

 NHS Brent Clinical Commissioning Group	Health and Wellbeing Board 20 October 2020
	Report from Phil Porter, Strategic Director, CWB
Outcome Based Review: Mental Health and Employment	

Wards Affected:	All
Key or Non-Key Decision:	N/A
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
No. of Appendices:	None
Background Papers:	None
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1.0 Purpose of the Report

- 1.1 Building on the previous update to the Health and Wellbeing board in July 2019, this report sets out the learning, impacts and proposals to be taken forward from Brent's Outcome Based Review (OBR) on Mental Health and Employment.

2 Recommendation(s)

- 2.1 For the Board to:
- note the work carried out as part of the OBR and the subsequent impact on the overall system for Mental Health and Employment in Brent.
 - Agree the recommendations for taking forward this work which are set out in Section 6 of this report.

3 Introduction

- 3.1 Since 2016, through a range of different work areas and projects, Brent has been exploring the challenges facing those with Mental Health conditions in accessing and sustaining employment.

- 3.2 Through this work, Brent along other key partner organisations in the borough have gained rich insights into the strengths and weaknesses within the system as a whole, and the impact that has had on those needing support.
- 3.3 Over the past six months, the Covid-19 pandemic has further exacerbated the level of need for support that residents of Brent will need going forward. Furthermore, not only has highlighted how much we have learned about the system of organisations and services in Brent that support Mental Health and Employment, but we are now seeing the positive impact that has been achieved to date in developing links, pathways and greater cohesion between partners.
- 3.4 This report sets out the background and learning from this work along with recommendations for ensuring we provide the foundations to further build on this moving forward.

4 Covid 19 Impact and Context

General

- 3.5 In 2020, the context of Covid-19 and its impact on Brent has resulted in additional challenges in relation to both employment and mental health.
- 3.6 Brent is one of the most culturally diverse boroughs in the country, something being recognised through a year of celebrations to mark Brent being named the 2020 London Borough of Culture. However, this has been overshadowed by the devastating impact of Covid-19 pandemic, with Brent being one of the worst affected areas in the country. Brent was the first London borough to reach 1000 cases and the first in the country to reach 100 Covid-19 deaths.

Economy

- 3.7 The economic impact of Covid-19 on the global and UK economy have been widely reported. According to PWC UK scenario modelling, the UK GDP is expected to contract by between 11% and 12% in 2020 before returning to growth of around 10% and 4% in 2021.
- 3.8 In June 2020, the BBC reported that Brent Central topped the table as the constituency with the highest proportion of furloughed workers, with 45% on the scheme. In July 2020, the Brent Poverty Commission identified that nearly 50,000 people in Brent had been furloughed, with prospects of rising unemployment likely in the Autumn.
- 3.9 A study conducted by Oxford Economics identified that the Brent economy is more reliant than other West London boroughs on lower value-added sectors, such as wholesale and retail and construction, and has correspondingly lower exposure to higher value-added employment sectors. The Brent economy also has above average exposure to sectors which are likely to be particularly impacted during the pandemic. In particular, the accommodation and food sector, and the arts, entertainment and recreation sector, are those likely to experience the largest rates of decline in output this year, together with the education sector.

- 3.10 Scenario modelling conducted by Oxford Economics on behalf of the West London Alliance (WLA) project contraction to the Brent economy in 2020 between 9% - 13.4%. Whilst the same modelling does anticipate a recovery in 2021, the initial contraction experienced in Brent is forecast to be greater than the average for London, and the rate of the recovery to be slower.
- 3.11 In terms of jobs, the Oxford Economic baseline forecast shows that workplace employment in Brent is forecast to contract by 5,000 or 3.2% in 2020, though with an economic rebound expected in 2021 recovering 3400 jobs. This scenario would see the strongest contributions coming from the accommodation & food services and the wholesale & retail sectors as the lockdown eases. However, a downside scenario forecasts a 4.0% contraction in workplace employment in 2020, with no return to growth until 2022.

Mental Health

- 3.12 In July 2020, the Centre for Mental Health published their second forecast on the mental health risks and implications of the pandemic. At that time they outlined that beyond their initial assessment which highlighted that the levels of psychological distress and mental ill health were rising internationally in the wake of Covid-19, it warned that a combination of challenging factors may affect the whole UK economy and have a major knock-on effect on mental health.
- 3.13 Working with with NHS colleagues, the Centre for Mental Health developed a model to forecast how many people may need mental health support as a result of the Covid-19 pandemic. Published in October 2020, the model predicts that up to 10 million people in England (almost 20% of the population) will need either new or additional mental health support as a direct consequence of the crisis. 1.5 million of those will be children and young people under 18.
- 3.14 Some groups are more at risk of experiencing mental ill health, including people with existing mental health conditions, NHS workers, ICU patients and their families, those who have been bereaved and those affected by unemployment.
- 3.15 Not only has Brent has been one of the hardest hit boroughs both in terms of covid-19 related mortalities and economic impact, but as highlighted through the work of the Brent Poverty Commission, it already faces an array of challenges around social, health and economic inequalities. All these factors are likely to increase the prevalence and risk surrounding poor mental health.

4 Background: Mental Health and Employment in Brent

- 4.1 The issues and challenges around work experienced by people with mental health conditions was explored during community research carried out as part of the Employment Support and Welfare Reform OBR in 2016.
- 4.2 The research identified that under the right conditions work is important to mental health recovery but you need to be fit to work and have the appropriate support with mental health. The research also highlighted the challenges some people face in regaining confidence and getting their life

back in order and that managing a job alongside your condition and treatment is hard. Where people are unsupported in these challenges they are less likely to remain or succeed in their job. The research also looked at the things which support and enable people. Support that focused on mental health alongside employment was seen as critical, as well as support to make small steps towards work being helpful.

- 4.3 Subsequently research conducted by Brent's Adult Social Care service that looked into the provision of employment support for mental health users in Brent. The research looked at referral routes into mental health services, the links between existing pathways and the breadth of current provision for mental health service users looking for employment. This research highlighted issues around referral pathways, misinformation between organisations as well as a general lack of cohesion.
- 4.4 In September 2018, building on the challenges identified through the 2016 OBR and Adult Social Care research, Brent began work on an OBR focussed specifically on Mental Health and Employment. The overarching objective of the review was to better understand how the council, working with key partners and service providers, could increase the number of people with Mental Health conditions thriving in work.
- 4.5 Recognising that this subject cuts across a range of sectors and organisations, a multi-organisational project board was assembled to oversee the project and provide perspectives from across the system. Chaired by Brent's Strategic Director for Community Wellbeing, the following organisations have been represented on the board:
- Brent Council
 - The Department of Work and Pensions
 - Brent CCG
 - NHS
 - Federation of Small Businesses (FSB)
 - West London Alliance (WLA)
 - Central and North West London NHS Foundation Trust (CNWL)
- 4.6 Brent's OBR model follows a design-led approach, broken down into four key stages - Discover, Define, Develop and Deliver. The aim of this approach is to understand the subject from range of different perspectives and to work collectively to identify and test new ways of doing things.

4.7 Discover and Define

- 4.7.1 The first phase of the discovery work consisted of looking at local and national data, reviewing relevant research and mapping the services and referral pathways currently in place. Initial engagement work was also conducted including interviews and focus groups with professionals, service providers and users.
- 4.7.2 Research at time estimated 16% of the adult population had a common mental health disorder (CMD) in Brent; slightly higher than the UK average (15.1%). Additionally, Brent had the ninth highest rate of depression in the UK with 5.3% diagnosed with the condition. There was a high inequality in Brent

between those diagnosed with a mental health condition and those who were not; with a 59.5% gap in employment rate between those in contact with secondary mental health services and the overall population.

- 4.7.3 In June 2019, a visioning day was held in Brent Civic Centre, bringing together all stakeholders that had been involved in the discovery phase. As well as all the organisations represented on the OBR board, this included service users and providers, colleagues from primary and secondary care, as well as senior council officers and members.
- 4.7.4 The purpose of the visioning day was to identify and agree key areas of need and collectively identify a number of initiatives or projects that could be taken forward to redress those issues within the system.

4.8 OBR: Key issues and findings

- 4.8.1 The work carried out during the 'discover' and 'define' phases of the OBR identified that whilst there was a range of good work already taking place and service provision that catered to most groups, there were still gaps some gaps that remained. One group in particular was identified as being under supported – those in receipt of Employment Support Allowance (Support Component). It was identified that whilst those within this group held aspirations for meaningful work, the existing DWP policy design meant there was very little proactive support actually being provided. Due to this there was a lack of engagement and support for the ESA Support Group despite there being 10,840 recipients of ESA in Brent with just over half having a mental health condition. Of the 5098 who have a mental health condition, 3770 of these are in the ESA support group.

- 4.8.2 In addition to the lack of support for those in receipt of Employment Support Allowance (Support Group), a range of challenges and issues were identified which can be grouped into three overarching areas:

- 4.8.2.1 **Links, communication and understanding between key facets of the system:**

The primary research undertaken captured perspectives and insight from a range of different professionals involved in delivering services relating to mental health and employment – these included colleagues in Health, DWP and Service Providers. This showed that there was a range of support available in Brent in relation to mental health and employment, the disconnect between different parts of the system and the challenges in finding out about what was available meant that even professionals working in the system were not aware of the range of support available.

Whilst some good working relationships were in place, there was an overall disconnect between the system as a whole. This spanned from organisations not having any idea what others did, through to knowing but lacking key information or the professional network that would enable them to connect. This meant that services were not able to refer or signpost service users to other relevant services.

- 4.8.2.2 **Navigation of the system for residents:**

Similarly, many residents were unaware of the support available to them or had various barriers to accessing that support.

Many residents with mental health conditions are reliant on a range of organisations working across the system in order to access the support required to obtain and sustain employment. The challenges for residents in navigating the system as a whole is further compounded by the professional disconnect, which can at times leave them stuck in the middle.

The impact of these negative customer experiences not only potentially further impact their mental health and wellbeing but can also prevent them from accessing the support they need. Below are some of the quotes taken from research conducted with professionals and services users:

- “We need a service that caters to our specific needs”
- “I just don’t know what support is out there”
- “It’s hard when you have to keep telling your story to lots of different services, and the thought of this can be too much”
- “When you have problems and the mind and body can’t cope, then it all breaks down.”

4.8.2.3 Employment opportunities and in-work support:

From an employment perspective, there are two main barriers that prevent those with mental health conditions from thriving in work; the first is obtaining work in the first place and the second is the support they receive thereafter to maintain work.

The first of these centres around inclusive recruitment practices. The extent to which an organisation’s recruitment processes actively supports and encourages applications from those with existing mental health conditions can act to discourage or encourage those from applying. Many recruitment processes, such as the use of written application forms, can be barriers which prevent applications being made or these applications from progressing to the next stage.

“Finding a job is not the problem – I just haven’t got the strength mentally and physically to sustain one at the moment.”

Brent service user

For those in work, the extent to which an organisation is equipped to promote and support mental health and wellbeing is critical to sustaining that employment longer-term. In the absence of a supportive and inclusive organisational culture and working practices, there is a reduced likelihood of work being sustainable.

5 OBR Projects: Responding to the key findings of the OBR and supporting Brent's Covid Recovery.

- 5.1 Following the visioning day in June 2019, the OBR moved into the delivery phase, with three projects identified and agreed to tackle the key issues highlighted on the day. Both the existing and anticipated impacts of the Covid-19 pandemic have only acted to highlight the importance of these OBR projects as a crucial mechanism to improve the system of support for Mental Health and Employment. Each of the projects are outlined below, along with details of outcomes and progress to date:
- 5.2 **Accessible Pathways:** Designed to connect key facets of the system, taking a whole systems approach at both operational and strategic levels.
- 5.2.1 Working groups were established at both levels, meeting monthly to develop a greater understanding of existing strengths and weakness of the system, build professional networks and identify opportunities to work more collaboratively to achieve shared purpose. With groups working toward the same overarching objective at both levels, there is a two-way communication which ensures they work in tandem and are able to support one another where needed.
- 5.2.2 The strategic group - which at the time of writing consists of the OBR Project Board members – aims to continue work in developing key relationships, along with shared understanding and purpose, at a leadership level. Whilst supporting and empowering the operational forum to work collectively in developing and implementing new ideas and solutions, it also provides a point of escalation where that cannot be achieved. Over time, this group has sought to identify opportunities for leveraging commissioning activity and policy making across the system to drive better outcomes for residents and increase efficiency.
- 5.2.2.1 Kim Archer, OBR Board member, representing the WLA has said the following:
- “Brent has been brilliant at developing a multi-agency systems approach to joining up services across CCG, LA and employment support providers services so that people with mental health issues who want to work will be able to access the support they need to find a job, help to stabilise their lives and sustain their recovery. This will put services in a really good position to respond to the impact of covid. ”*
- 5.2.3 The operational working group – the Mental Health and Employment Forum – consists of a range service providers, Job Centre Plus staff, social prescribing Link Workers and Brent’s employment team. Meeting monthly since September 2019, the group has worked collectively to help develop briefings and training for both one another and Social Prescribing colleagues in Brent. Furthermore these sessions have evolved to become a space in which ongoing issues and challenges are surfaced, discussed and solutions explored. Where there are blockages or issues that cannot be resolved at an operational level, there is an established route of escalation into the Strategic Board.
- 5.2.3.1 Rash Patel, OBR Board member, representing the CNWL, shared the following:

“Brent Council have brought together providers and residents to co-produce a Mental Health & Wellbeing strategy which enables local providers to work together to identify gaps in supporting residents in Brent access paid employment. There have been a lot of discussions and group work in terms of the local labour market, the types of vacancies available, the local employers the groups they are working with, sharing of best practice and the vision of how we Brent providers want to work collaboratively in order to support our residents back into work”

5.3 Navigator Pilot: Designed to support people with a mental health condition to access employment support services at the right time in as simple a way as possible.

5.3.1 Initially, the pilot was designed and developed to test a direct route, for those with mental health conditions wishing to work, from primary healthcare settings through to DWP work coaches before then being referred on to established employment support providers. This was due to take place with two different referral origins. One that would test co-location with a social prescribing link worker based in a GP surgery, and another that would see a Mental Health Liaison Practitioner referring through to the same work coach based in the Willesden Community Hub 1 day per week.

5.3.2 Working across the system, with several organisations being key to the pilot's delivery, presented an array of complexities and complications which significantly delayed the pilot going live. Despite this, the relevant resources and approach were finally agreed in February 2020 with a targeted start between March and May 2020 subject to the clearing of DWP resources. However, with the outbreak of the Covid-19 pandemic in March 2020, the pilot was put on whilst all partners focussed on their immediate response to the crisis.

5.3.3 In July 2020, a workshop was held with all key delivery partners and members of the Mental Health and Employment forum. There was universal agreement that the purpose for which the pilot was first designed was going to be more relevant than ever in supporting the long-term recovery from Covid-19. With this in mind, the objective of the workshop was to take the key principles of the original pilot and develop a reimagined pilot that took consideration of the many changes that Covid-19 had wrought.

5.3.4 The redesigned pilot went live in August 2020, with a stripped back model in the first instance that could be refined and developed further as the pilot progressed. Aside from the need for the newly designed pilot to be able to be delivered remotely, the main differences to the original pilot design were largely driven by resource availability of delivery partners, and saw the following changes at the point of launch:

5.3.4.1 The starting point for all referrals would be Social Prescribing Link Workers. Mental Health Liaison Practitioners would not take part in the pilot to begin with, but opportunities would be sought to incorporate them at a later stage.

5.3.4.2 The DWP work coach would not be part of the pilot in the first instance. Instead all referrals would go directly from a Social Prescribing Link Worker to

one of two providers of Employment Support services; Shaw Trust ¹ or Twining Enterprise².

- 5.3.5 Between the pilot going live on 11 August and the end of September, there have not yet been any referrals. Work is ongoing between Brent's Transformation team – which are coordinating the pilot – and Social Prescribing Link workers to identify any issues that might be preventing referrals.
- 5.3.6 The pilot is scheduled to run for a period of 6 months and will report into the Health and Employment Board – a new strategic group that has been proposed as the mainstream replacement for the OBR strategic group (see section 7.1).
- 5.3.7 In order to optimise impact and learning from the pilot, it will be critical that all key delivery partners are committed and supported within their respective organisations to progress the work as necessary.
- 5.4 **Pathways into Major Employers:** Working with employers in Brent to identify ways to create more opportunities, increase rates of employment and improve in-work support for those with mental health conditions.
 - 5.4.1 Led by Brent's Employment and Skills Team, the aim was to engage with major employers to gain a better understanding of existing recruitment and HR practice, and what type of support would be needed to be more proactive in recruiting and supporting employees with mental health conditions. Furthermore, the team sought to optimise engagement activities that could help build direct links between employers and employment support providers, as well as increase awareness of existing support and training that businesses could be accessing.
 - 5.4.2 A 'Business Roundtable' event was held on 27 November 2019 with representation from several large local employers as well as the Federation of Small Businesses. There were presentations from Improving Access to Psychological Therapies (IAPT), Shaw Trust and the DWP on their various offers to employers as well as facilitated discussions around the challenges and barriers to recruiting and supporting employees who have a mental health condition. Outcomes from the day included a commitment to support the co-ordination of mental health training for SMEs in the borough.
 - 5.4.3 In conjunction with Brent for Business, the council was scheduled to host a Business Expo in April 2020. Amongst other things, this event aimed to bring together some of the information outlined above to raise awareness and access to support for business, including free mental health training for SMEs. However, due to the Covid-19 pandemic, this event was postponed.
 - 5.4.4 On reviewing the options for the most efficient way of the council driving improved and more inclusive employment practice across the borough, the

¹ Shaw Trust are a social purpose organisation which helps disabled and disadvantaged people into employment and independent living.

² Twining Enterprise is a leading mental health charity that provides employment support to help people gain access and retain work.

Disability Confident Kite-mark was identified. With kite-mark schemes providing established frameworks for best practice, they offer the most effective mechanism through which employment opportunities and support can be influenced on a large scale.

- 5.4.5 The Disability Confident kite-mark supports all of the key elements required to develop more inclusive recruitment practices and greater support for those with mental health conditions in the work place.
- 5.4.6 Recognising its role as a leader, as well as being one of the major employers in Brent, the council undertook a commitment to become Disability Confident Leaders and develop our practice to lead by example in obtaining the Level 3 accreditation. In becoming a Disability Confident Leader, the council will help drive the agenda forward and support other employers to make the journey to become Disability Confident.
- 5.4.7 In June 2020, Brent moved from being 'Disability Confident Committed' (Level 1) to a 'Disability Confident Employer' (Level 2), with an action plan in place to be recognised as Disability Confident Leader (level 3) in 2021.
- 5.4.8 The action plan to become a Disability Confident Leader (Level 3) includes utilisation of the council's procurement powers through the Social Value Act. Contracts over £100k where appropriate will be encouraged to become Disability Confident employers.

6 Wider work, impacts and Learning

- 6.1 Capturing clear and measurable outcomes has been a challenging aspect of this OBR as well as the subsequent projects that were developed to address the key areas of need. Much of the impact and outcomes achieved through this work to date are difficult to measure, predominately stemming back to the development of the professional networks, relationships and referral routes across the system. Whilst these achievements are harder to define and measure, the bridging of these gaps has undoubtedly left the Council and key partners in a stronger position to work collectively moving forward in supporting residents with mental health conditions back in to work.
- 6.2 Where there are clear opportunities to outline and measure harder targets such as referral numbers, residents supported in to work or the number of employers with Disability Confident accreditation, these have been outlined within the recommendations section (see section 7)
- 6.3 Shaheen Patheen, OBR Board member representing the DWP, shared the following feedback on the overall impact of collaborating on this OBR and subsequent projects:

"Having the opportunity to join the OBR meetings and the Provider forums has certainly given DWP more exposure to the community, raised the DWP brand and given us opportunity to engage with new Partners & Stakeholders. The Partnership collaboration has given JCP more awareness of the local authorities objectives and knowledge of the specific organisations services which I have shared with Work Coaches in Harlesden & Wembley Jobcentre

Plus Offices. These have been very useful links that have helped some of our vulnerable customers registered with JCP.”

6.4 Opportunities to support wider health conditions into employment

- 6.4.1 There are other health conditions, beyond mental health, for whom barriers exist in accessing and sustaining employment. For a number of people, a mental health condition may also be accompanied with other health conditions or disabilities. Whilst there will be a range of different support requirements across the spectrum of individual needs, it will often involve many of the same organisations who are supporting those with mental health conditions. Furthermore, many of the same challenges will apply; helping people to access the right support at the right time and creating inclusive and accessible work places.
- 6.4.2 Whilst, mental health should be the primary focus for this point in time, the ongoing work and system-wide collaboration being taken forward will also provide opportunities to improve support for those with wider needs in the longer term.

6.5 Brent as an Employer

- 6.5.1 Throughout this process, the council has recognised its own role as a major employer and in championing good practice in the borough. In addition to the work Brent has undertaken with regard to the Disability Confident scheme, the council already had a range of support in place to support Mental Health, ranging from information and articles through to direct access to free counselling and the Employee Assistance Scheme. However, over the past 12 months, Brent has continued to review and develop its practice and provision to increase support for Mental Health and Wellbeing in the work place. This includes:

- Mental Well-Being Champions: Developed through partnership and joint working in the Council, Brent now has 53 Champions registered with training to follow.
- Domestic Abuse Champions course completed in July 2020, with 30 champions providing support to staff across the Council. Brent's Housing Needs department received accredited DAHA status in October 2020, recognising outstanding support for victims and survivors of domestic abuse
- Forward Together – all staff conferences focussed solely on Mental Health
- Brent Talking Therapies on-site clinic at Civic Centre three times a month.
- Brent Talking Therapies Workshops covering Mindfulness, Depression, Anxiety, Stress Awareness
- A range of digital resources, promoted internally and available through the employee learning and development platform, the Learning Hub.

6.6 Social Prescribing Development Sessions

- 6.6.1 Beginning in November 2019, and led by Brent's Director of Health and Social Care Integration, Brent started a new initiative to develop an ongoing

programme of development sessions for colleagues working in health, such as Link Workers and Care Navigators. Focussing on staff working closely with GPs as part of the Integrated Care Partnership - and specifically those people providing 'care navigation' and 'social prescription' support - the aim of these sessions is to develop the knowledge and understanding of services provided by the Council and other partners working in Brent. Through these sessions, health staff were able to develop their professional networks and relationships, as well as establish the most effective routes for referral and ongoing communication. Topics covered to date have included the following subject areas:

- Housing: Homelessness, Private Housing Services & Licencing, Brent Council Housing and Housing Associations
- Outcome Based Review for Mental Health and Employment
- Employment Support Service Offers: Brent Works, Shaw Trust Work and Health Programme, Twining IPS Trailblazer, SEIDS
- Job Centre Plus: out of work benefits and employment support
- Brent Community Hubs
- Adult Social Care
- Making Every Contact Count

Topics identified for potential future sessions include:

- Support for suicidal patients
- Dementia
- More Housing and Homelessness
- Work Capability Assessments
- Grooming
- Priority for those with physical disabilities
- Permitted work

6.6.2 Moving forward, opportunities for future social prescribing sessions will continue to help support and develop the professional networks for these roles that are considered key to primary care. By helping to ensure health colleagues are equipped to divert patients without immediate health needs away from GP surgeries and through to right support, it will free up capacity within those surgeries for those people who do need a GP appointment, and in turn helping to reduce attendance at A&E.

6.7 System Challenges

6.7.1 Working across the system proved to be challenging and at times made it difficult to progress parts of the project. There are a number of factors contributing to this, beginning with a general lack of knowledge, understanding and professional relationships across the wider system. Whilst pockets of collaborative working existed between some parts of the system, a number of gaps do exist, most notably between health and the other key facets.

6.7.2 Whilst many parts of the system are working with the same residents, the lack of joined-up working often makes it all the more difficult for that person's needs to be addressed effectively. Despite there being a range of good provision available to support individuals with their mental health and moving

into employment, a lack of coordination and collaboration across the system hinders the mutually beneficial impact of that work.

- 6.7.3 The organisations that have been involved in this OBR have helped to unpick some of the complexities and challenges currently preventing more people with mental health conditions from obtaining and sustaining employment. However, all those involved are currently working to their own internal objectives, delivery plans and timescales. So, whilst there has been a shared appetite and desire to work collaboratively to better understand how we can improve outcomes in this area, the key activities that will be necessary to achieve this, currently lacks a set of shared, system wide and multi-organisational objectives and delivery plan.

7 Recommendations

The recommendations made in this section aim to ensure that the strategy for Brent and key partners across the borough is multi-faceted in its approach for in further developing support and opportunities for those with mental health conditions in the work place. They aim to build upon existing strengths whilst also leveraging opportunities to influence and shape interconnected areas of work to achieve alignment where possible.

7.1 Health and Employment Board

With the OBR being formally concluded, the board overseeing that work will also cease. In order to ensure there is a multi-agency strategic oversight moving forward, it is proposed that a new board be formed to build upon the work of the OBR on an ongoing basis. The recommendations for this board as follows:

- 7.1.1 The Health and Employment Board is established to build upon the work from the OBR and take the agenda forward.
- 7.1.2 The board will focus and frame efforts on the three critical system aspects identified through the OBR:
- service user navigation
 - joining up the system
 - employment opportunities and support
- 7.1.3 The board will primarily be focussed on mental health and employment, though with the flexibility to support employment for other health conditions where considered appropriate by that board. The objectives of the board will be set annually and delivered through an annual action plan.
- 7.1.4 Meeting quarterly, the board will be chaired by a senior officer at Brent Council and will report to the Health and Wellbeing board annually
- 7.1.5 Where possible, the board should include representation by the following key organisations and services; Council, the DWP, the CCG, ICP, NHS, flexible business representation, key service providers

7.2 Navigator Pilot

- 7.2.1 The OBR Navigator pilot will run for a six month period from August 2020, during which time it will be co-ordinated and supported by Brent's Transformation team and overseen by the new Health and Employment Board.
- 7.2.2 Opportunities to expand the pilot or deploy into other social prescribing settings in Brent will be reviewed and considered by the Health and Employment Board.
- 7.2.3 Navigator pilot delivery partners working in primary care should commit to a collective target of 10 referrals per week, over the course of the pilot. Where potential candidates are not suitable for the provision available, basic monitoring should be captured to help identify how the type of provision might be further developed to address any gaps.

7.3 Operational Forum

- 7.3.1 The operational forum will continue to run and be expanded where necessary to include representation from colleagues in primary care and other key partners / organisations
- 7.3.2 The forum will be led by Brent's Employment, Skills and Enterprise Team and will move to a quarterly frequency. The transformation will support the transition of the board to the employment and skills team, helping to develop the membership and leadership therein for longer-term sustainability
- 7.3.3 Where new referral routes are developed and increases in residents accessing services are achieved, forum partners should aim to capture and quantify these impacts.

7.4 Employment Opportunities and Support

- 7.4.1 All organisations forming the core membership of the Health and Employment board should work toward attaining the Disability Confident Level three accreditation where possible.
- 7.4.2 The Health and Employment Board will seek to develop greater opportunities and support for those with mental health conditions by promoting and encouraging the organisations and businesses we collectively work with to obtain the Disability Confident kitemark.
- 7.4.3 The objective will be to increase the number of Disability Confident employers in Brent by 15% within each of the three tiers by April 2022.

7.5 Health Inequalities Programme

- 7.5.1 To ensure close links are established with the work of the Health Inequalities Programme, as it seeks to align streams of work with shared priorities and vision, focussing on protecting people from covid-19 and tackling entrenched health inequalities.

7.5.2 For the Health and Employment Board and Mental Health and Employment forum to identify opportunities to develop professional networks and referral routes that can support and strengthen the Health Inequalities Programme

7.0 Financial Implications

7.1 None

8.0 Legal Implications

8.1 None

9.0 Equality Implications

9.1 None directly

10.0 Consultation with Ward Members and Stakeholders

10.1 N/A

11.0 Human Resources/Property Implications (if appropriate)

11.1 None

Report sign off:

Phil Porter

Strategic Director Community Wellbeing, Brent Council