



Case Study: Sheffield NHS Clinical Commissioning Group and Sheffield Mind

Issue to address

The latest Public Health England data demonstrates the high excess premature mortality rates experienced by people with a diagnosis of severe mental illness (SMI). Preliminary research suggests this has been exacerbated during the COVID-19 pandemic. The life expectancy of someone living with a diagnosis of severe mental illness is at least 15–20 years shorter than for someone without and it is estimated that for people living with an SMI, two in three deaths are from physical illnesses that can be prevented.

The NHS Long Term Plan has committed to 390,000 people living with a severe mental illness receiving an annual physical health-check and appropriate follow-up interventions by 2023-24. An annual health check helps prevent premature death from heart disease, stroke, kidney disease and diabetes.

As part of the additional funding provided by NHS England/Improvement to all STPs/ICSs to commission tailored outreach, Sheffield Mind was commissioned by Sheffield NHS Clinical Commissioning Group to work closely with GP practices to ensure that patients who are finding it difficult to access their annual physical health checks and/or their COVID-19 vaccinations, can be offered practical support to do this.

Description of the Service

Sheffield NHS Clinical Commissioning Group has invited GP practices to work with Sheffield Mind to improve uptake of their SMI annual physical health checks. Practices securely share contact details for patients listed with the practice as having a diagnosis of SMI, using a standard information sharing agreement. Sheffield Mind contacts individuals or their carers on behalf of the practice and offers the support or encouragement needed for attendance. Sheffield Mind offers 1-1 discussions with each client utilising a number of therapeutic techniques designed to help the client engage proactively with health-check.

The service provides:

- Supportive conversations: spending time reassuring the person/their family and/or explaining about the importance of the health check i.e. identifying physical health risk factors and interventions to reduce these risks
- Supporting reasonable adjustments: by liaising with individuals and their GP practices to understand what reasonable adjustments are needed/possible to support attendance.
- Practical support: help with practical arrangements to help the person get to the Surgery and/or 'attend' a telephone appointment.
- COVID-19 vaccination support: to increase access to the COVID-19 vaccination.

Reflections from Sheffield Mind's Health Engagement Officer

It took an average of 3 contact attempts to make positive contact with each individual. Some routinely required additional assistance ranging from further telephone calls on the morning of their appointment to encourage their attendance, contact with their support network or working with the individual to help family members support with appointments. **For people who could not be contacted by telephone, personalised letters of invitation to contact the Sheffield Mind support service were sent. Hand-written letters with a postage stamp on a manila envelope were found to work best.**

There has broadly been two distinct preferences of patients regarding attending appointments, both vaccination and annual health checks. This has tended towards a preference for either first thing (between 9am and 11 am) or afternoons between 15.00pm and 17.00pm, with minimal DNAs. **Reasonable adjustments have included understanding that different times of day vastly effect people's ability to engage with attending a scheduled appointment (anxieties, SAD, physical support needs – travel restrictions, carer availability etc).** The individuals contacted for this programme tended to prefer to stick to a specific routine, indeed many carers and support agencies positively encourage them to do so. However, this becomes much harder for the patient to then work around, as it goes outside of their specific comfort zone and increases their anxiety.

In addition, engaging with each client to understand the root cause of their inhibitions with regards to attending appointments or even to arranging them for themselves. **Many clients gave examples that they would and could book an appointment with their GP if required, whilst later admitting they probably would hang up if they were on the phone for longer than a minute or two or wouldn't attend the appointment if they woke up feeling low.** Overcoming these barriers with a person-centred approach has been key to building engagement within the client group.

This service is evaluated monthly to monitor successful approaches that generate fewer DNAs. **Patients receiving a follow up call to discuss individual identified needs (e.g. identified as part of the Health Action Plan produced by the practice for the patient after the health check) have been less hesitant to engage with interventions such as dietary advice, smoking cessation, alcohol or drug abuse advice and medication reviews.**

Example of support offered by Sheffield Mind – 'Frank'

Frank had not been in contact with the GP for 3 years. Attempts to contact him by phone were unsuccessful so a letter introducing the Sheffield Mind support was sent in a brown hand envelope, with handwritten address. The letter offered contact details and gave a specified date and time when a Health Engagement Officer from Sheffield Mind would call. Frank did not make contact but answered the phone when called at the specified time.

The initial conversation explored the annual health check and the challenges Frank faced in engaging with health-care services. He spoke about financial worries that had led to not answering the phone or opening post that looked 'official'. Frank had withdrawn from going outside, even into his garden which has previously been a source of stress relief. After understanding Frank's needs and challenges, Sheffield Mind supported him to develop an action plan towards his desired outcome. Frank took his action plan to each support opportunity and was shared with his GP. Frank was supported on the phone whilst he travelled from his home to his GP surgery for his annual health check.

After the health check, Frank had 1-1 support to reflect on the importance of the health check for his future health. The GP surgery agreed to contact Frank by handwritten letter and call him on the surgery number saved in his phone. He now goes out independently, accesses counselling and group support regularly and has since booked an appointment at the GP without support.

Challenges

Throughout the project, a number of challenges have been overcome, including:

- **Information sharing:** To overcome GDPR requirements, a specific document was required to facilitate information sharing between the practice and Sheffield Mind. This is required for each GP practice supported. Even though individual consent is not required (due to the information sharing facilitating direct patient care), practices involved to date have provided information to patients about the project prior to them being contacted on an 'opt out' basis. It has also taken time to establish arrangements between the project and practices regarding booking arrangements – e.g. times when **Sheffield Mind** can book patients in for. For these reasons, the timescales from the practice agreeing to take part in the project and sharing patient data has taken on average two months. To help with this, **Sheffield NHS Clinical Commissioning Group developed a data output reports with participating practices, to help them to quickly extract the relevant patient data from clinical systems. This has already received positive feedback from practices.**
- **Reasonable adjustments:** It may be difficult for GP practices to offer flexibility in the days and times for thirty minutes annual health check appointments. Discussions were had with each practice about how a patient's individual needs might affect their ability to actively participate in their health check. A list of common reasons for DNA's or disengagement with a service was collated. **Understanding individual needs and challenges and identifying areas for support increased the uptake of physical health checks.**
- **Dispelling myths:** There are a number of conspiracy theories regarding the COVID-19 vaccination. These have been overcome via educating individuals on how to research evidence-based information. **To support the education process and proactive discussion on the benefits of vaccination, between the individual and their support networks, NHS branded handouts were provided, as this indicated a trusted source. We also shared a hand-out called 'my rights as a human being' guide sheet, used by many counselling agencies.** This was not additional vaccination material, instead focussing upon the individual's own needs as a human to be able to consider information, and to reconsider that information as they learned new things.

Successes

The project started from April 2021, with the first stage of the project focusing on engaging GPs and establishing the information sharing agreements and then rapidly moving into the delivery phase.

SMI annual physical health check

The Health Engagement Officer from **Sheffield Mind** has directly enabled **179 people living with SMI to attend their annual physical health check with their GP**

Of these:

- » The vast majority **(156) were supported in person to attend** (some people asked the Health Engagement Officer to attend the check itself with them; others were accompanied up to the surgery door).
- » The 23 not supported to attend in person, were later confirmed as having completed the check by the GP or the client.

- » **136 people were referred to the project via the GP information sharing route**, with the remaining 43 people referred through a range of other routes (e.g. referral or self-referral through other services offered by Sheffield Mind).
- » Some of the 179 people initially planned to attend without in person support, but then did not manage to go to their appointment alone and DNA. They were later supported to attend with in person support.
- » **At least 32% of people supported (at least 57 individuals) identified themselves as being from a Black, Asian, or Minority Ethnic community** (Sheffield is an ethnically diverse city, with around 19% of its population from Black, Asian, or Minority Ethnic groups and so this data evidences the service's success in supporting diverse communities).

Sheffield NHS Clinical Commissioning Group data indicates that as at 30th December 2021 of the 5,162 people recorded by their GP practices as living with a SMI (excluding those in remission), 35% of people (1,808) had received the core 6 elements of their annual physical health in the preceding 12 months.

Although this is still well below the national target, it is a significant increase from previous quarters and as at end of September 2021 the rate was only 27.6%. Alongside other local initiatives, the Sheffield Mind Service has made an important contribution to this improvement.

The CCG data available for the practices that Sheffield Mind has specifically worked with to date shows substantial increases in their completion rates.

Covid vaccinations for people living with SMI

The Health Engagement Officer from [Sheffield Mind](#) has **directly enabled 356 people living with SMI to receive one or more Covid-19 vaccinations**

Of these:

- » **133 people were supported in person to attend**
- » **223 were supported on the telephone and other communication methods**, and then reported that they planned to attend, had booked or visited a walk in without continued (in person) support
- » **The majority of people were supported with their first vaccination and then reported that they felt confident to attend follow up vaccinations independently**
- » 34 people received additional in person support to attend a 2nd, 3rd or booster injection (This means **a total of 164 vaccinations were supported in person**)

Sheffield NHS Clinical Commissioning Group data indicates that as at 15th December 2021 of the 5,674 people recorded by their GP practices as living with a SMI (including those in remission), 76.1% of people (4,316) had received at least two Covid-19 vaccinations.

This figure was in line with rate for the wider 18+ population (76.6%) at that date. Alongside other local initiatives, the Sheffield Mind Service has made an important contribution to this success.

Looking Ahead

Towards the end of 2021 **Sheffield Mind** went through a competitive process and were subsequently **awarded a three-year SMI Physical Health Outcomes project**, funded through **Sheffield NHS Clinical Commissioning Group** Mental Health baseline funding.

This will start from 1st April 2022 and will continue and develop the work of the current project (which ends 31st March 2022). **The service will still work closely with GP practices to provide support for people living with SMI to access their annual physical health checks and COVID-19 vaccinations but will also contribute to encouraging flu and pneumonia vaccinations** (where patients are eligible for these).

The NHSEI funding helped **Sheffield NHS Clinical Commissioning Group** and **Sheffield Mind** to work together all to trial an innovative approach to **improving the physical health of people with SMI** and both organisations are excited and enthusiastic about this next stage of the project.

Resources

To support this case study you can also download:

- [Information Sharing Agreement between Sheffield NHS CCG and Sheffield Mind](#)
- [‘My rights as a human being’ handout](#)

