

**Jersey Recovery College**  
**Follow-up review of mental health services**  
**Scrutiny Review - Health and Social Security Panel**

1. Please could you provide the Panel with details about whether, in your experience, the Covid-19 pandemic has changed the need, or the requirements, for Mental Health Services in Jersey. Please provide any further data, or details, where possible.

The Pandemic highlighted the need for mental health services to be more joined-up and to act as one system. During the Pandemic many services were cancelled, for example, Jersey Talking Therapies and specialist maternal mental health services. The Third Sector stepped-in by offering more counselling and talking services (Liberate and Mind Jersey) and more virtual services such as JRC's virtual service offer, but we heard repeatedly that there was a lack of signposting to available, self-referral services. People were left with cancelled services and no information about where else they could turn. This was exacerbated by the lack of access to GPs.

There needs to be much more joined up thinking between the third sector and statutory services. The Island has a number of excellent, self-referral, accessible services that people can access themselves but there is a lack of awareness of these and signposting to them. The Mental Health Network project during the Pandemic raised some awareness but a lot more needs to be done to create one system where service users can move seamlessly between services, and where there are alternatives offered when a particular service cannot support an individual. Staff in all services across the system should be made aware of what else available and should actively be signposting.

2. Please could you provide the Panel with details about whether, in your experience, the Covid-19 pandemic has impacted the provision of Mental Health Services in Jersey? Please provide any further data, or details, where possible.

All services – statutory, private and third sector - are still being impacted by staff absences due to COVID. We are hearing from our service users that it has been more difficult to speak to adult mental health and we have found it difficult to secure private therapists to support our team.

Our service users have also said that the restrictions and government/media messaging has heightened feelings of isolation and fear. This will take time to address as we come out of the Pandemic and it's important there are multiple, available services to support this.

3. Do you consider that there have been any good, or positive, changes in the delivery of Mental Health Services in Jersey in the period since 2018? If you are unable to comment on change specifically, but have positive experiences to relate, the Panel would be grateful to receive this information.

The environment at Orchard House has improved and it's encouraging to see service users shaping the service with weekly meetings.

The Listening Lounge, Jersey Eating Disorders and Mind Jersey's enhanced peer support services are a welcome addition to the landscape. We have seen more focus on severe mental illness through Focus on Mental Illness's Focus Up group and Mind Jersey. Acorn has also greatly enhanced its therapeutic offer through the expansion of its reuse business. And Grow is a welcome community initiative that can support mental wellbeing.

The Mental Health Network has made it easier for organisations to share what they are doing.

At JRC we have expanded our curriculum to include courses around mental health conditions and the impact that chronic physical conditions have on mental health. We are also introducing accessible courses for those with Autism and sight impairment. We have developed co-production

training which was delivered to the Improvement and Innovation teams at HCS. Finally, we have launched a workplace mental health training programme designed to shift cultures and create mentally healthy businesses.

4. Do you consider that there have been any bad, or negative, changes in the delivery of Mental Health Services in Jersey in the period since 2018? If you are unable to comment on change specifically, but have positive experiences to relate, the Panel would be grateful to receive this information.

There has not been as much progress made as we all would have liked on systematic improvement, the Pandemic has been hugely derailing.

The Mental Health Improvement Board has not met regularly over the past few years leading to a lack of joint up thinking across the system and a lack of direction.

Staff shortages and service demands continue to limit how we can innovate and work in partnership across the system.

5. What, if anything, could improve the patient experience of Mental Health Services?

Co-production needs more focus and investment, including the development of an engagement strategy so that any organisation engaging service users can do so in a guided way. There needs to be greater understanding of the co-production model across the system and how to do it well, JRC offers training in this area. In order for co-production to become embedded it needs to be supported with suitable timeframes and budgets.

More credibility needs to be given to peer working and the important role peers can play across the mental health system. We should be working towards co-produced service delivery which involves peers being embedded in services. JRC is working with The Peer Network to bring in a training course to Jersey for anyone wishing to be a peer in health services. We are looking at a course designed by ImROC that is requested by the NHS for it's peers. This would provide a skills benchmark.

The more that those who access services can shape and deliver them, the more fit for purpose those services will be.

6. Do you have any other comments about how Mental Health Services in Jersey have changed since 2018? The Panel would welcome any comments or information which may relate to the findings and recommendations of the initial review (see appendix).

There is a lack of strategic direction in mental health which exacerbates siloed working. There is no current mental health strategy, the Mental Health Improvement Board has been disbanded and the current commissioning structure does not support partnership working. There is a Mental Health Improvement Plan, but we have had very little involvement with it. The Mental Health Improvement Board is being replaced by a Systems Board, chaired by Public Health, which is a welcome move, but has yet to be established. The Commissioning Strategy has been redesigned and is being launched this year, but again that will take time to embed. We have the Mental Health Network which meets bi-monthly but this is an operational network, and without a strategy to align with and a commissioning structure to support joined-up solutions, the network can only achieve a small part of its potential. We believe a strategic approach is required to move the mental health agenda forward and this needs to be co-produced with service users and families. We also need more focus on suicide prevention.