

MAYOR OF LONDON

Dr Onkar Sahota AM

City Hall
The Queen's Walk
More London
London SE1 2AA

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Dear Onkar,

Thank you for your letter of 30 January and for sharing the report 'Supporting mental health for all'. This comprehensive report shines a light on issues we already know to be true, that certain groups of people still struggle to access the services they need, further impacting on their health and exacerbating health inequalities.

Your report helpfully focuses on the particular needs of LGBT+, disabled, and deaf Londoners and those with experience of the criminal justice system. It was of interest to officers finalising the Health Inequalities Strategy, and will be of interest to a range of partner organisations beyond Thrive LDN in London who I would encourage you to share it with.

Please find my response to each of the report's recommendations below.

Recommendation 1: Thrive LDN should work with organisations representing marginalised groups to design and disseminate resources that are specifically targeted at helping GPs and mental health trusts to develop more welcoming environments and practices. The Mayor should also work with London's GP leaders to lobby Government to address the concerns of GPs regarding the impact of high workloads and short consultation times on the mental health of both service users and staff

Partnership working and empowering organisations locally and across London is key to the success of Thrive LDN. Through Thrive LDN, the Greater London Authority (GLA) has commissioned an independent research project to engage with organisations and Londoners to help better understand how the discrimination people face due to their identity affects their mental health and wellbeing. The results of this will be available later this year and will inform further action to address issues raised.

The Healthy London Partnership is also taking forward a GP and pharmacy pilot focusing on improving the health and wellbeing of staff within GP and pharmacy settings. This is a goal shared in the Five Year Forward View and GP Forward View, and workplace health has been identified as one of the key STP prevention priorities. My London Healthy Workplace Charter, a free accreditation scheme which recognises and rewards employers for investing in workplace health and wellbeing, forms a core component of this pilot and will be trialled with participating GP Practices.

MAYOR OF LONDON

GLA officers meet regularly with GP leaders to discuss the challenges and opportunities in primary care, and how the Mayor can support general practice in London. This includes discussion at the London Health Board that I chair.

Recommendation 2: Through Thrive LDN, the Mayor should work with the third sector to broaden the availability of specific diversity and inclusion training that focuses on the experiences of LGBT+ people, disabled people and Deaf people, identifying the common behaviours and actions of staff that give rise to an increased experience of marginalisation. This should form part of the Mayor's drive to increase mental health first aid training

Diversity and inclusion training is mandatory for all NHS staff and is provided locally. Through its work with voluntary and community sector organisations, Thrive LDN aims to shine a light on the inequalities that exist for people experiencing mental health difficulties. One of my key ambitions in the Health Inequalities Strategy, due for launch later this year, is to inspire more Londoners to have Mental Health First Aid training. In addition, my draft Equality, Diversity and Inclusion Strategy commits to tackling barriers and inequalities that still hold back too many Londoners.

This report from the Assembly Health Committee provides further evidence that much still needs to be done to break down the barriers that some people face when accessing health services.

Recommendation 3: The Mayor should press Clinical Commissioning Groups to jointly commission communication support services to Deaf patients, to improve the level and standard of these services, achieving economies of scale. This process could be managed through the London Health Board

Enabling access to services for deaf patients is important in order to reduce the barriers they face both in everyday life, and in engaging with healthcare. I will write to the chair of London Clinical Commissioning Groups asking them to consider your evidence and recommendations.

Recommendation 4: The Mayor should include the adequate and sustainable funding and provision of mental health services as one of the key assurances he is requiring of all five London STP plans. Any further analysis of the five London STP plans conducted by the Mayor should include a specific assessment of the impact of the proposals on access to mental health services, based on current and future demand. The Mayor should write to the committee setting out how he intends to hold STP leadership to account on this issue

Health service provision falls outside my responsibility and the Committee will be aware that it is the Secretary of State for Health and Social Care who is responsible for delivering a comprehensive health service in England, and for ensuring there is sufficient funding to achieve that.

However, it is my policy to "champion and challenge" the NHS and the decisions it makes.

I agree with the Committee that we need to hold the responsible ministers to account for their leadership in this area. The six assurances I set out following the original King's Fund publication about the five London STPs, relate to all health services – including mental health. One of these six assurances relates specifically to funding – where I have said that the plans need to demonstrate how sufficient funding has been identified (both capital and revenue) and is available to deliver all aspects of the plans.

MAYOR OF LONDON

As you may know, I have asked the King's Fund to undertake a further piece of work on the five London STPs – to advise me on how the work of the STPs has developed since the original publication of their plans. Their work will focus on the STP plans overall rather than looking at one specialty or service area, though providers of mental health services will be represented in this further work. It is important that the final STPs deliver against expected demand both now and in the future for Londoners' physical and mental health, and officers have reiterated this point.

Recommendation 5: The Mayor should review the membership of the London Health Board to ensure that third sector organisations working with marginalised communities are represented at Board level. This will help ensure that the increasingly key role that the voluntary sector plays in supporting health in London is recognised

Membership of the London Health Board (LHB) is an ongoing matter for the LHB and as such is constantly under review, including how to ensure appropriate service user and lay voice to inform the work of the Board. The annual public engagement event held by the LHB provides an important opportunity to engage both the voluntary and community sector, and Londoners, in its work.

Recommendation 6: As part of his plans to lead efforts towards a zero-suicide city, the Mayor and Thrive LDN partners should produce an updated suicide audit tool or template for use across all London boroughs, identifying and addressing gaps in the data that is currently collected. The Mayor should write to the Chief Coroner to request guidance be issued to provide for more consistent recording of data on deaths by suicide

Following this recommendation, I suggested that work around data and suicide should be incorporated as part of Thrive LDN's 'Zero Suicide City' aspiration. This position was shared with Thrive LDN's multi-agency Suicide Prevention Group, who identified an information sharing tool to create a more consistent picture of suicides across London as a priority. Thrive LDN's Suicide Prevention Group is liaising with the London Coroners Group to involve and engage them with this work.

Recommendation 7: Thrive LDN programme leads should publish details of how it will evaluate its activity to date, and how it will monitor its future activity, to identify whether it is reaching the particular demographics who are under-served by existing mental health support. Thrive LDN programme leads should also develop best practice guidance for local partners on how to monitor this

Thrive LDN programme leads should publish details of how they have engaged with Healthwatch and other patient and service user representatives' groups in the development of the programme and how they will continue to do so in the future

Thrive LDN projects have developed from their work engaging with hundreds of experts, by profession and by experience, across London's public, charitable and business sectors. Each project is underpinned by a Theory of Change, developed with support from Public Health England (London region).

The majority of Thrive LDN projects have, or will have, built in evaluation frameworks to measure feedback and impact in 2018/19. The Thrive LDN team is currently undertaking an evaluation gap analysis. Following this, an evaluation framework to measure the collective impact of the overall citywide movement and business case will be developed.

MAYOR OF LONDON

Recommendation 8: The Mayor should examine the potential role of his office and/or Thrive LDN in signposting people towards appropriate third sector services. Thrive LDN programme leads should also review the accessibility of existing information relating to the programme. Specifically, the website should be updated to include British Sign Language content, text contacts for support services and plain English versions of key documents

I want more people to have access to groups, networks and local assets that make their communities a healthy place. One way to do this is through social prescribing. Evidence indicates that social prescribing may be particularly helpful to people experiencing poor mental health, and improving mental wellbeing is a common goal for people taking part.

Accessibility of Thrive LDN information for all is an important point that I believe needs further discussion at the appropriate level. I have asked that this is presented at the next meeting of the Thrive LDN Oversight Group.

Recommendation 9: Thrive LDN programme leads should review all public facing materials including advertising and case studies, to ensure that these are representative of the full range of people in London who experience mental illness

Working at a local and community level is a key part of Thrive LDN. Through this we can better understand the needs of our citizens and work together with our partners to ensure everyone has good mental health. The report is quite right to highlight the importance of citywide representation amongst Thrive LDN publications, as without this it becomes harder to achieve inclusivity of all.

The Thrive LDN team continue to develop relationships with organisations across London that represent the diversity our city enjoys. By retaining an openness to partnership building and through listening to the many people who attend Thrive LDN events or who contact the team in other ways, their work is constantly challenged and influenced to ensure full representation of Londoners experiencing mental ill health.

Recommendation 10: Thrive LDN partners should explore how to help and resource organisations that have proved effective at peer-led support for marginalised groups. At the same time, the Mayor should look at how he can supplement the work of the voluntary sector in this space. This could additionally have dividends in terms of boosting employment

Through Thrive LDN, partners have commissioned a piece of research to look at how the discrimination some groups experience affects their mental health. The results of this will inform how we engage with voluntary organisations and community groups, to support them to deliver interventions to reduce discrimination and mental health inequity in adults and young people that is leading to the development of poor mental health.

Further to this, in partnership with Team London and v.Inspired, Thrive LDN have launched the Young London Inspired Programme to increase volunteering and social action opportunities for young Londoners at risk of developing mental health problems. So far, 15 projects have been awarded grants with further grant application rounds in 2018 and 2019.

MAYOR OF LONDON

Recommendation 11: In response to this report, the Mayor should write to the committee and set out how the specific needs of each group we have identified [LGBT+ communities, disabled people, deaf people, and those with experience of the criminal justice system] are being considered in the development of his housing and employment policies.

This is an important recommendation and I will write separately to you about it.

I hope the information provided above addresses the issues raised in your report. I would like to thank you and the committee for the time and consideration spent compiling this report, and putting forward your recommendations. It is through our commitment to challenge, raise awareness and work in partnership that we can best take forward efforts to improve health and tackle health inequalities in London.

Yours sincerely,



Sadiq Khan
Mayor of London