be key in ensuring that people severely affected by mental illness receive the broad spectrum of support they need to live independently in the community.

Combining assessments and support plans

Repeatedly telling your story can be extremely challenging for people severely affected by mental illness. This can have practical implications too, as different organisations work with the person in front of them, but not the other organisations involved in their support.

The new model of community mental health can change this and mean that people supported by both NHS and local authority services only need to share their story once. Doing this will enable the different partners involved in their care to increase the impact of both clinical and non-clinical support.

This new approach will require aligning systems and processes, such as referral pathways, including bringing the Care Programme Approach and Care Act Assessments closer together. You can shape the organisational connections needed to reduce assessments and increase collaboration. There will also be a corresponding increase in the use of personalised health and care budgets and personalised care planning. The expertise your local authority has in these areas will be invaluable to your local STP/ICS as they expand this approach.

Workforce

The availability of clinical and non-clinical staff will be key to the new model of community mental health. Its shape should be based on what is possible within the workforce available. This should see cooperation between the NHS, local authorities and providers in the short term, but also offers an opportunity to plan together for the future.

Your local authority will be aware of current staffing arrangements, as well as any gaps that need to be addressed and managed moving forward. This is an opportunity for integrated workforce planning across health, social care and the VCSE sector. Joining up in this way will help provide the most effective, well rounded support possible, and ensure the optimum use of the resources of all the partners involved.

Many local authorities and NHS Trusts are supporting a refocusing of mental health social workers, in order to utilise their expertise in community and family-based support and develop personalised strength-based community mental health. More details are available on the Health Education England website.⁸

Connections to Primary Care Networks

The new model of community mental health will see multidisciplinary teams closely aligned with Primary Care Networks (PCNs). PCNs will be one of the key components in the future of community mental health support is implemented around. Over time, other NHS and local authority staff will become more integrated with PCNs and work more collaboratively with them. The progress made to date on the role PCNs will play will vary from place to place, but connections between them and your local authority will become increasingly important.

If you need further information and support

Reach out to Rethink Mental Illness' dedicated Community Mental Health Framework Unit to speak with our team of experts - email cmhfsupport@rethink.org

For further information

Check out our previous guides on the CMHF aimed at STPs/ICSS on our website: rethink.org

To see our previous guides on the CMHF aimed at STPs, please see:

[Rethink Mental Illness, Thinking Differently, A 'first steps' guide for STPs on transforming community mental health services for people with moderate to severe mental illness and with complex needs, 2020](#)

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For further information
on Rethink Mental Illness
Telephone 0121 522 7007
Email info@rethink.org
rethink.org