

Mental Health Prevention Concordat update report

19th September 2018

Presented by: Dr Lincoln Sergeant

Summary:

The enclosed report provides a briefing on the Mental Health Prevention Concordat, an initiative that was referenced in the presentation by Public Health England at the North Yorkshire Mental Health Summit on 30th May 2018. The national Prevention Concordat for mental health specifically requests health and wellbeing board sign up.

It also provides an update on public mental health activity.

Which of the themes and/or enablers in the North Yorkshire Joint Health & Wellbeing Strategy are addressed in this paper?

[Please tick as appropriate]

Themes	✓	
Connected Communities	✓	
Start Well	✓	
Live Well	✓	
Age Well	✓	
Dying Well	✓	
Enablers		
A new relationship with people using services		
Workforce		
Technology		
Economic Prosperity		

How does this paper fit with <u>other</u> strategies and plans in place in North Yorkshire?

Five Year Forward View for Mental Health

Hope, Control and Choice. North Yorkshire's Mental Health Strategy 2015-20 (and associated strategy implementation plan and public mental health & prevention plan) North Yorkshire Suicide Prevention Action Plan

North Yorkshire Health and Wellbeing Strategy 2015 -2020

Young and Yorkshire 2

What do you want the Health & Wellbeing Board to do as a result of this paper?

The Health and Wellbeing Board are asked to:

- Note local activity on mental health improvement
- Consider North Yorkshire Health and Wellbeing Board sign up to the Prevention Concordat on mental health
- Confirm the elected member champion for the Mental Health Prevention Concordat.

NORTH YORKHIRE HEALTH AND WELLBEING BOARD PUBLIC MENTAL HEALTH AND PREVENTION PREVENTION CONCORDAT UPDATE REPORT

1.0 Purpose of the report.

At the recent mental health summit organised by the Health and Wellbeing Board, Public Health England delivered a presentation which focused on the national approach to public mental health and prevention. This report aims to complement this presentation by providing an update to the health and wellbeing board on public mental health activity in North Yorkshire and seeks approval to formally sign up to the mental health prevention concordat.

2.0 Background

2.1 North Yorkshire's mental health strategy

North Yorkshire's mental health strategy, *Hope control and choice* was launched in October 2015. Public health is a core component of the strategy, with primary, secondary and tertiary prevention embedded throughout the strategy and associated implementation plans.

2.2 Prevention Concordat for mental health

The Prevention Concordat for Mental Health was published in September 2017 by Public Health England (PHE). The aim of the Prevention Concordat is to help local areas put in place effective planning arrangements for population-level mental health by March 2019.

The focus of the Prevention Concordat is to:

- Galvanise action on both a local and a national level to prevent mental health problems and promote good mental health
- Encourage and promote cross sector activity led by health and wellbeing boards, clinical commissioning groups and local authorities
- Enable every area to use the best data available to plan and commission the right mix of provision to meet local needs, increase equity and reduce health inequalities

The Prevention Concordat is underpinned by the following principles:

- An understanding that prevention focused approaches to improving the public's mental health make a valuable contribution to achieving a fairer and more equitable society.
- Promoting evidence based planning and commissioning to increase the impact on reducing health inequalities
- A focus on cross sector action to deliver a tangible increase in the adoption of public mental health approaches amongst stakeholders (including local authorities; NHS organisations; public, private and voluntary sector organisations; educational settings and employers)
- A recognition of the role and contribution of people with lived experience of poor mental health and mental ill health.

As such the Prevention Concordat provides a systematic planning framework for local areas. Recommended action is grouped in the following five themes

- Needs and needs assessment
- 2. Partnership and alignment
- 3. Translating need into deliverable commitments
- 4. Defining success outcomes
- 5. Leadership and accountability

Appendix One details the criteria in the prevention concordat and provides an indication of progress against these specific criteria.

3.0 NORTH YORKSHIRE PROGRESS UPDATE

3.1 Public Mental health and Prevention Partnership Group

Implementation of the Mental Health Prevention Concordat for the county of North Yorkshire has been incorporated into the terms of reference for the Public Mental Health and Prevention Partnership Group (PMH&PP). Membership includes; experts by experience, NYCC mental health commissioning (adults and children), Tees, Esk and Wear Valley NHS Foundation Trust, and community and voluntary sector representatives. This group directly reports to the North Yorkshire Mental Health Strategy Implementation Group and is responsible for the delivery of public health and prevention elements of *Hope Control and Choice*, North Yorkshire's mental health strategy.

This group is also used as a reference group and consultation group about public mental health and prevention interventions and proposals.

3.2 Joint Strategic Needs Assessment (JSNA) for mental health
A JSNA was produced in 2015 as part of the development work for Hope, Control and
Choice, North Yorkshire's mental health strategy, however this needs updating and
refreshing. The mandate to conduct a deep dive JSNA for North Yorkshire has been
given. A working group has been set up and is in the process of drafting a scoping
proposal. It is recommended that the JSNA will include data on the following;

- The prevalence of mental ill health
- Locality variations in diagnosis and prevalence of mental ill health (including personality disorder)
- Wider determinants and influences of mental health e.g education and training, housing
- Specific population groups e.g members of the armed forces and veterans,
 LGBT community

3.3 Training and Capacity Building

Mental health first aid (MHFA) and Applied Suicide Intervention Skills Training (ASIST) are internationally licenced training courses. In April 2016, 11 organisations were granted funding for employees to undertake training to become accredited trainers of MHFA and/or ASIST. The total grants awarded funded 10 ASIST trainers

and 10 MHFA trainers. As part of the funding agreement, organisations were required to deliver the qualifying courses, which are required in order to become licensed instructors, free of charge to individuals in North Yorkshire.

In May 2017, annual evaluation data was requested from successful organisations. One organisation withdrew from the scheme due to a lack of capacity to deliver and therefore did not receive their grant (£2234).

For the period May 2016 – May 2017 (inclusive), 7 individuals were trained as MHFA trainers and 10 as ASIST trainers. 6 ASIST courses and 5 MHFA courses had been delivered, totalling 83 ASIST participants and 108 MHFA participants (total = 191) receiving training free of charge under the grant scheme. Participants have included individuals from sports clubs, talking therapy organisations, schools, hospices, religious organisations, voluntary and community groups, probation services, art.

MHFA and ASIST instructor training courses only take place a few times a year and are usually oversubscribed. Therefore, 3 organisations were unable to undertake the training, leading to a slower roll out. These organisations are being contacted again in 2018 for further progress updates.

Organisations who received the funding report that they have been able to create additional revenue streams to fund other mental health projects, create partnerships (York Mind), support other organisational projects which require mental health support (North Yorkshire Sport) and have led to potential contracts to act as preferred provider for mental health training for other organisations (Scarborough Survivors, York Mind). Two organisations have been able to generate further income from delivery of the training.

NYCC's training and learning team have also recently funded members of staff to attend MHFA and ASIST instructors training courses and these courses are now part of the training offer to NYCC employees.

3.4 Reducing stigma through social contact

Research suggests that one of the most effective ways to challenge stigmatising attitudes is to have social contact with people who have experience of mental health issues.

Scarborough Survivors were successful in their bid to co-ordinate and administer a programme of social contact actives across North Yorkshire.

Small grants are available to organisations and / or individuals with lived experience of mental ill health (Champions) to host social contact events. Champions receive training and ongoing support from Scarborough Survivors. Applicants are required to complete an application form which is then reviewed by an independent board, membership of which includes an expert by experience.

The contract was awarded in July 2017 and ends on 31st January 2019. To date, seven grant applications have been received and three applications awarded.

3.5 Workplace health

3.5.1 Workplace Wellbeing Charter

The promotion of mental health in the workplace and inclusion of people with mental health issue within the workplace has been given national attention. There are a number of public health programmes in which this national strategic priority is being driven forward in North Yorkshire.

A framework for organisations to work towards to improve the health of their workforce in an easily understood, evidence based way is currently in development. Specific actions and recommendations to improve mental health and support a mental health improving workplace culture are core components of this framework.

3.5.2 North Yorkshire County Council

With the support of NYCC's corporate management board a significant amount of work has been undertaken to promote mental health for NYCC employees. The organisation signed up to the Mindful Employer charter in February 2016. An internal working group which includes members of staff who have lived experience of mental health, meets regularly.

A joint piece of work between public health, human resources and training and learning has been to identify gaps in current training on mental health. Consequently, we are involved in developing an online mental health awareness training programme for all staff and a classroom training course targeted at line mangers, managing mental health.

3.6 Links to complementary work streams

Mental health is a wide and complex issue with enormous potential to impact on other programmes and interventions. Building on this approach, we have sought to reinforce the interconnectivity and interdependence of mental health to other programmes.

- The Stronger Communities programme is funded through the public health grant. The internal service level agreement is in the process of being reviewed and we have sought to influence and strengthen their role in improving the mental health and social capital of communities through this contract.
- Encourage and support partnership delivery of mental health campaigns and awareness raising through partners such as the North Yorkshire Community Learning Partnership.
- Research indicates that that physical activity has mental health benefits. All
 providers who deliver the level 2 weight management services are
 contractually asked to measure the mental health impact of their programmes,
 using a nationally validated tool.
- Contribute to mental health service transformation work in North Yorkshire.

4.0 **RECOMMENDATIONS**

The North Yorkshire Health and Wellbeing Board are asked to;

- Note local activity on mental health improvement
- Consider North Yorkshire Health and Wellbeing Board sign up to the Prevention Concordat on mental health
- Agree a named champion for the prevention concordat for mental health

Report Author

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Appendix One

Prevention Concordat criteria	Current North Yorkshire position
Confirm that areas have published a mental health Joint Strategic Needs Assessment (JSNA) in the last 18 months or provide reassurance that arrangements are in place to initiate one within 3 months of signing	A JSNA was produced in 2015 as part of the development work for <i>Hope, Control and Choice,</i> North Yorkshire's mental health strategy. The North Yorkshire JSNA editorial group have considered this request and given the mandate to conduct a refreshed deep dive of a JSNA on mental health. A working group has been convened and recommendations for in and out of scope is scheduled for discussion at the JSNA editorial board in September. Partners (including statutory, community and voluntary sector and experts by experience) are supportive of this approach.
Have a multi-agency suicide prevention plan in place	North Yorkshire has a multi-agency suicide prevention plan in place which is monitored via the North Yorkshire Suicide Prevention Strategy group.
Provide an indication of plans for evaluation	Hope, Control and Choice has a well-established monitoring and evaluation criteria for delivery of the mental health strategy and the PMH&PP is part of the governance and progress reporting systems for this group. More recently, the Public Mental Health & Prevention Partnership used outcomes based accountability methodology to begin developing a more specific evaluation and outcomes frameworks for public mental health.
Agree to schedule public mental health on the agenda of a scrutiny board in the next 18 months	This request will be made through the appropriate elected member and associated planning process.
Ensure sign off by the local health and wellbeing board.	This paper requests sign off by the health and wellbeing board.
Have a named mental health champion who is either an elected member, a member of the health and wellbeing board, chief executive (local authority or CCG or both)	This paper seeks clarity on a named champion.