Within the over-riding objective of improved mental health and well-being, we have identified our key objectives that we wish to prioritise during the next three years, and grouped these under four broad but overlapping themes.

Our proposed specific priority objectives for the next three years within each of these four over-arching themes are set out in the table below. There are of course overlaps between each of them, and most of the proposed priority objectives will help to address more than one of the over-arching themes.

Some objectives are CCG-wide, others are of particular importance for individual Local Commissioning Groups or specific areas within Cambridgeshire or Peterborough.

| Theme | Priorities |
|------------------------------------|---|
| 1. Prompt Access to Effective Help | Introduce a single-point of access Advice and Resource Centre (ARC) to local mental health services |
| | 2. Re-design local pathways for people with mild-to-moderate mental health problems to increase access to psychological therapies and offer a wider range of other helpful interventions, with a strong emphasis on community provision of mental health services in non-stigmatising locations whenever possible3. Ensure equitable access to the services that we commission throughout Cambridgeshire |
| | 4. Address barriers to access to "main stream" mental health services for marginalised groups of patients (e.g. ethnic minorities, learning disabilities, deaf people, travellers); |
| | 5. Ensure a smooth transition into adult services for children and adolescent with mental health problems; |
| | 6. Improve access to diagnosis and local support for people with the life-long conditions Autism and ADHD |
| | 7. Exploit whenever appropriate the opportunities offered by modern information technology to widen the range of ways through which people can access effective help |

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| 2. The "Recovery" Model | Promote the social inclusion of people with mental health problems |
| | 2. Improve support for Carers |
| | 3. Maximising the independence of service users through the use of self-directed support and other opportunities to promote personalised care |
| | 4. Modern purpose-built facilities for those requiring in-patient admission |
| | 5. Ensuring there is access to a specialist community-based forensic mental health service throughout Cambridgeshire and Peterborough |
| | 6. Improved partnership working between primary care, secondary services, and voluntary organisations to strengthen the local response to people who may be at risk of suicide |
| | 7. Continue to challenge stigma through our mental health promotion activities |
| 3. The Inter-Relationship between Physical Health | Improve the physical health of people with severe and enduring mental health problems |
| and Mental Health | 2. Explore the opportunities for psychological therapy and other interventions to improve the health and well-being of people with long-term conditions such as diabetes, asthma and chronic pain |
| | 3.Introduce Liaison Psychiatry Services to local hospitals. Liaison Psychiatry Services (LPS) work at the interface of physical and mental health, addressing the psychiatric and psychological needs of people with physical health problems who are |
| 4. Improve Our Commissioning Processes | being treated in physical healthcare settings 1. Focus on outcomes achieved for local service users as our key measure of the effectiveness of the services that we commission; |
| | 2. More closely monitor the quality of local services, including safety, patient environment, risk assessment, and especially for those with severe and enduring mental illness |
| | 3. Systematically use data from local Joint Strategic Needs Assessments to ensure equality of access to the services that we commission |
| | 4. Systematically use feedback from the Cambridgeshire Service User Network and equivalent forums in Peterborough to determine appropriate outcome measures, as a key measure of service quality, and to help us improve services |

| generally |
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| 5. Continue to improve the quality of data collected about local services so that this can be reliably used as the basis for future commissioning decision |
| 6. Strengthen our links with local Carer groups in order to improve the feedback we receive from them about local services |
| 7. Develop a commissioning framework for the services provided by local voluntary organisations |
| 8. Ensure that the mental health services we commission are evidence need based and value for money |
| 9. Ensure through our contract management that there is partnership working between local service providers (including substance misuse services) in order that patients receive an integrated and seamless service |
| 10. Continue and strengthen the already close working between the respective local commissioners of health and social care |

We have also cross-checked these priorities with the key themes set out in the 'No Health Without Mental Health' Implementation Framework. This illustrates how we have planned to address the issues identified within the document and ensures all of its main priorities are covered within this commissioning strategy.

| Theme | Priorities |
|--|---|
| More people will have good mental health | Improve support for Carers Contribute to the Health and Wellbeing Boards in addressing the priority areas for mental health and well-being across Cambridgeshire and Peterborough, as reflected in the draft Health and Well-Being Strategies Explore opportunities to invest in preventative interventions in a range of settings to promote mental health and well-being Local NHS and local authority commissioners to continue to promote the health and well-being of their workforce |
| More people with mental health problems will | Maximising the independence of service users through the use of self-directed support and |

| recover | other opportunities to promote personalised care |
|--|---|
| | Modern purpose-built facilities for those requiring in-patient admission |
| | Re-design local pathways for people with mild- to-moderate mental health problems to increase access to psychological therapies and offer a wider range of other helpful interventions, including counselling and online support. |
| | Ensure there is access to a specialist community-based forensic mental health service throughout Cambridgeshire and Peterborough |
| | Address barriers to accessing to "main stream" mental health services and explore methods to best engage with marginalised groups of patients (e.g. ethnic minorities, learning disabilities, deaf people, travellers, etc.); |
| | Improve access to diagnosis and local support for people with the life-long conditions Autism and ADHD |
| | Exploit whenever appropriate the opportunities offered by modern information technology to widen the range of ways through which people can access effective help |
| More people with mental health problems will have good physical health | Improve the physical health of people with severe and enduring mental health problems |
| | Explore the opportunities for psychological therapy and other interventions to improve the health and well-being of people with long-term conditions such as diabetes, asthma and chronic pain |
| | 3. Introduce Liaison Psychiatry Services to local hospitals. Liaison Psychiatry Services (LPS) work at the interface of physical and mental health, addressing the psychiatric and psychological needs of people with physical health problems who are being treated in physical healthcare settings |
| More people will have a positive experience of care and support | Continue and strengthen the already close working between the respective local commissioners of health and social care |

- Introduce a single-point of access Advice and Resource Centre (ARC) to local mental health services
- Ensure a smooth transition into adult services for children and adolescent with mental health problems, using the learning from our 14-19s IAPT pilot;
- 4. Focus on **outcomes** achieved for local service users as our key measure of the effectiveness of the services that we commission;
- Introduce a "quality dashboard" to help us more closely monitor the quality of local services, including safety, patient environment, risk assessment, and especially for those with severe and enduring mental illness
- 6. Systematically review data from local Joint Strategic Needs Assessments to ensure there is equitable provision and targeting of mental health services that is based on evidence and need."
- 7. Systematically use feedback from the Cambridgeshire **Service User Network** and equivalent forums in Peterborough to determine appropriate outcome measures, as a key measure of service quality, and to help us improve services generally
- Continue to improve the quality of data collected about local services to strengthen performance management and also contribute to the JSNA in order to inform future commissioning decisions.
- Strengthen our links with local Carer groups in order to improve the feedback we receive from them about local services
- Develop a commissioning framework for the services provided by local voluntary organisations
- Ensure that the mental health services we commission are evidence need based and value for money
- 12. Ensure through our contract management that there is **partnership working** between local service providers (including substance misuse services) in order that patients receive an

| | integrated and seamless service |
|--|--|
| Fewer people will suffer avoidable harm | Improved partnership working between primary care, secondary services, and voluntary organisations to strengthen the local response to people who may be at risk of suicide |
| Fewer people will experience stigma and discrimination | Promote the social inclusion of people with mental health problems. Continue to challenge stigma through our |
| | mental health promotion activities. |