



# **North Somerset Public Mental Health Strategy 2015-2019**

**By North Somerset Public Mental Health Steering Group**

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# 1 INTRODUCTION

The North Somerset Public Mental Health Strategy 2015-2019 describes how North Somerset Council, North Somerset Clinical Commissioning Group (CCG), Avon and Wiltshire Mental Health Partnership (AWP) and other key partners will work together to develop positive mental health and wellbeing for the population of North Somerset. This strategy does not cover mental health services themselves. They are part of other strategies and policies (see Appendix C).

It is important to remember that mental illness can affect anyone, at any stage or time in their life. We know from the work by Sir Michael Marmot that the individual causes of poor health that may contribute to poor mental health occur across the life course. As a result this strategy looks at mental health and well being across the life course and the accompanying action plan is ordered by the below groups:

- Perinatal and early years
- Childhood and adolescence
- Working age adults
- Older people

**Figure 1:** Accumulation of risk of mental illness across the life course.



This strategy has been written by a steering group, see appendix A for a list of members.

## 2. WHAT IS PUBLIC MENTAL HEALTH?

The 2013 Director of Public Health (DPH) Annual Report on public mental health highlighted the need to address mental health and promote population-level wellbeing throughout the life course. The full report is available on the North Somerset Council Website<sup>1</sup>. This strategy is the follow-on from the report to address and focus on the issues the report raises.

### What is mental wellbeing?

It is important to distinguish between mental health (wellbeing) and mental ill health (disease). Mental wellbeing has a number of definitions. Essentially it is about emotion (feelings), cognition (perception, thinking and reasoning), social functioning (relations with others) and coherence (sense of meaning). Wellbeing generally and mental wellbeing specifically, are important as we know from the evidence that an individual's wellbeing is associated with physical health, longevity, quality of life, risk of drug and alcohol misuse, criminal behaviour and employment. People with good mental wellbeing are more resilient and better equipped to deal with adverse circumstances. The below definition was offered by the Government Office for Science in 2008:

“... a dynamic state, in which the individual is able to develop their potential, work productively and creatively, build strong and positive relationships with others, and contribute to their community”.

(Government Office for Science 2008, p10)

### National Strategy

This strategy focuses on the promotion of mental wellbeing, reduction of stigma and discrimination, and increasing early intervention for people facing mental health challenges and thus supports the six objectives of the national *No Health Without Mental Health Strategy*<sup>2</sup>:

- More people will have good mental health
- More people with mental health problems will recover
- More people with mental health problems will have good physical health
- More people will have a positive experience of care and support
- Fewer people will suffer avoidable harm
- Fewer people will experience stigma and discrimination.

### Why public mental health is important

It is widely reported that one in four people will develop a mental health problem at

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<sup>1</sup> North Somerset 'Director of Public Health Annual Report 2013 Public Mental Health' North Somerset Council, 2014

<http://www.n-somerset.gov.uk/Social%20care/healthandwellbeing/Pages/Public-health.aspx#> (accessed on 9<sup>th</sup> November 2014)

<sup>2</sup> Department of Health. No health without mental health. UK: Department of Health, 2011. <https://www.gov.uk/government/publications/the-mental-health-strategy-for-england> (accessed on 9<sup>th</sup> November 2014).

some point in their lives. Mental disorders account for the largest burden (23%) of disease in England. At any point in time at least one in six people will be suffering with a mental health problem. As a consequence, the UK economy incurs costs of over £105 billion every year in terms of direct treatment costs, morbidity and lost productivity.

The 2013 Director of Public Health report demonstrated that 6,953 disability adjusted life years are lost in North Somerset due to mental health and neuro-psychiatric conditions. This is the largest proportion of the total disease burden in North Somerset.

Mental health issues are associated with deprivation, poor housing, poor physical health and lower life expectancy. However, some of the factors associated with poor mental health such as drug and alcohol misuse are also risk factors for the development of poor mental health, and this reciprocal relationship must not be overlooked.

Public mental health is concerned with improving and protecting the mental wellbeing of the population. There is good quality evidence demonstrating that by improving mental health over the different stages of life there are a wide range of health, social, educational and economic benefits to individuals, families and communities. It also helps to reduce crime, anti-social behaviour and inequalities in health and wellbeing.

### **Population approach**

A public health or population approach to improve mental health aims to 'shift the curve' of the whole population rather than simply focussing on those at the ends of the spectrum. This can sound counter-intuitive but is essentially about improving outcomes for everyone so that the whole distribution of disease shifts and a greater number of people benefit. This approach is particularly important because of the large impact that mental health has on the population.

### **Strategy links**

There are a number of key links with existing strategies including the Learning disability strategy and the dementia strategy. Therefore these areas are not covered directly in this strategy but should be considered in parallel with it as there is considerable overlap.

### **Groups at higher risk of poor mental health**

Whilst poor mental health can affect anyone, there are particular groups that are at higher risk. These have been borne in mind when developing the action plan (see Section 4)

- Vulnerable children and young people, particularly looked after children, children leaving care, young offenders, children with special educational needs, young carers, children whose parents/carers have mental health or substance misuse issues, children living with domestic abuse, children exposed to sexual violence or abuse, children experiencing bereavement or family breakdown, young people not in employment education or training.
- People who have been victims of domestic or sexual abuse

- People with physical, sensory or learning disabilities
- Those at high risk of suicide or self-harm
- People who are unemployed or on low incomes
- People from minority groups including black and minority ethnic groups and lesbian, gay, bisexual and transgender people
- People who are homeless
- People with problematic drug and alcohol use and other addictions
- Carers
- Veterans
- Older adults (over 65 years)
- People who are employed below the skill set but not by choice.

### 3. OVERALL VISION AND AIMS

#### Overall vision

The overall vision for this strategy is:

*“To support individuals, families and communities within North Somerset to achieve their optimum mental wellbeing enabling them to feel good and function well in their daily lives”.*

#### Three tier approach

This strategy outlines our work programme towards this aim for 2015-19. A three tier approach to a public mental health strategy has been adopted.

#### **Level 1 Universal interventions promoting mental well-being**

To build resilience and promote wellbeing at all ages for residents of North Somerset

#### **Level 2 Targeted early identification and support**

Targeted prevention of mental ill health and early intervention for people at risk of mental health problems

#### **Level 3 Prevent mental ill-health in vulnerable Populations**

Early intervention and physical health improvement for people with mental health problems

#### Key aims

Drawing on the detailed work on mental health undertaken as part of the Joint Strategic Needs Assessment and the review of existing North Somerset strategies that was undertaken (see Appendix C), the following key aims have been identified under the above mentioned three tiers

#### Level 1 Universal interventions promoting mental well-being

- Promote population well-being in North Somerset through improved understanding of factors influencing well-being.
- Ensure supporting good mental health is seen as everybody’s business.
- Promote the “5 ways to well-being”.

#### Level 2 Targeted early identification and support

- Provide targeted support to groups at increased risk of mental distress.
- Support recovery and prevention of relapse among people living with a mental health diagnosis.
- Reduce suicide and self-harm rates in North Somerset.

#### Level 3 Prevent mental ill-health in vulnerable populations

- Improve access to early support ensuring those that need it can access psychosocial support be it through social prescribing (sign-posting to social activities that can promote positive well-being such as arts and leisure activities), talking therapies, self-help methods or medication.
- Reduce stigma and discrimination felt and experienced by people with mental health disorders.





#### 4. ACTION PLAN

This action plan is a live document, it is envisaged it will be changed over time. There will also be formal reviews, the first being undertaken by March 2017 to ensure the actions are still relevant.

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
<b>Across the life course</b>					
1. Raise awareness of mental health issues among elected members	<p>Deliver a workshop on mental health and wellbeing as part of the induction of elected members following the May 2015 local elections.</p> <p>Explore the role of members in promoting Public Mental Health.</p>	1 – Universal services	Public Health (NSC)	Within existing resources	Year 1-2
2. Develop a public anti-stigma marketing campaign	Throughout 2015/16 run 3 campaigns within North Somerset based on the national “Time to Change” resources.	1 – Universal services	Public Health (NSC)	Within existing resources	Ongoing
3. Assess the mental health impacts of council policies	<p>Ensure mental wellbeing is considered with in equality impact assessments for council policies</p> <p>Compile an advice note to guide managers on how they should consider the implications of their policies on peoples mental wellbeing when undertaking an equality impact assessment.</p>	1 – Universal services	Equality and Diversity lead (NSC)	Within existing resources	Year 1-2

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
4. Develop a local model for an integrated approach to personal mental well being	Work with the Well Being Alliance and Voluntary, Community and Social Enterprise sector to develop and evaluate joined up working in North Somerset that supports a personalised approach to developing mental wellbeing. Supporting people to be more able to engage with the community and with the work agenda.	2 – Targeted early identification and support	VANS	Building Better Opportunities fund (Lottery. ESIF)	Year 2
5. Evaluate the impact of the Asset-Based Community Development pilot	Maintain oversight of the ‘Your Neighborhood’ pilot project being launched on the Bournville, Potteries, Coronation and Oldmixon estates of Weston-super-Mare. If positive impacts on social inclusion and wellbeing are found consider expanding implementation to other areas.	1 – Universal services	Public Health (NSC)	Funds yet to be identified	Year 1-2
7. Improve joined up working between domestic abuse and mental health services	Nominate domestic abuse lead within Avon and Wiltshire Mental Health Partnership (AWP). Work with AWP to deliver training to front line workers on mental health services including referrals pathways into mental health services.	2 – Targeted early identification and support	AWP Community Safety Drug Action Team (NSC)	Within existing resources Training – funds yet to be identified.	To be confirmed

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
8. Improve intelligence on local self-harm incidents	Work with Weston Area Health Trust to implement self-harm registers for all patients attending A&E.	2 – Targeted early identification and support	North Somerset Clinical Commissioning Group (CCG)	Joint Public Health and CCG funding	Year 1-2

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
<b>Perinatal and early years</b>					
9. Embed the perinatal mental health pathway and strengthen links across agencies to maximise access to available support	Improve collaboration across agencies to ensure a robust implementation of the perinatal mental health care pathway. Evidence the use of the care pathway.	1 – Universal services	Child and Adolescent Mental Health Services (CAMHS) and Health Visitors	Within existing resources	Developed year 1
10. Consolidate the perinatal care pathway into a 'conception up to school age' care pathway	Extend the current perinatal care pathway to incorporate support offered throughout pre-school years (midwifery, children's centres, CAMHS and Health Visitors).	1- Universal services	North Somerset Community Partnership and Child and Adolescence Mental Health Services	Within existing resources	Year 1-2
11. Promote access to social support for women experiencing or at risk of perinatal depression and anxiety	Increase awareness of available support among partners to maximise signposting and referrals .	2 – Targeted early identification and support	North Somerset Community Partnership	Within existing resources	Ongoing
12. Embed the "Think Family" approach among	Work with agencies across North Somerset to strengthen collaboration in the delivery of	2 – Targeted early identification and support	Children and Young People Services (NSC)	Within existing resources	Ongoing

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
agencies working across North Somerset	ante- and postnatal classes that includes agreed mental health information.				
<b>Childhood and adolescence</b>					
13. Raise the profile of mental health and wellbeing among schools	Develop criteria related to promoting wellbeing which secondary schools need to address in order to be part of the North Somerset Healthy Schools Network. Support schools with resources to promote the teaching of healthy relationships. Work with schools to decrease rates of bullying in school. Develop a practitioner group with the focus of improving mental health in schools Identify and provide a support pathway that schools can use.	1 – Universal services	North Somerset Council - Public Health	Within existing resources	Year 1
14. Develop a children's mental health Strategy group	Bring together all the key organisations working in mental health young people to develop a strategy and drive forward the transformation work under Children and Young People Improving Access to Psychological Therapy (IAPT) programme.	1- 3 level	North Somerset Clinical Commissioning Group	Within existing resources	Year 1-2

<b>Action</b>	<b>Deliverables (including timescales)</b>	<b>Level of Public Health intervention</b>	<b>Lead</b>	<b>Cost</b>	<b>Phase</b>
15. Improve awareness of and confidence to respond appropriately to signs of mental distress among frontline workers and clients	Develop a plan to improve uptake of mental health training among social workers, Children's Centre staff, primary and secondary school staff, and those working with at-risk young people including volunteers, foster carers and social workers.	1- Universal services	North Somerset Workforce Development	To be confirmed	Year 2
16. Raise awareness of the CY IAPT (Improving Access to Psychological Therapies) programme for children and young people	Work across agencies to develop awareness of and referrals into the CY IAPT and adults IAPT (16-18 year olds) programme for children and young people.	3 - Prevent mental ill-health in vulnerable populations	CAMHS and LA	Funding identified	Year 2-3
17. Ensure children are supported in the transition between child to adult services	Build on the links between CAMHS and adult mental health services to ensure young people are appropriately supported.	3 - Prevent mental ill-health in vulnerable populations	North Somerset Clinical Commissioning Group	Within existing resources	
18 Engage with at-risk young people to involve them in promoting	Consult with young people to identify key influences on their wellbeing and barriers to accessing support.	1 – Universal services	Healthwatch North Somerset	Within current resources	Year 1

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
wellbeing and improving access to support for mental health problems					
19. Engage with Weston College and the Tuition Service to promote training of young people in mental health awareness	Identify opportunities to provide training in mental health awareness to young people in Weston College, including those on teacher training and health and social care courses.	1- Universal services	Public Health	Within existing resources	Year 2
20. Undertake an audit of the child and adolescent Mental Health Services	Understand key issues around the delivery of the services such as waiting lists and gaps in service provision.	Level 3 Prevent mental ill-health in vulnerable populations	Public Health	Within existing resources	Year 1 and 2
<b>Working age population</b>					
21. Promote workplace health and wellbeing	Develop a Workplace Wellbeing Charter for use with North Somerset Council and local businesses (July 2015). Support 3 medium sized employers (100+ employees) to create healthy workplaces, establish health promotion activities and	1- Universal services	North Somerset Council - Public Health	Within existing resources	Year 1-2

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
	<p>focus on employee's mental health and wellbeing. (September 2015). Over a period of 18 month's work through three stages of Charter with businesses.</p> <p>Businesses to be assessed through each stage and re-assessed every two years.</p> <p>Explore opportunities for people to volunteer as part of their CPD and to aid the pathway to retirement as well as to support 'back to work' programmes for staff returning to work after a period of ill health.</p>				
22. Improve awareness and understanding of mental health	Develop a plan to promote mental health training among: managers and employees within North Somerset Council; health and social care staff; probation officers; police officers; debt advice staff.	1 – Universal services	North Somerset Think Family Workforce Development	Not identified	Year 2
23. Reduce suicide through improved support for those at risk of suicide	Re-establish a North Somerset Suicide Prevention Group and develop an action plan to reduce suicides in North Somerset.	2 – Targeted early identification and support	North Somerset Clinical Commissioning Group & North Somerset Council – Public Health	Within existing resources	Year 1 and ongoing



Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
24. Audit the data quality of primary care depression registers	Undertake an audit of the primary care depression register and use the results of the audit to target interventions appropriately, including promoting access to IAPT and bereavement support.	2 – Targeted early identification and support	North Somerset Clinical Commissioning Group	Within current resources	Year 2
25. Improve engagement with social activities among people recovering from mental ill-health	Develop a Wellbeing Alliance to sustain and coordinate the work of the Recovery College/Carlton Centre (in conjunction with Community Learning team and the mental health pilot) by developing their joint work with Positive Step and other key partners.	3 - Prevent mental ill-health in vulnerable populations	Carlton Centre	Building Better Opportunities funding	Year 2
26. Support people with mental health challenges into employment	Increase the proportion of individuals with identified mental health needs who have access to employment support to enable them to access and maintain employment.	3 - Prevent mental ill-health in vulnerable populations	To be confirmed	To be confirmed	To be confirmed
27. Increase the support available to individuals who do not meet the criteria for specialist mental health services	Identify the cohort of people with mental health needs falling between the gap of primary care and secondary mental health services and develop services to meet those needs.	2 – Targeted early identification and support Level 3 Prevent mental ill-health in vulnerable populations	North Somerset Clinical Commissioning Group	Within current resources/ current investment	To be confirmed
28. Improve identification of and access to	Incorporate a question to identify ex-armed forces personnel as part of social housing assessments.	2 – Targeted early identification and support	Armed Forces Community Covenant	To be confirmed	To be confirmed

Action	Deliverables (including timescales)	Level of Public Health intervention	Lead	Cost	Phase
support for ex-armed forces personnel			Project Lead and Social Housing Providers		
<b>Older People</b>					
29. Improve uptake of bereavement support	<p>Ascertain current activity in Cruse service, including data from PCLS and IAPT (quarterly throughout 2015-2016).</p> <p>Map of medicine for depression to include details of 'Cruse Bereavement' (end of June 2015).</p> <p>Improve access to IAPT (15% by the end of Q2).</p>	2 – Targeted early identification and support	North Somerset Clinical Commissioning Group	Within existing resources	Year 1
30. Work to reduce levels of loneliness and isolation amongst older people	<p>Deliver Community Connect service which aims to reduce isolation amongst older people</p> <p>Deliver a seminar to the Senior Community Link (SCL) groups around loneliness and isolation.</p> <p>Deliver a conference on loneliness and isolation to wider stakeholders.</p> <p>Develop an action plan to reduce levels of loneliness and isolation.</p>	2 – Targeted early identification and support	Supporting People Community Connect	Funding identified	Year 2 and then ongoing

## **5. MONITORING THE PROGRESS OF THIS STRATEGY**

5.1 Progress against this strategy will be assessed through the on-going development and monitoring of the local action plan. The focus of the action plan may shift over time as actions are implemented and the context changes.

5.2 The Government has developed a set of national indicators which monitor progress against mental health issues, a selection of which will be monitored by the Mental Health Steering Group on a quarterly basis (see Appendix D).

## **APPENDICES**

### **Appendix A: Public Mental Health Strategy Group Members**

Mary Backhouse, Chief Clinical Officer, North Somerset Clinical Commissioning Group

Georgie Bigg, Chair, Healthwatch North Somerset

Jenny Cooper, Planning and Development Manager, North Somerset Council

Shaun Fitzpatrick, Supporting People Manager, North Somerset Council

Suzanne Howell, Managing Director, Avon and Wiltshire Mental Health Partnership Trust

Angela Kell, Commissioning Manager, Mental Health, Learning Disabilities and Dementia, North Somerset Clinical Commissioning Group

Claire Leandro (Chair), Assistant Director (Adult Care), North Somerset Council

Cara MacMahon, Chief Executive Officer, Voluntary Action North Somerset

Mark Patterson, Head of Businesses and Partnerships, Public Health England

Eifion Price, Assistant Director, Children's Support & Safeguarding, North Somerset Council

Kate Wilcox, Strategic Commissioning Officer (Family Support), North Somerset Council

Helen Yeo, Advanced Health Improvement Specialist, North Somerset Council

## **Appendix B: How will we get there?**

This section outlines priority areas across the life course as suggested by the national '*No Health Without Mental Health*' Implementation Framework. It then references existing strategies and projects which address aspects of wellbeing before going on to highlight key opportunities to further promote wellbeing locally.

### **Priority actions from the National Strategy**

The national '*No Health Without Mental Health*' Strategy Implementation Framework highlights a number of priority areas for promoting wellbeing (appendix B). As part of the local strategy development these priority areas were reviewed by life course stage and existing North Somerset strategies and initiatives were mapped to each area (appendix B and C) to inform a gap analysis. The mapping was combined with a review of performance indicators on key risk factors and outcomes for mental health and wellbeing (Appendix D) to identify priorities for this strategy to address. Where gaps in activity or the need for further action have been identified local priority actions are outlined on page 7 in the action plan. Additionally the findings of previous public engagement activities have fed into the strategy development process. A summary of the areas considered to be gaps or to require additional activity is provided below.

***Across the life course:*** The priority areas identified for local action across the whole life course include; promoting the message that mental health is everyone's business; tackling stigma; promoting access to social support and empowering communities through recognising existing strengths, developing and evaluating place-based approaches, including community budgets.

We all have mental health actions to promote individual and population wellbeing as important actions to promote physical health. Additionally addressing the stigma associated with mental health is an area which will benefit from further local activity. A national campaign "*Time to Change*" has been running in recent years and there has been some local promotion of this, particularly among North Somerset Council workplaces. However changing attitudes requires sustained efforts and local public campaigns will be helpful in building on the groundwork from the national campaign. The value of social support for protecting and promoting wellbeing is well recognised. There are a number of activities run by the voluntary and community sector which aim to promote social contact and community activities. These could be built upon by developing a local model of social prescribing for individuals at risk of or experiencing poor mental health. This involves ensuring health practitioners can signpost or refer individuals to community activities which may benefit their health and wellbeing. Professionals will need clear, up-to-date information on available activities and referral pathways to enable individuals to access these activities. Where possible data should be captured to monitor the impact of social prescribing on individuals and communities. There are pockets of activity in North Somerset which aim to empower communities through developing existing strengths and giving the community control of local community budgets. These include projects such as "Big Worle" and an emerging

“Community Builder” project in Weston-super-Mare South ward. The impact of these projects should be evaluated and if successful the approaches should be expanded to additional areas within North Somerset.

**Children and young people:** Priority areas for increased local activity for children and young people include improving early identification of common mental health disorders among parents and young people. This includes building skills and awareness among frontline professionals and promoting the availability of and access to professional and peer support. Whilst support should be universally available activity should be focused on those at greater risk of mental ill-health including the vulnerable groups identified above, individuals who are socially isolated and those experiencing life transitions. Important transitions in this life stage include becoming a parent, children experiencing bereavement and young people moving into adulthood.

Schools provide a useful setting in which to promote wellbeing and tackle stigma surrounding mental health. Whilst work is undertaken to promote wellbeing in schools, there is a need to improve consistency in the importance schools assign to wellbeing and to ensure all children have access to support and counselling through schools when required. It should also be remembered that a number of children in North Somerset are schooled outside of mainstream settings.

**Working-age adults:** Among working-age adults a key setting for promoting wellbeing is in the workplace. Whilst mental health awareness training is available through North Somerset Council recognition of the importance of wellbeing in the workforce is not recognised by all employers and employees often experience or perceive stigma and discrimination in the workplace in regards to mental health. There is a need to raise the profile of mental health and wellbeing among employers including the role of the workplace on wellbeing and the benefits of positive wellbeing such as improved productivity and reduced sickness absence.

As with children and young people it is important that staff who regularly deal with the public have a good awareness of mental health issues, are able to respond appropriately and signpost individuals to further support when necessary. Whilst some training is available through North Somerset Council a more strategic approach to ensuring all relevant professionals are trained is required, including working with agencies to highlight the importance of this training and to encourage the release of staff-time.

The 5 ways to wellbeing highlight the benefit of promoting learning and social contact for protecting mental health. As such more could be done to build on existing models to encourage skills development and to create new opportunities for involvement in community activities. Such developments should recognise the value of engaging with activities and social contact as an outcome in itself and not only focus on what the skills development leads to (e.g. employment).

Support during life transitions is important to protect wellbeing. Whilst support is available for people experiencing bereavement the take up of this support could be improved. There is also an emerging need to improve support for ex-armed forces personnel which is being addressed by the North Somerset Armed Forces Community Covenant. Improved identification of ex-armed forces personnel will enable more individuals to benefit from local support being developed through the covenant.

High local suicide mortality rates and high self-harm admissions, particularly among those living in areas of higher deprivation, highlight the need to re-focus on these issues locally. This requires strengthening of partnership arrangements.

Individuals suffering or recovering from mental ill-health can face challenges accessing, and maintaining, employment. There are a number of local initiatives to support individuals accessing employment. However, given the importance of this in supporting recovery and promoting wellbeing, and the need to sustain improvements, this strategy will maintain some oversight of this area. This also relates to priorities to ensure employers and workplaces promote positive wellbeing.

**Older adults:** Key areas for promoting wellbeing in older adults include support during life transitions, improving early identification of and support for common mental health disorders and improving early diagnosis and support for people with dementia and their carers. Given the older age profile within North Somerset much focus has been given to these areas through existing strategies and initiatives. The Strategy Group felt that areas that will benefit from additional activity have also been identified for improvement for working-age adults, such as improving access to bereavement support and prioritising suicide prevention. Therefore local actions for promoting wellbeing in adults under this strategy have been merged for working-age and older-age adults.

## **Key strategies currently addressing influences on wellbeing**

**Improving our communities together: North Somerset Sustainable Community Strategy, 2008-2026.** This strategy sets out the vision and priorities to improve the economic, social and environmental wellbeing of an area and how partners will work together to develop sustainable communities. The strategy prioritises tackling disadvantage, developing strong inclusive communities, safer communities, developing the local economy and respecting environmental limits.

**North Somerset Think Family.** Multi-agency guidance on developing a 'Think Family' approach to improve co-ordination between agencies, with 'no wrong door' for families in accessing services for adults or for children. Practitioners should be able to look at the whole family's needs and know which other services are able to support those needs, which may be multiple and complex, involving several services.

**Improving Access to Psychological Therapies (IAPT)** In North Somerset Positive Step provides access to psychological therapies, including self-help courses, One-to-

One and group support. The current national target is for 15% of the expected population with a mental health disorder to access psychological therapies; in 2013/14, 9.4% of the predicted number of people with mental health disorders were referred to Positive Step.

**The North Somerset Child Poverty Strategy.** This strategy focuses on reducing the impact of poverty on children living in North Somerset and how to prevent poor children becoming poor adults. The strategy prioritises ensuring key services and systems are in place to raise aspirations and opportunities for young people; increasing opportunities for parents and young people to work and train locally; promoting financial inclusion and supporting families out of debt; and improving the physical and community environment.

**The North Somerset Early Intervention and Prevention Strategy.** This strategy aims to promote independence and improve health and wellbeing among adults and older people in North Somerset. Included within this strategy is the commissioning of **Community Connect**, a project to reduce social isolation in older people.

**Impact Pathways.** A multi-agency approach to breaking the cycle of crime. The Impact Team works with individuals and families to reduce reoffending by addressing areas such as substance misuse, accommodation, finances, education and mental and physical health.

**High Impact Families.** A multi-agency approach to improve the support available to and outcomes for families with multiple and complex needs. The approach aims at getting children back into school, reducing youth crime and anti-social behaviour and putting adults on a path back into work.

**South Ward Health and Wellbeing Project.** A key focus of this project is to recognise existing strengths and talents and building on these to develop a thriving community through implementing “Asset-Based Community Development” to build positive social networks and promote self-esteem and wellbeing.

**The North Somerset Carers Strategy (2011-14).** This is a multi-agency strategy to improve early identification of carers, ensure they access support available to them and to promote their health and wellbeing.

**The North Somerset Community Covenant.** A project aimed at improving support for ex-service personnel when they leave the military and transition back to civilian life.

**The North Somerset Dementia Strategy.** This strategy has been jointly produced by the North Somerset Council and the North Somerset Clinical Commissioning Group (CCG) to improve the support patients, families and carers receive following a diagnosis of dementia, be they living in the community or within a care home. North Somerset Council also has a programme in place to train ‘Dementia Friends’ and is working with the voluntary sector to promote Dementia Friendly Communities. Additionally the **North Somerset Dementia Roadmap (March 2014)** aims to improve early access to support



for patients, families and carers through proactive case finding and timely diagnosis of dementia. It also promotes ways to prevent or delay the onset of dementia through promoting activities which improve wellbeing including, learning new skills and maintaining hobbies, drinking alcohol in moderation, being physically active and taking part in social activities.

**Public Health Strategy.** This strategy provides an overview of the work of the North Somerset Public Health Team. Priorities relating to wellbeing include reducing drug and alcohol misuse, increasing physical activity, promoting healthy diets, reducing domestic violence and improving life chances for children and young people. Actions to reduce the impact of mental health, dementia and suicide are in part addressed through this strategy.

### **Approaches to commissioning that can improve population wellbeing**

When developing the action plan to support the above priorities it is important to consider approaches to commissioning which have the potential to influence population wellbeing.

- Value-based commissioning and co-production<sup>3</sup> of services and service redesign. These processes involve collaborating with the public early in, and throughout, the commissioning process to ensure services are accessible, appropriate and acceptable. The enthusiasm of existing service users can be harnessed to develop individuals' skills and confidence as well as improving the reach and validity of consultation processes, for example by involving them in survey design and recruitment of respondents.
- "Alliance Contracts" can be beneficial in areas where integration of services and joint working between providers is necessary to improve outcomes<sup>4</sup>. Such approaches could be helpful in the commissioning of drug and alcohol services, social prescribing for mental health and housing support services where a number of providers can be commissioned under a single contract.
- Opportunities provided by the Public Services (Social Value) Act 2012 can be used to promote the wellbeing of local residents. This can include incorporating a range of values into commissioning contracts such as employment of and apprenticeships for local residents, payment of the living wage to employees and empowering the public to be involved in designing service developments.

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<sup>3</sup> Joint Commissioning Panel for Mental Health. Guidance for implementing values-based commissioning in mental health. December 2013. [www.jcpmh.info](http://www.jcpmh.info)

<sup>4</sup> McGough R and Dunbar-Rees R. Team effort: Commissioning through alliance contracts. Health Services Journal, 2013.

**Appendix C: Priority areas identified in the national 'No Health Without Mental Health' Strategy mapped to existing local strategies and initiatives**

**Priority areas across the life course**

<b>Priority area</b>	<b>Existing strategy/initiative</b>
Reduce the stigma and discrimination surrounding mental health problems through local media campaigns and social contact events.	<i>Promotion of “Time to Change” campaign within North Somerset Council</i>
Promote the use of parks and green spaces and access to nature.	<i>Children and Young People access to Green Space Strategy Group</i>
Promote social support including social prescribing to promote wellbeing and tackle early signs of mental distress.	<i>Voluntary, Community and Social Enterprise (VCSE) sector projects to increase social contact</i>
Recognise and promote the strengths of individuals, families and communities.	
Consider the use of whole place/community budgets.	
Ensure accessible and affordable public transport is available across the local authority area.	<i>Improving our communities together: North Somerset Sustainable Community Strategy, 2008-2026.</i>
Enable people to live in secure, good quality housing that is appropriate to their needs.	<a href="http://www.northsomersetpartnership.co.uk/whatwedo/sustainablecommunitystrategy/">www.northsomersetpartnership.co.uk/whatwedo/sustainablecommunitystrategy/</a>
Promote volunteering and strengthen the voluntary sector.	<i>VANS - Volunteer Pathway; support and capacity building for the voluntary sector Voluntary Sector Forum – bringing VCSE and public sector together Volunteer Centre – supporting recruitment and retention of volunteers Support Alliance – Volunteer Pathway and Buddying for people with support needs Children’s Centres volunteering scheme – helping parents to volunteer as a route into employment.</i>
Involve the local community, service users, families and carers in service design and improvement.	<i>Healthwatch.</i>

<b>Priority area</b>	<b>Existing strategy/initiative</b>
	<i>North Somerset Council public engagement groups. North Somerset Clinical Commissioning Group patient and public involvement.</i>
Reduce key risk factors including substance misuse (illegal drugs, alcohol and tobacco), violence and abuse.	<i>People and Communities Strategy – reducing alcohol-related harm: <a href="http://www.northsomersetpartnership.co.uk/whoweare/people+and+communities+board/index1.asp">www.northsomersetpartnership.co.uk/whoweare/people+and+communities+board/index1.asp</a>  IRIS Project – a pilot to increase domestic violence reporting to GPs and referrals to advocacy and support</i>
Reduce poverty and the impact of poverty on individuals, families and communities.	<i>North Somerset Child Poverty Strategy</i>

### ***Prenatal and early years***

<b>Priority area</b>	<b>Existing strategy/initiative</b>
Promote early identification of perinatal depression and anxiety and improve the range of and access to support services available.	<i>Perinatal mental health pathway Health Visitors Children’s Centres Adult Mental Health Specialists in the Health Visiting Service Thrive – drop in support at Weston South Children’s Centre</i>
Promote positive parenting and strong parent-child relationships in the early years through provision of professional and peer support for parents.	<i>Family Nurse Partnership Adult Mental Health Specialists Health Visiting Service Think Family Meetings Keeping Well Groups Children’s Centres Child and Adolescent Mental Health Services</i>

<b>Priority area</b>	<b>Existing strategy/initiative</b>
	<i>(CAMHS) and family therapy Multi Agency Parenting Groups</i>
Involve parents in shaping the types of support available to ensure it is accessible, acceptable and appropriate.	<i>Children's Centre Committees Healthwatch</i>

### **Childhood and adolescence**

<b>Priority area</b>	<b>Existing strategy/initiative</b>
Improve the ability of frontline staff, such as teachers and police officers to recognise and respond to emerging mental health problems.	<i>Mental Health first Aid Training available through NSC for those working with young people</i>
<p>Ensure support is available to children at particular risk of mental health problems including those with special educational needs, young carers, looked after children and young offenders.</p> <p>Additional groups include children and young people experiencing bereavement, family break-ups, domestic abuse, sexual exploitation and parental substance misuse.</p>	<p><i>Education services <a href="http://www.n-somerset.gov.uk/Education/education_services_and_teams">www.n-somerset.gov.uk/Education/education_services_and_teams</a></i></p> <p><i>Youth Offending and Substance Advice Service <a href="http://www.n-somerset.gov.uk/community/youth_offending">www.n-somerset.gov.uk/community/youth_offending</a></i></p> <p><i>High Impact Families <a href="http://www.northsomersetpartnership.co.uk/whoweare/people+and+communities+board/high+impact+families+programme1.asp">http://www.northsomersetpartnership.co.uk/whoweare/people+and+communities+board/high+impact+families+programme1.asp</a></i></p> <p><i>Specialist Nurse for looked after children</i></p> <p><i>Counselling with in Secondary Schools</i></p> <p><i>Mental Health Specialist supporting secondary schools</i></p> <p><i>Wanted not Wasted counselling for young people in Weston-super-Mare South Ward</i></p>

Priority area	Existing strategy/initiative
Promote the role of schools in supporting positive wellbeing and developing resilience in children and young people.	<p><i>Healthy Schools Programme</i> <a href="http://www.n-somersetcsd.org.uk/kb5/northsomerset/fsd/organisation.page?id=m6mfuVz7HmE">http://www.n-somersetcsd.org.uk/kb5/northsomerset/fsd/organisation.page?id=m6mfuVz7HmE</a></p> <p>Child exploitation Subgroup of the Safeguarding Strategy</p> <p><i>Youth Mental Health First Aid Training available for early teens</i></p> <p><i>Healthy Relationships training run by Chapter 1</i></p>
Ensure children schooled outside of the mainstream system have robust social and professional networks available for support.	<p>Voyage Learning <a href="http://www.voyagelearningcampus.org.uk">http://www.voyagelearningcampus.org.uk</a></p>
Promote resilience, self-esteem and positive body images in young people.	<p><i>CAMHs Primary Mental Health Workers Vulnerable Learners Service</i></p>
Reduce local self-harm rates.	
Support young people in the transition to adulthood, including those transferring between child and adult health services.	<p><i>Re-commissioning of children's services in Bristol, North Somerset and South Gloucestershire</i></p> <p><a href="http://www.northsomersetccg.nhs.uk/library/childrens-community-health-services/">www.northsomersetccg.nhs.uk/library/childrens-community-health-services/</a></p>
Promote the use of 'Time to Change' resources for youth workers' by schools and colleges.	
Involve children and young people in shaping the activities, services and support that are available to them to ensure they are accessible, acceptable and appropriate.	<p><i>Healthwatch CAMHs re-commissioning process CY IAPT</i></p>

### **Working-age adults**

<b>Priority area</b>	<b>Existing strategy/initiative</b>
Engage with employers and trade union health and safety representatives to promote workplace health and wellbeing.	<i>Health Trainer service engagement with local employers</i>
Improve the ability of employers and managers to support positive mental health, identify emerging mental health problems in adults and respond appropriately.	<i>Training in Mental Health awareness and building resilience delivered within North Somerset Council</i>
Employment support should be available to those with a mental health problem who need to support to find and/or sustain employment.	<i>North Somerset Partnership Employability Project North Somerset Council Economic Development Service Westonworks One True Step – work club co-ordinator Back to work support via the Carlton Centre 1-in-4</i>
Ensure adults with mental health problems are supported to access housing.	<i>Support to bid for social housing provided by housing support workers and local authority to those known to mental health services <a href="http://www.n-somerset.gov.uk/Housing/Advice/Pages/Advice.aspx">www.n-somerset.gov.uk/Housing/Advice/Pages/Advice.aspx</a></i>
Ensure frontline professionals in contact with the public are trained in mental health awareness, are able to respond appropriately and signpost to sources of support.	<i>North Somerset Council Mental Health First Aid Training  Training collaboration between North Somerset Community Partnership and Avon and Wiltshire Mental Health Partnership to build a shared understanding of physical and mental health problems.</i>
Improve early identification of common mental health disorders, such as depression, and improve uptake of support.	<i>Positive Step (IAPT)</i>
Promote opportunities for learning new skills and finding new hobbies.	<i>Community Learning Programmes <a href="http://www.n-">http://www.n-</a></i>

<b>Priority area</b>	<b>Existing strategy/initiative</b>
	<a href="http://someset.gov.uk/Education/student_and_adult/Pages/Community-learning.aspx">someset.gov.uk/Education/student_and_adult/Pages/Community-learning.aspx</a> Voluntary and community sector groups
Support carers in looking after their own mental wellbeing.	Carers Strategy <a href="http://www.n-someset.gov.uk/Social%20care/carers/Pages/Carers.aspx">www.n-someset.gov.uk/Social%20care/carers/Pages/Carers.aspx</a>
Support adults during important transitions, including into and out of employment and the transition of military personnel to civilian life.	North Somerset Council Economic Development Service Westonworks  Armed Forces Community Covenant <a href="http://www.n-someset.gov.uk/community/armed_forces/Pages/Armed-Forces.aspx">http://www.n-someset.gov.uk/community/armed_forces/Pages/Armed-Forces.aspx</a>  Veterans Mental Health First Aid Training courses
Reduce self-harm rates.	Suicide Prevention Group
Reduce suicide.	Suicide Prevention Group

### **Older adults**

<b>Priority area</b>	<b>Existing strategy/initiative</b>
Support adults during important transitions such as through bereavement and from work to retirement.	Cruse Bereavement Support <a href="http://www.crusebereavementcare.org.uk">www.crusebereavementcare.org.uk</a>
Improve early identification of common mental health disorders, such as depression, in older people and improve take up of support.	Positive Step (IAPT) <a href="http://www.positivestep.org.uk">www.positivestep.org.uk</a>
Increase early diagnosis of dementia and post-diagnosis support for patients and carers.	North Somerset Dementia Strategy Action Plan <a href="http://www.n-someset.gov.uk/Social%20care/carers/Pages/Dementia.aspx">www.n-someset.gov.uk/Social%20care/carers/Pages/Dementia.aspx</a>
Promote dementia friendly communities in North Somerset to improve the quality of life for people living with dementia.	

Priority area	Existing strategy/initiative
Reduce social isolation.	North Somerset Early Intervention and Prevention Strategy <a href="http://www.n-somerset.gov.uk/Social%20care/community_care/Pages/Community-Care.aspx">www.n-somerset.gov.uk/Social%20care/community_care/Pages/Community-Care.aspx</a>
Reduce suicide rates.	Suicide Prevention Group



## Appendix D: Local Public Mental Health Profile and Performance Indicators

<b>Part 1: Comparison with England</b>			
<b>Indicator</b>	<b>Year</b>	<b>England</b>	<b>North Somerset</b>
<b>Wellbeing</b>			
Self-reported wellbeing - % with a low satisfaction score	2012/13	5.8%	5.7%
Self-reported wellbeing - % with a low worthwhile score	2012/13	4.4%	-
Self-reported wellbeing - % with a low happiness score	2012/13	10.4%	9.8%
Self-reported wellbeing - % with a high anxiety score	2012/13	21.0%	17.3%
<b>Outcomes</b>			
GP recorded depression prevalence 18+	2012/13	5.8%	7.0%
GP recorded depression incidence 18+	2012/13	1%	1%
Self-reported moderate to extreme depression or anxiety	2012/13	12%	12%
Suicide rate (males) - rate per 100,000	2010/12	13.3	17.2
Suicide rate (females) - rate per 100,000	2010/12	4	8.2
Emergency admissions for self-harm - directly standardised rate per 100,000 (all ages)	2013	191	168
<b>Part 2: Variation within North Somerset</b>			
<b>Indicator description</b>	<b>Most deprived</b>	<b>Least Deprived</b>	<b>North Somerset</b>
<b>Wellbeing</b>			
Wellbeing (Warwick Edinburgh Mental Wellbeing score); most & least deprived wards survey, 2014 (higher = better wellbeing)*	23.9	26.3	-
Social isolation: most & least deprived wards survey, 2014 (higher = increased loneliness)*	5.1	4.2	-
<b>Outcomes</b>			
Self-harm hospital admissions, all ages, 2013/14	202	39	100
Depression prevalence 18+: most & least deprived quintiles 2012/13	7.1%	6.3%	6.9%

\*Updates available 3-4yearly