

North Somerset Council

REPORT TO THE HEALTH OVERVIEW AND SCRUTINY PANEL

DATE OF MEETING: 16 FEBRUARY 2022

SUBJECT OF REPORT: MENTAL HEALTH STRATEGY

TOWN OR PARISH: ALL

OFFICER/MEMBER PRESENTING: MATT LENNY, DIRECTOR OF PUBLIC HEALTH

KEY DECISION: NO

REASON: UPDATE FOR INFORMATION

RECOMMENDATIONS

The Health Overview and Scrutiny Panel are invited to consider the update about development of the all-age mental health strategy for North Somerset and to contribute views, perspectives and possible actions to be considered as the strategy is developed and finalised.

1. SUMMARY OF REPORT

This report highlights how key findings from the adults and children and young people (CYP) mental health needs assessments and engagement activities are shaping emerging priorities to be addressed in the Mental Health Strategy.

The strategy will have a five-year timeline (2023-2028) and will be oriented around overarching themes of (i) Prevention, (ii) Early Intervention, and (iii) Supported and Living Well, to map to the overarching themes of the Health and Wellbeing Strategy 2021-2024.

2. DETAILS

An all-age Mental Health Strategy is currently being developed for North Somerset. The process of strategy development aims to:

- Build on our current knowledge of rising need nationally
- Assess and understand mental health and wellbeing need and related inequality in North Somerset in greater depth
- Understand current provision and any gaps to be addressed
- Explore and synthesise the views of the local population and stakeholders
- Review the latest evidence of the most effective interventions
- Collaborate with a range of partners to develop and set out the actions we will take collectively to improve mental health and wellbeing.

Developing the strategy does not discount the huge range of actions in place already. Rather, it aims to build on existing policy and practice, enhance synergy, and address any gaps or service improvement needs. For instance, the strategy will build on the Community Mental Health Framework, ICB-based strategic activity, BNSSG trauma-informed workplan, CYP and SEND partnerships, clinical service delivery and action in the community.

In addition, the Mental Health Strategy will aim to build on the joint Health and Wellbeing Strategy, its overarching themes and guiding principles and relevant objectives such as: reducing the prevalence of poor mental health in the NS population, improving access to timely support, and reducing social isolation. Specific actions include:

- Community grants programmes for mental health and funding of social prescribing destinations, implemented for 2022/23 and being sustained over 2023/24
- A Befriending Alliance to build on existing provision to enhance befriending services
- Specialised counselling and peer support for adults and children and young people who have experienced domestic abuse
- Training around attachment and early development, mental health, mental health awareness, and suicide prevention
- Targeted actions focused on the mental health and wellbeing of men
- Refreshing and implementing the North Somerset suicide prevention action plan
- Settings programmes that include a focus on mental health and wellbeing
- Support for partnership action relating to the health and wellbeing impacts of the cost-of-living crisis

2.1. Mental health and wellbeing need

Mental illness is the largest single cause of disability in the UK, with one in six adults estimated to have had a mental disorder, and an annual cost to the national economy (pre-pandemic) of £105 billion.¹ People with severe mental illness have higher risk of ill health (e.g. obesity, diabetes, chronic obstructive pulmonary disease, stroke) and reduced life expectancy compared to the general population. Young adults with severe mental illness are five times more likely to have three or more health conditions.²

The mental health burden of the COVID-19 pandemic has been significant, with particular adult groups most likely to have experienced poor mental health being women, young adults (aged 18-34), adults with pre-existing mental or physical health conditions, individuals experiencing loss of income or employment, those living in deprived neighbourhoods and people in some ethnic minority groups.³ Among children and young people (CYP), an increase in the prevalence of probable mental disorders has been observed between 2017 and 2022; with 18% of CYP aged 7-16 years and 26% of 17-19 year olds reported to have a probable mental health disorder.⁴

¹ Mental Health Strategy Taskforce, NHS England, The Five Year Forward View for Mental Health, 2016

² Public Health England, 2018. Health matters: reduced health inequalities in mental illness. <https://www.gov.uk/government/publications/health-matters-reducing-health-inequalities-in-mental-illness/health-matters-reducing-health-inequalities-in-mental-illness>

³ OHID. COVID-19 mental health and wellbeing surveillance report. Updated November 2021. <https://www.gov.uk/government/publications/covid-19-mental-health-and-wellbeing-surveillance-report/2-important-findings-so-far>

⁴ NHS Digital (Nov 2022). Mental Health of Children and Young People in England 2022 – wave 3 follow up to the 2017 survey.

Findings of the adult and CYP mental health needs assessments, relating to need in North Somerset specifically, have been presented to the Health Overview and Scrutiny Panel previously. In summary, key needs identified in North Somerset include the following:

- 23.6% of adults report a high anxiety score, which is similar to the England average
- Approximately 14% of residents have a diagnosis of depression, which is higher than the England average, and which has followed an upward trend over recent years
- Hospital admissions for self-harm are higher than the national average
- Substantial inequality exists in North Somerset with higher prevalence of risk factors in areas of greater deprivation
- Among CYP, hospital admissions for self-harm and mental health conditions are higher than the national average and demonstrating an upward trend.

Further detail will be available on publication of the two documents.

2.2 Findings from engagement with people and stakeholders

Findings from engagement already completed has been used alongside feedback from mental health strategy-focused engagement with stakeholders and people with lived experience of mental ill-health.

Engagement completed during development of the Health and Wellbeing Strategy and to inform the Community Mental Health Framework and ICS strategy has highlighted the importance of:

- Prevention and early intervention and the provision of lower-level, locally available, and non-medicalised support for adults and CYP (building on community assets e.g. peer support, community clubs and activities)
- Addressing stressful living and working conditions
- Implementation of trauma-informed practice
- The importance of addressing social isolation and loneliness
- The role of outdoor and green spaces and physical activity in improving mental health and wellbeing
- School-based mental health support, a compassionate and informed approach, and addressing fear of judgement and/or labelling for those seeking support
- Family-based approaches to improving mental health (addressing parents/caregiver mental health and experience of trauma)
- Addressing stigma and unconscious bias

Several of the above priorities have also been identified in the engagement of stakeholders conducted between November 2022 and January 2023. Engagement included two online workshops, with 24 organisations represented, as well as focused sessions with Town and Parish Councils and North Somerset Together. Additional priorities raised include:

i. Adults and older adults

- Workplace interventions
- Addressing dual diagnosis
- A tailored focus on support for specific groups e.g. CYP with SEND, parents, males, disabled people, carers, people from Black, Asian and minority ethnic groups
- Mental health support linked to the cost-of-living crisis

- Consistent branding of services and pathways and shared systems to minimise re-telling of people's stories.
- Bridging support for people awaiting services and lower threshold interventions

ii. CYP

- Addressing self-harm and school-focused action including teaching emotional literacy, intervening early and ensuring trusted relationships in schools
- A needs-led approach and appropriate support for CYP with SEND

In addition to these overarching themes, colleagues provided suggestions for specific actions needed, which will be considered during action planning, alongside the evidence base.

2.3 Emergent themes

Taken together, therefore, the findings of the needs assessments and feedback from a range of sources of engagement highlight several emergent themes for the strategy. These may be honed as the strategy is developed and finalised, depending on mapping and prioritisation, to ensure that impact is maximised.

Prevention

- Early intervention around attachment and infant mental health
- Trauma-informed practice and preventing childhood trauma
- School-based support (including emotional literacy, education, training for professionals, trusted relationships)
- Community-led, locally available and voluntary, non-medicalised activities (including asset approach, peer support, local activities that bring people together)
- Addressing stigma
- Physical activity and green space

Early intervention

- Self-harm and preventing suicide (including understanding pathways and intervention to prevent and address self-harm)
- Support for those between general and specialist services or awaiting services
- A family and parent/caregiver perspective in mental health interventions/ services for CYP

Supported and Living Well

- Support to address the impact of the cost-of-living crisis
- Workplace-based support and pathways into employment
- Cohesion and visibility of mental health support and services
- Appropriate support for dual diagnosis
- Support for specific populations (e.g. carers, people who are LGBTQ+ or in Black, Asian and minority ethnic groups, disabled people), including consideration around physical health.

Reflecting guiding principles of the Health and Wellbeing Strategy, a life course focus will be included, commencing with the early years and perinatal mental health through to mental health and wellbeing for older people; and a central focus will be on reducing inequalities by including targeted approaches for particular groups.

2.4 Next steps

Recommendations from the needs assessments and feedback from the engagement described above will be synthesised further and considered alongside review of evidence, translating them into actions in an action plan covering (i) the early years, childhood and young adulthood, (ii) adulthood and (iii) older age, under the three overarching themes of Prevention, Early Intervention and Supported and Living Well, agreed by the North Somerset Mental Health Strategy Group.

The mental health strategy will be drafted over the coming months, with oversight and collaboration from the NS Mental Health Strategy Group, aiming for completion in March 2023.

Action planning will include prioritisation of action and collective agreement about allocation of the budget of £200K allocated to implementation of the strategy linked to the budget for refresh of the Health and Wellbeing Strategy. To date, £80K of the total £200K budget allocated has been allocated to a grants programme for projects that provide trauma-informed and/or responsive practice and prevention and intervention around self-harm in children and young people. Commencement of the grants programme and the priority themes addressed were agreed in December 2022 and allocation will be informed by a panel-based evaluation of proposals and discussions among the strategy group in February 2023, and ultimately, approval by the Health and Wellbeing Board in March 2023.

3. FINANCIAL IMPLICATIONS

The Health and Wellbeing Board has approved funding of £200K, from BNSSG ICB and the public health ringfenced grant, for implementation of the Mental Health Strategy, to be divided equally between actions for CYP and adults.

4. LEGAL POWERS AND IMPLICATIONS

N/A

5. CLIMATE CHANGE AND ENVIRONMENTAL IMPLICATIONS

Environmental implications of actions included in the strategy will be considered during its development and addressed as needed e.g. by including locally-available and accessible services and exploring opportunities to minimise emissions. Any new service providers commissioned or grant funded as part of the action plan will be also encouraged to include commitments to addressing climate change.

6. RISK MANAGEMENT

Development and delivery of the Mental Health Strategy is overseen by the Mental Health Strategy Group, which includes representatives from each Directorate of North Somerset Council, Locality Partnerships, primary care, mental health services, lived experience and the VCFSE sector. Risks will be discussed and managed within the group and escalated corporately as required.

7. EQUALITY IMPLICATIONS

The strategy and action plan will include targeted actions to address inequalities in mental ill-health and wellbeing. For instance, this may include actions relevant to specific

populations experiencing greater mental ill-health or for whom service delivery could be improved and/or tailored more appropriately.

8. CORPORATE IMPLICATIONS

The Mental Health Strategy will align with North Somerset Council's vision of being open, fair and green, by ensuring that the strategy responds to, and builds on, engagement with people and stakeholders and consultation around the draft strategy, partnership working and collaboration, and the focus on addressing inequalities in mental health. The strategy will also aim to support a range of strategies and programmes already in place, such as the Community Mental Health Framework, ICB ambition to become a trauma-informed system, cost-of-living crisis action plan, forthcoming Physical Activity Strategy and others.

AUTHOR

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APPENDICES

None

BACKGROUND PAPERS

None