Report for: Joint Haringey and Islington Health and Wellbeing Board

Title: Good Thinking – London's Digital Wellbeing Service

Report

Authorised by: Jeanelle de Gruchy, Director of Public Health, Haringey

Council

Lead Officer: Jeanelle de Gruchy, Director of Public Health, Haringey

Council

1. Purpose

1.1 To present *Good Thinking*, the innovative new digital service to support Londoners to improve their mental wellbeing; to ask for feedback on the service and views on its future development.

2. Issue under consideration

2.1 Good Thinking is an innovative new digital service for mental wellbeing for all Londoners. Funded by all London CCGS and half of London Councils – including Islington and Haringey – Good Thinking has recently 'gone live' (in 'beta' phase). The report presents the service, demonstrating how digital services can support our residents in improving their mental wellbeing and preventing issues of concerns becoming worse – it is an excellent example of 'prevention at scale'.

3. Recommendation

3.1 The HWB is asked to comment on *Good Thinking*, including on future development and sustainability.

4. Background

- 4.1 Two million Londoners will experience mental ill health this year. About 75% of Londoners with depression and anxiety do not receive any treatment at all. In response to the scale of the need, all 32 London NHS Clinical Commissioning Groups and a majority of London local authorities including Haringey and Islington commissioned a digital mental wellbeing service.
- 4.2 The ambition is to develop a world first the first global city to provide a 24/7 digitally enabled support system focussed on mental health and wellbeing. The

vision is that: 'London should be a place where everyone enjoys good mental health and wellbeing and no-one is left to suffer alone"

- 4.3 The development and delivery of this digital mental wellbeing service since named Good Thinking has been overseen by local government, CCGs, Healthy London Partnership, NHS England and Public Health England and supported by the Mayor of London. Tower Hamlets CCG would be the host organisation and lead commissioner for this service. LA and CCG sponsorship for the Programme is provided by Mike Cooke, (Chief Executive LB Camden) and Jane Milligan (Accountable Officer, NEL STP); Dr Jeanelle de Gruchy, Director of Public Health, Haringey Council, chairs the Steering Group.
- 4.4 Good Thinking is a quality-assured prevention and early intervention digital service that uses targeted marketing to direct people who self-identify as having issues around sleep, anxiety, low mood and stress towards personalised digital interventions.
- 4.5 Service development partners have included Mindwave Ventures, the design, development and live service provider; and Fresh Egg, responsible for content strategy and digital marketing. Both these providers have put in place data protection and site security protocols.

4.6 The Good Thinking service:

- Went live (in beta phase) in late 2017
- Uses digital interventions to provide preventative and personalised journeys to self-help and self-care.
- Is available to all people in London 24/7
- Is 'prevention at scale' (see early performance data, Appendix 1)
- Actively finds and guides those in need to clinically- and behaviourallyendorsed digital apps and other beneficial resources²
- Offers a wellbeing self-assessment to support the personalisation of self-care offerings
- Can provide hyper-local resources to users, as well as provide each borough will local service usage data.
- Has e-safety, safeguarding and clinical risk management at the core of the service, but in a non-intrusive way – with a focus on behavioural change and self-management³

² The health and wellbeing apps are being endorsed against the NHS digital assessment criteria with the support of our expert partner, <u>Our Mobile Health</u> led by Julie Bretland, our Clinical Lead, Dr Richard Graham and Dr Amanda Bunten and the Public Health England Behavioural Insights Team.

¹ London Digital Mental Wellbeing Business Case 2015

³ Clinical governance oversight given from Clinical Lead, Good Thinking, Clinical Lead Digital IAPT, Haringey, Assistant Director, Public Health England and NHSE (London Region) Mental Health Clinical Network

- Has the potential to improve the mental wellbeing of all Londoners, it could also reduce pressure on local services, saving London and health and care services money.
- 4.7 Through Google Analytics the service is able to follow journeys to and through *Good Thinking*. Through partners, it is able to see people's progress through the intervention they choose.
- 4.8 Good Thinking is currently 'live' in an extended beta phase with positive early testing demonstrating the potential to make an impact at population level. Initial results showed uptake from over 1000 users per week searching for help with sleep related wellbeing issues. In the first two weeks of going live in Nov, over 5000 users visited the *Good Thinking* platform, which has capabilities to reach up 50,000 users by 31st March 2018.
- 4.9 A two-year academic evaluation is being undertaken by King's College London, covering the clinical, economic, behavioural and digital outcomes of the service.
- 4.10 Plans for 2018/19: With robust arrangements now in place to develop further in London, the focus during 2018/19 will be the continuation of innovative ways to connect with people at scale through digital channels they are already using and guide those looking for help to the right resources to improve health and wellbeing. The emerging evidence available through 24/7 collection of data will be evaluated by the KCL team and disseminated in the coming months.
- 4.11 The results so far (Appendix 1) suggest potential for the roll out a personalised, but scalable online population based prevention strategy with further developments planned to increase the number of quality assured apps and services, undertake additional discovery work to establish the potential for the approach to be expanded into other areas including social prescribing linked to primary care and local community networks; self-management of long term conditions.
- 4.12 The combined collaborative force of the local partnership in London local authorities and CCGs working with leaders within PHE and NHSE has already helped to make evidence based self-managed online therapy and support available to the whole population in London.

5. Contribution to strategic outcomes

5.1 In 2014/15, Better Health for London: Next Steps set out a number of ambitious plans to support one overarching goal: To make London the healthiest major

global city. This includes the aspiration to put London at the centre of the global revolution in digital health which includes supporting Londoners through digital wellbeing services.

5.2 The Programme is championed by the London Health Board and is delivering on recommendation 28 in the London Health commission report Better Health for London and is acknowledged as a positive innovation by the Chief Medical Officer and cited within the Mental Health Five Year Forward View. It fits with the Five Year Forward View and closely aligns with the self-care and prevention focus of all London Sustainability and Transformation Plans. The Steering Group ensures that the service pathway alignment with digital IAPT developments.

6. Statutory Officer Comments (Legal and Finance)

Legal

The Sub-Committee is required to encourage joint consideration and coordination of health and care issues that are of common interest or concern to the population of the two boroughs.

Chief Finance Officer

For information: Investment from London CCGs and Local Authorities: £66k paid over two years would be the financial contribution from each commissioner for the service to be piloted. This included contributions from all 32 London CCGs and 17 Local Authorities with significant support from DPHs.

Contributions from Public Health England: £75k and NHS England: £160k

The total investment available from all contributions across the various organisations, over three financial years beginning in 2015/16 has been c £2.668 million.

7. Environmental implications

The main environmental impact of the Good Thinking service is the electricity use of the servers that the website is hosted on, as well as the usual office-related environmental impacts of the staff running it (i.e. energy, water and resource use and waste generation). The service being online means that it potentially has fewer impacts than an in-person service, as it eliminates the need for users to travel.

8. Resident and equalities implications

Good Thinking is an excellent example of user-centred co-design: digital listening and in-depth interviews with Londoners in over 23 boroughs were carried out during its development; users can publicly feedback on the service: that's

Londoners telling Londoners what works for them and providing us with a constant feedback loop for service improvements.

The current beta version of the service does not require the visitor to enter any personal information into the system. This is to maintain the user's anonymity and is based on previous consultation suggesting remaining anonymous would be important.

Further work is planned during 2018/19 to seek feedback from users to establish different approaches to collecting data to enable equality impact to be monitored in terms of access and outcomes. This will involve further consultation with users and potential service users to determine the extent to which equalities data could be collected and monitored without adverse effects on service engagement, usability and perceived quality of user experience.

9. Local Government (Access to Information) Act 1985

Background papers: None

Appendix 1: Good Thinking performance data

Data since going live: 1st November to 9th Jan 2018 (NB. 2 week pause for review during this period)

- 18,934 website users
- 1232 Completed Self-Assessment actions (includes partner services)
 - 500 mental/physical symptom check (Self-Assessment)
 - 621 Sleep Test (Sleepio)
 - 111 Stress (PSS), Depression (PHQ9), Anxiety (GAD7) combined assessment (BeMindful)
- 1436 clicking out of the site to self-help resources
- 32% are returning visitors during this period
- Most popular page is the initial Self-Assessment page
- Gender 64% female and 36% male
- Age: Majority of users fall within the 25 to 34 (25%) and 35 to 44 (22%) age group

```
\circ 18 to 24 = 8%
```

 \circ 25 to 34 = 25%

 \circ 35 to 44 = 22%

 \circ 45 to 54 = 19%

o 55 to 64 = 15%

o 65+ = 11%

Device most commonly used is mobile (74%)

Mobile = 74%

Desktop = 12%

Tablet = 14%

The initial version of the service offers two evidence based self-management services

- a) Sleepio Sleep advice and CBT
- b) Be Mindful mindfulness based cognitive therapy (MBCT) for anxiety, stress and depression.

Nov to Jan 9th 2018

Sleepio up to 9 th Jan			
Numbers completed Sleep test	Signed up for Sleep help/registered account	Started full CBT programme	
621	264	78*	
*>130 new user accounts in during Dec/Jan. Expecting this will result in users starting CBT imminently			

Be Mindful up to 9 th Jan			
Numbers enrolled	Registered account and started Mindfulness based CBT course	Numbers who have completed all questionnaires on Stress (PSS), Anxiety (GAD7) Depression (PHQ9) and fully engaged with course	
311	237	111	