

North Somerset All Age Mental Health and Wellbeing Strategy 2023-2028

DRAFT (v2.4, 22-10-23)

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Foreword

Improving the mental health of our population is a key priority in North Somerset. Positive mental health is equally as important as physical health and is vital for people to be able to lead fulfilled and productive lives.

The challenges and experiences of recent years, including the profound impact of the COVID-19 pandemic and the ongoing cost-of-living crisis, have impacted on mental health and wellbeing across the population and have led people in many of our communities to feel vulnerable and anxious about the future. Levels of depression as well as loneliness have increased over the last few years and need is increasing.

Within this context, I am delighted to introduce North Somerset's mental health and wellbeing strategy. The strategy intends to address this rising need through focused and co-ordinated actions, with a particular focus on how we can tackle health inequalities between groups and how we address all of the factors and wider determinants of health that affect mental health and wellbeing.

The strategy sets out our vision and ambitions for improving mental health and how we will make a difference for people across the life course from birth to older age. Our focus includes preventing mental ill health from occurring, and intervening as early as possible when it does occur, through clear actions, interventions and pathways to care and support. We also include a focus on supporting people with mental ill-health to live well, providing holistic support and taking action to address inequalities in access, experiences and outcomes between population groups.

The strategy has been developed in collaboration with a range of partners, and builds on data, engagement and insight from the local authority and health, care, voluntary and community sectors, people with lived experience of mental ill-health, members of our communities, and findings from regional and national studies.

Our understanding of mental health needs stems from our Adult and a Children's and Young People's mental health needs assessments, which brought together comprehensive local and national data, stakeholder perspectives, and insights from members of our communities, about mental health and wellbeing in North Somerset. We have responded to the findings and recommendations of these needs assessments in setting out our principles and planned actions in this strategy.

We are very grateful for all those who contributed their views, as well as those involved in the mental health strategy group for oversight of strategy development. Through joint support from Bristol, North Somerset and South Gloucestershire Integrated Care Board (BNSSG ICB) and North Somerset Council's Public Health and Regulatory Services Directorate, we have boosted funding for delivery of the

action plan, focusing on addressing areas where we have identified gaps in support. Over the course of strategy implementation, we will monitor and evaluate progress and impact on key mental health outcomes to ensure that we are maximising benefit for our population and that we are closing the gap in outcomes between different groups.

I look forward to working together with colleagues and members of our communities to put good mental health and wellbeing at the heart of everything that we do, to support people and communities in the right place and in the right way, and ultimately, to enabling North Somerset to be a mentally healthier place to live, work and flourish.

Cllr Jenna Ho Marris

Executive Member, Homes and Health Chair, North Somerset Health and Wellbeing Board

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Executive Summary

Our purpose

The North Somerset All-Age Mental Health Strategy sets out our shared vision and ambitions for supporting and enabling people to have the best possible mental health and wellbeing throughout life. The strategy highlights the importance of mental health and maps out how we will work collectively to address rising mental health need and to tackle health inequalities.

Our vision

Our vision is that:

People in North Somerset are enabled and supported to have the best possible mental health and wellbeing and to live well in their communities, via a focus on prevention and early intervention and targeted action to reduce inequalities.

We will achieve this vision through a focus on:

- **Prevention:** preventing mental ill-health before it arises or preventing any worsening of mental health problems as early as possible
- **Early Intervention:** identifying mental ill-health as early as possible and intervening early with the right support to prevent worsening of outcomes.
- **Supported and Living Well:** supporting individuals in a holistic way so that people with mental ill-health can live well in our communities.

How have we developed the strategy?

Our strategy and action plan builds on our understanding of mental health and wellbeing need from national and local data; as well as views shared by members of our communities and partner organisations about need and how best to improve and support mental health and wellbeing.

What will we do?

Our action plan captures the services, service improvements, training provision, professional development, and mental health and wellbeing programmes to be implemented across early years settings, schools, workplaces, health and care settings, mental health services, and communities. All of our actions seek to lay the best foundations for good mental health throughout life, provide timely support in a range of settings for people of all ages, and to co-produce services, building on data, insight and ongoing learning.

How will we know we've made a difference?

We will monitor progress in implementing our actions and realising our vision regularly, through our multi-disciplinary mental health strategy partnership. Refresh of the strategy will be built-in to the timeline to enable us to review progress and understand any changes we may need to make to meet our targets. We will use data and insight collected through national and local sources to evaluate the impact of our actions and approaches.

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1. Introduction

Mental health has been defined as “a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”.¹

Good mental health and wellbeing provides the foundation for growth, development, physical health, and quality of life for individuals, enabling people to thrive and achieve their potential, cope with the stresses of life, and work productively, while underpinning healthy communities and societies. In this way, mental health is not just the absence of mental illness but is fundamental to underpinning our health and wellbeing throughout life. Our mental health has equal importance to our physical health and underpins our health throughout life, with mental and physical health being dependent on each other.

Supporting mental health has multiple and wide-ranging beneficial impacts for individuals and the wider population, such as improved physical health; inclusive, safe, and healthy settings, places and communities; strong social and community networks; individual and community resilience; and advances in tackling inequalities through action on the wider determinants of health, such as employment, housing, discrimination, the built environment, and education.

Importantly, however, the prevalence of mental ill-health is high. In any given week, one in six adults may experience a mental health problem² with mental illness disproportionately affecting some groups in society, such as people who identify as LGBTQ+, people in Black, Asian and minority ethnic groups, people living with disabilities, and people living in poverty,³ contributing to health inequalities.

More than half of all mental health illnesses originate in childhood or adolescence, with three quarters of mental health problems emerging by the age of twenty⁴. The early years are therefore a critical stage for the development of good mental health and wellbeing. The first 1,001 days of a child’s life set the foundations for lifelong emotional and physical wellbeing,⁵ and determinants of health and experiences during childhood and adolescence are critical in determining future mental health and wellbeing.

¹ World Health Organisation 2001: Basic Documents: 43rd Edition: World Health Organisation:

² McManus S, Bebbington P, Jenkins R, Brugha T (eds) (2016). Mental health and wellbeing in England: Adult Psychiatric Morbidity Survey 2014.

³ Public Health England. Mental health and wellbeing: JSNA toolkit. Guidance 2. Mental health: environmental factors; Guidance 3. Mental health: population factors. Updated 25 October 2019.

⁴ Royal College of Paediatrics and Child Health (2020) State of Child Health. London: RCPCH.

⁵ HM Government. The Best Start for Life. A Vision for the 1,001 Critical Days. 2021.

In this strategy, we highlight how we will collectively support good mental health and wellbeing for everyone in North Somerset by taking a person-focused approach that responds to our understanding of local need and the circumstances and environments in which people live and which incorporates both universal and targeted actions.

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2. Our vision for mental health and wellbeing in North Somerset

Our vision for mental health and wellbeing in North Somerset is that:

People in North Somerset are enabled and supported to have the best possible mental health and wellbeing and to live well in their communities, via a focus on prevention and early intervention and targeted action to reduce inequalities.

Our vision will be achieved through the 3 themes of:

- **Prevention:** preventing mental ill-health before it arises or preventing any worsening of mental health problems as early as possible
- **Early Intervention:** identifying mental ill-health as early as possible and intervening early with the right support to prevent worsening of outcomes.
- **Supported and Living Well:** supporting individuals in a holistic way so that people with mental ill-health can live well in our communities.

Through our shared ambitions and objectives, we will work towards protecting and supporting the mental health and wellbeing of people living in North Somerset, preventing mental illness and increasing the number of people being supported and empowered to experience optimal wellbeing. Through targeted action, we will reduce mental health inequalities and narrow the gaps in health outcomes for individuals, groups and communities living with mental illness.

This strategy has been developed with input from partners and people with lived experience of mental ill-health to ensure that our objectives and actions reflect a partnership approach to improving mental health and wellbeing in North Somerset.

3. Approach: How will we achieve our vision?

We will achieve our vision by working to five key principles that will drive the work of this mental health strategy forward:

Partnerships and collaboration

Seeking insight and involvement from a range of partners, including people with lived experience, and working in an integrated way across North Somerset and the ICS

Tackling health inequalities

Addressing health inequalities by taking a proportionately greater focus where, or among whom, there is greater need

Life course

Taking action from birth to older age, with the understanding that addressing risk factors and promoting good mental health and wellbeing in childhood can have long-lasting benefits

Data, insight, evaluation and learning

Using data, evidence, feedback and insight to guide decision-making and strategic planning, and evaluating progress to ensure maximum benefit of action

Enabling and empowering people and communities

Maximising strengths-based approaches and building strong social connections and community participation to support wellbeing

3.1. Partnerships, Collaboration and Co-production

We have sought involvement and insight from a range of partners to develop this strategy, with the process overseen by a multi-disciplinary mental health strategy group. Our action plan includes interventions, services and programmes led by a range of organisations and mental health services with a shared goal of co-producing new developments in services or support.

All of our work is underpinned by the wider system in which we work, Healthier Together, our integrated care system (ICS) for Bristol, North Somerset and South

Gloucestershire (BNSSG), which includes the three local authorities, primary and secondary care, and community and mental health services. This provides the opportunity to work in a truly integrated and collaborative way between agencies with one of the ICS's key commitments being early identification and support for people experiencing anxiety and depression. The two locality partnerships, Woodspring and One Weston, include a range of organisations and sectors, working with local people and communities to improve health and wellbeing, including the Mental Health & Wellbeing Integrated Teams (MINTs), in place to deliver joined up mental health support.

3.2. Tackling health inequalities

Health inequalities are avoidable and unfair differences in health and wellbeing across the population or between different groups of people. Health inequalities arise because our health is affected by the conditions in which we are born, grow up, live, work and age, as well as factors such as age, gender, ethnicity and where we live.

North Somerset includes areas of high deprivation and particular population groups in the area experience inequalities in determinants of mental ill-health and mental health outcomes. North Somerset has one of the highest levels of inequality between areas, which can be masked by outcomes for the whole local authority area, with the most deprived areas found mostly in Weston-super-Mare. More information about inequalities is provided in section 4.

Through this strategy, we will seek to tackle inequalities in mental health outcomes by taking a proportionately greater focus where, or among whom, need is greater, to enable the mental health of people with the poorest health outcomes to improve faster. We also aim to take action across all of the factors influencing mental health (e.g. housing, employment, social isolation) among people in our communities. In this way, we aim to close the gap in access, experience and outcomes between groups.

3.3. Life course

Our mental health strategy considers the whole life course, from birth to older age, and the different risk and protective factors and solutions needed. Notably, a substantial proportion of mental health problems have been established early in life, with half of all mental health problems established by age 14, and three quarters established by age 24.⁶ Taking action from the antenatal period, infancy and through childhood is therefore critical to support a preventive approach, alongside opportunities to prevent and protect mental health throughout the life course, to reduce the incidence of mental ill-health and to promote wellbeing, with the right support given at the right time in the right place for the best outcome.

⁶ Public Health England and Association of Directors of Public Health. What Good Looks Like for Public Mental Health.

3.4. Informed by data, insight, evaluation and ongoing learning

Our strategy and action plan has been informed by data and evidence both in understanding mental health need but also in the interventions needed to prevent and protect the mental health of North Somerset's population. This has been used alongside the feedback and insight from residents, stakeholders and people with lived experience to inform and guide decisions. Through the course of this strategy, we will seek to draw on people's lived experience of mental ill-health and mental health needs, as well as other members of our communities, to guide decision-making and action.

We will also evaluate the impact of the strategy, so that we know we are making a difference to people's lives. The five-year action plan includes measurable targets against each action, which will enable us to monitor impact over this period and to refresh the actions as needed to maximise impact. Broader impact of the actions implemented will also be measured using nationally available measures of mental illness and wellbeing in North Somerset. Our key measures include wellbeing scores, prevalence of depression, self-reported anxiety scores, hospital attendance for self-harm among young people and the proportion of school pupils with a social, emotional and mental health need.

3.5. Enabling and empowering people and communities

North Somerset's strength-based approach in communities is set out in full in our *Empowering Communities Strategy* and through the extensive work of the VCFSE sector and others. We build on this in our action plan, advocating for an approach that builds on the assets within communities such as local resources, skills, knowledge, social networks and organisations play an essential role in improving wellbeing.

Addressing social isolation and loneliness by building strong social connections, and community participation is also a critical factor in supporting and enabling wellbeing. A range of community mental health programmes are already in place and our action plan highlights ways to promote resilience and wellbeing through local strengths.

4. What are the mental health needs in our population?

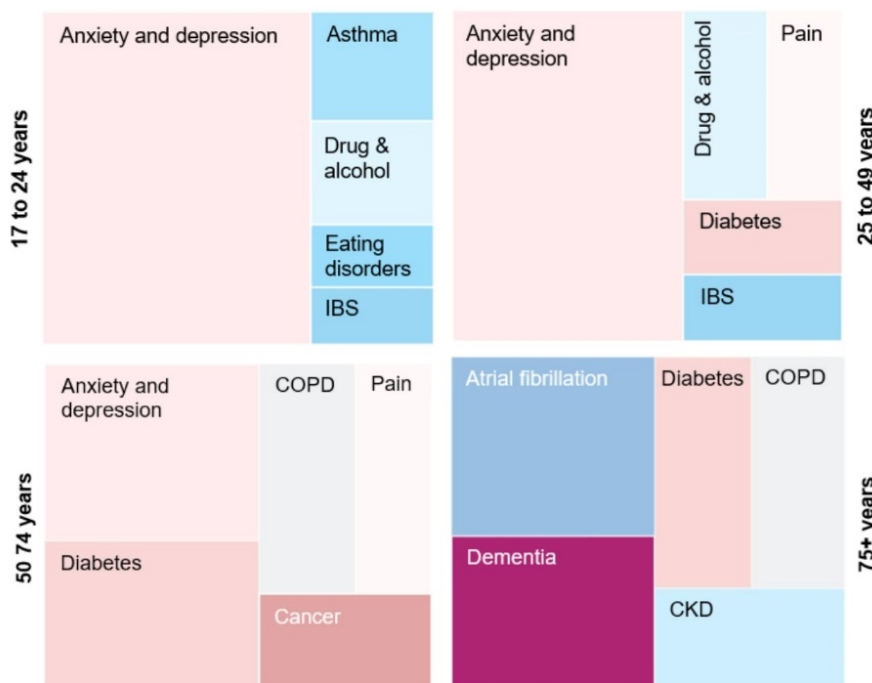
Nationally, approximately one in 6 adults have had a common mental health problem in the last week and over one in ten children and young people experience a mental health problem.

Understanding mental health needs in our local population provides the case for action. As part of developing this strategy, detailed local mental health needs assessments have been undertaken for children and adults. Outlined below are the key findings from these assessments.

4.1. Levels of mental health concerns in the North Somerset population

Across Bristol North Somerset and South Gloucestershire, anxiety and depression have the greatest impact on the population aged 17-49 years and a substantial impact for those aged 50-74. For those aged over 75 years dementia and atrial fibrillation have the biggest impact.

Figure 1. Conditions that have the greatest impact on the BNSSG population by age group.

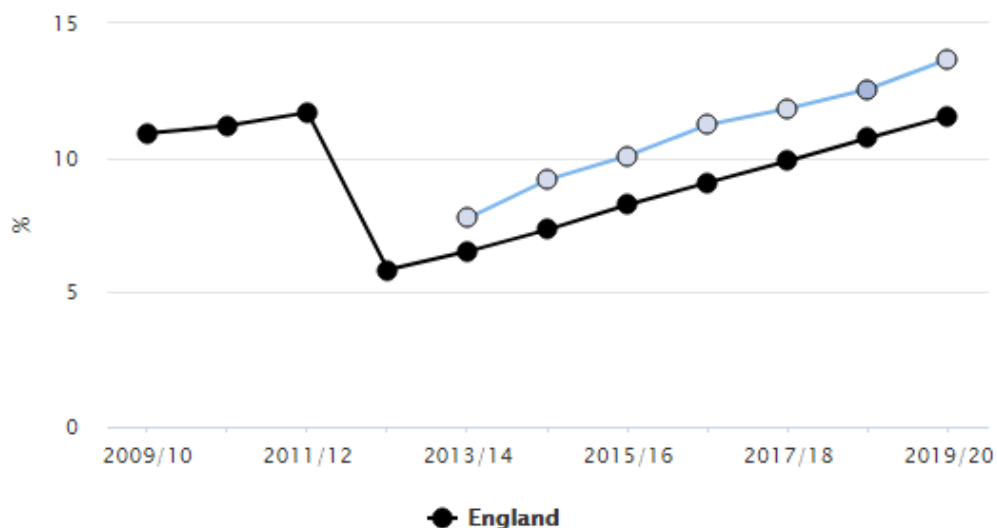


Among children and young people, data shows that 3.3% of school pupils have a social, emotional and mental health need, which is slightly higher than the England average of 3.0%.

Emotional wellbeing was a cause for concern among 39% of looked after children in North Somerset, which is slightly above the England average (37%). However, in some areas the prevalence is as high 49% and as low as 29%, indicating inequality across the area.

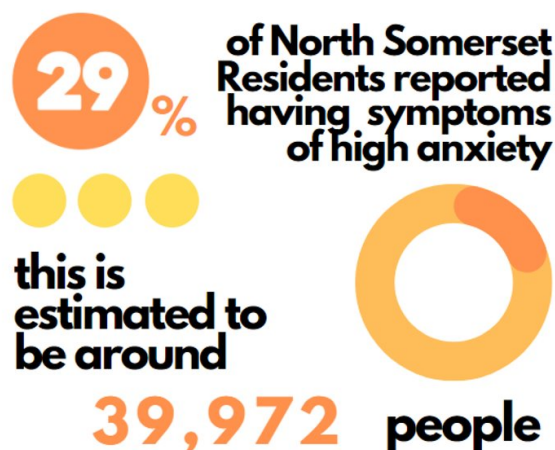
Among adults (aged over 18 years), data from GP practices suggests that prevalence of depression is increasing locally and currently stands at 15%, equating to approximately 24,000 people aged >18 years in North Somerset

Figure 2: The prevalence of depression (%) among adults in North Somerset, by year, as recorded by GP practices, compared to the England average.



The prevalence of anxiety among adults in North Somerset is high, although the prevalence is in line with the average prevalence in the South West region and England.

Figure 3. Prevalence of self-reported anxiety symptoms by adults in North Somerset.

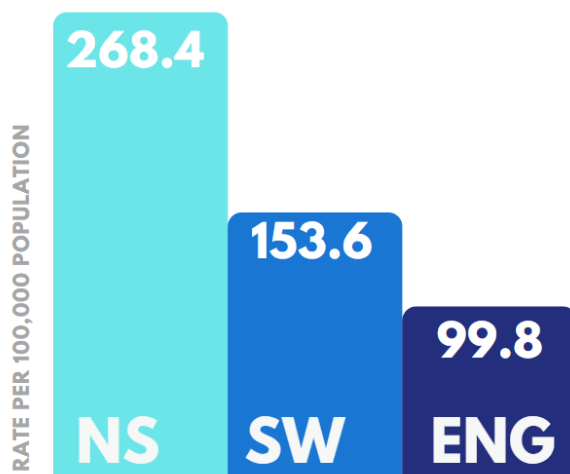


4.2. Hospital admissions due to mental illness and/or self-harm

Among children and young people, the rate of hospital admissions related to mental health conditions is higher in North Somerset compared to the regional and national average (Figure 4).

Figure 4. Rate of hospital admissions related to mental health conditions among children and young people in North Somerset

IN 2021, HOSPITAL ADMISSIONS RELATING TO MENTAL HEALTH CONDITIONS IN UNDER 18S ARE THE HIGHEST IN THE SOUTH WEST AND THE SECOND HIGHEST IN ENGLAND



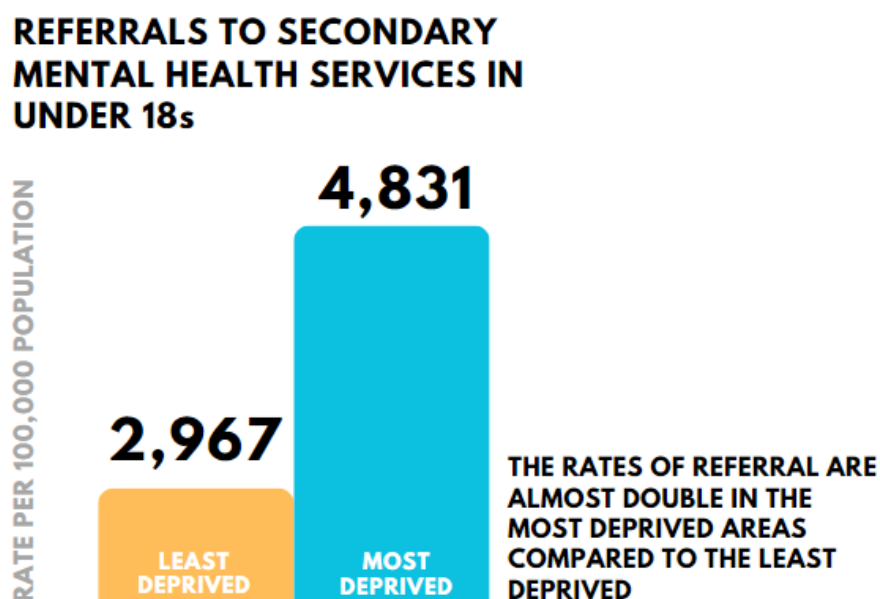
Locally the rate of hospital admission as a result of self-harm is higher than the national average in young people, with the rate being 1.5 times higher for those aged 20-24 in North Somerset compared to the average rate across England.

In 2020/21, there were 333 emergency hospital admissions for intentional self-harm per 100,000 population of all ages. This is significantly higher than the South West and England rates (249/100,000, 181/100,000, respectively). Rates were particularly high in areas of Weston super-Mare.

4.3. Referral to secondary mental health services

The rate of new referrals to secondary mental health services for CYP aged <18 years was 2,967/100,000 in 2019/20, but there is substantial inequality as can be seen in Figure 5 below.

Figure 5. The rate of referrals to secondary mental health services among those aged under 18 years in North Somerset.



4.4. Mortality rates

Local suicide rates for adults are comparable to England. As is observed nationally, the rate of suicide was 3 times higher among males than females (Figure 6).

Figure 6. Inequality in suicide between males and females (adults aged >18 years).

**IN NORTH SOMERSET
51 PEOPLE DIED BY
SUICIDE BETWEEN
2019-21.**



69% WERE MALE

Data demonstrates higher mortality rates amongst adults with severe mental illness. A resident with a documented severe mental illness is 4.5 times more likely to die

before the age of 75 than someone without a severe mental illness (Figure 7). This is a risk significantly higher than that seen nationally.

Figure 7. Increased likelihood of premature mortality among people with a severe mental illness.

IN NORTH SOMERSET,
ADULTS WITH A SEVERE
MENTAL ILLNESS ARE
4.5 TIMES
MORE LIKELY TO DIE BEFORE THE
AGE OF 75



4.5. Wider determinants of health

While many areas in North Somerset have low levels of deprivation, a significant proportion of North Somerset residents also live in some of the most deprived areas of England. The most deprived areas are focused with Weston-super-Mare.

Weston-Super-Mare Central and Weston-Super-Mare South wards are wards with the highest proportion of children living in absolute poverty (17.6% and 17.5%, respectively) (Figure 8).

Figure 8. Inequality in eligibility for free school meals between Weston-super-Mare and other areas of North Somerset.

**In North Somerset,
14.6% of Primary
School children
are eligible for
free school meals**

**IN
WESTON
SUPER
MARE
SOUTH**

45%

are

The rate of 16–17-year-old not in education, employment or training (NEET) is slightly higher in North Somerset (5.1%) compared to England (4.7%)

5. What have people told us is important to them?

A range of perspectives, feedback and ideas were contributed from people, stakeholders and people with lived experience of mental ill-health from North Somerset and BNSSG, which were collated from a range of engagement opportunities. Comments spanned a range of topics and ideas, which fit within three overarching themes, and which are summarised below. Notably, some specific comments and suggestions about gaps in provision that are being addressed through other strategies and funded programmes are not included in this action plan, to avoid duplication.

5.1. Wider determinants of health

People and professionals highlighted the importance of good employment in healthy workplaces, but also the importance of minimising stress and a good work-life balance. The impact of the cost-of-living crisis in bringing new financial and family stressors to people's lives was highlighted as a priority with suggestions of ensuring that all relevant services and organisations signpost individuals to mental health and wellbeing support.

Recognition of the beneficial impact of being active and engaging with the natural environment in improving mental health and wellbeing was also clearly communicated. A forthcoming Physical Activity strategy for North Somerset sets out ambitions and plans for maximising opportunities to be active and engage with green space and we recognise this in our action plan.

5.2. Approaches to supporting mental health

Reflecting BNSSG ICS's commitment to developments around trauma-informed practice, stakeholders communicated that practice and services need to be trauma-informed, and ultimately, trauma-responsive. Access to services can be affected by fear of stigma or being labelled, and collective action is also needed to address unconscious bias or prejudice, alongside diversity within services.

In relation to community-led and strengths-based action, individuals highlighted the role of non-specialised support for those between services or awaiting a service, which may include peer support, social prescribing and/or social and community engagement.

5.3. Mental health services through the life course

Feedback highlighted the cohesion and visibility of mental health services needed, and the importance of joining up and integrating services. The need for support that is tailored to different stages of the life course and/or to different population groups was also raised. For instance, in relation to young people, a need for family-focused and parent/carer support, and a focus on supporting emotional literacy was considered key, while, it was noted that older people may have different support-seeking behaviours compared to younger people. Furthermore, population groups such as people with a dual diagnosis, people that have experience of trauma, people with a disability, carers, refugees, or children with SEND may need tailored and person-centred support.

5.4. Immediate priorities for action

Priorities for immediate action in the strategy were considered to be:

- Strengthening CYP wellbeing, including through parental support and family-focused approaches.
- Addressing the cost-of-living crisis and support for those with additional financial pressure.
- Supporting the role of workplaces in managing wellbeing in the workforce.
- Increasing awareness of services and ensuring integration of services to provide more seamless support.
- A focus on trauma-informed practice training, supporting a move to trauma-informed and trauma-responsive practice.
- Support for 'bridging' support while individuals await a service, including non-specialist peer support.
- Improving support provided for those experiencing mental ill-health and substance use dependence.
- Facilitating carers' mental wellbeing through dedicated support.

6. How does the strategy fit with national and local strategy and policy?

6.1. National policy, strategy, and programmes

Our vision, ambitions, objectives and actions build on, and are integrated, with national and local policies.

*The NHS Long Term*⁷ plan (2019) highlighted increased support for individuals in crisis, and improved access to psychological therapies, while the *Community Mental Health Framework for Adults and Older Adults* (2019) paved the way forward for our current MINTs in our two localities. Our action plan reflects these advances.

Our focus on prevention as a key theme supports the *Prevention Concordat for Better Mental Health*⁸ (updated in 2022), a practical resource to promote good mental health and prevent mental health problems, while also supporting the *Advancing Mental Health Equalities Strategy* (2020)⁹, which aims to address inequalities in access, experience and outcomes among those in mental health services. The focus on reducing inequalities also supports the *Core20plus5* approach for adults¹⁰, which aims to reduce health inequalities among those living in the 20% most deprived areas and specific population groups (e.g. inclusion health groups, people in ethnic minorities, people with learning disabilities and those with protected characteristics). One of the five focus areas for adults sets an ambition for physical health checks for people with severe mental illness (SMI), while improvement in access rates to CYP mental health services for those experiencing health inequalities a focus area for CYP.

The promotion of children and young people's mental health and wellbeing through a whole school approach¹¹ is described in national guidance highlighting eight principles for supporting good emotional health and wellbeing in these settings, an approach being implemented in North Somerset.

Lastly, the national *Suicide Prevention Strategy for England (2023-2028)*¹² aims to reduce the suicide rate, improve support for people who have self-harmed, and improve support for people bereaved by suicide. Our strategy, and links to the North

⁷ NHS, 2019. *The NHS Long Term plan*.

⁸ Public Health England (2017): *Prevention Concordat for Better Mental Health*. Office for Health Improvement and Disparities.

⁹ NHS 2020. *Advancing mental health equalities strategy*.

¹⁰ NHS England. [Core20PLUS5](#).

¹¹ HM Government (2021): *Promoting Children and Young Peoples Mental Health and Wellbeing: A Whole School Approach*: Children and Young People's Mental Health Coalition.

¹² Department of Health and Social Care (2023): *Suicide prevention strategy for England: 2023-2028*.

Somerset Suicide Prevention Action Plan, support the priority areas for action outlined.

6.2. Local policy, strategy, and programmes

Our strategy does not intend to re-invent or re-design services and local provision that supports mental health and wellbeing in our population. Rather, we aim to collectively build on the extensive practice and the range of services already in place to address mental health needs. The action plan aims to capture ongoing activity, as well as new areas that address gaps in delivery or emerging needs.

In particular, we note a range of existing strategies that dovetail with this mental health strategy, where action contributes to improving mental health and wellbeing, for instance, through increased physical activity, addressing social isolation and loneliness and/or empowering communities.

- First, the North Somerset Council Corporate Plan 2021-2024 incorporates an aim to reduce inequalities in its vision, with priorities to protect the most vulnerable people in our communities, a focus on tackling inequalities, partnerships that enhance skills, learning and employment opportunities and an approach that enables children to achieve their full potential.¹³
- The North Somerset Health and Wellbeing Strategy 2021-2024 also includes mental health as a key priority with objectives to reduce the prevalence of poor mental health and to improve access to timely mental health support.
- Additional strategies that contribute to meeting the objectives and outcomes of this strategy include: the North Somerset Domestic Abuse Strategy 2020-2023; Suicide Prevention Action Plan 2023-2028; Social Isolation and Loneliness Needs Assessment and Strategy 2019; Green Infrastructure Strategy, Active Travel Strategy 2020-2030 and forthcoming Mental Health Strategy for Children in Care 2023-28, and Physical Activity, Education, and Early Years Strategies.

Importantly, our strategy responds to the ICS Strategy and links with the ambitions and actions outlined in the forthcoming ICS Mental Health Strategy, while contributing to the ambition of the ICS to become a trauma-informed ICS. A commitment to trauma-informed practice is included within the ICS strategy, the BNSSG Joint Forward Plan and the ICS Mental Health and Wellbeing Strategy, and is included in our North Somerset Mental Health Strategy too. Dedicated resource is in place within the ICS through a trauma-informed practice manager, to further develop a shared language and approach to trauma informed practice and to support organisations and different parts of the system to consider how to recognise and effectively respond to trauma and adversity experienced by individuals, families,

¹³ North Somerset Council (2021). Corporate Plan 2021-2024.

communities and staff. We will build on this development through the timeline of our strategy with a clear focus on working towards this ICS commitment.

Further to links with these strategic plans, and as described above, the actions captured in our all-age mental health strategy build on a range of services and programmes provided across the local authority area. We have not captured all of this work in our action plan. However, developments such as those below are just a few that provide the framework on which our action plan has been developed:

- The implementation of the Mental Health & Wellbeing Integrated Teams (MINTs) which provide community-based and integrated assessment and treatment for adults with mental ill-health via a person-focused, multi-disciplinary approach
- Improved access to NHS Talking Therapies
- Service provision for those in crisis or following bereavement by suicide
- The introduction of Mental Health Support Teams which now provide support to approximately half of our school-aged children, with other schools supported by the range of programmes in place by Off the Record
- A range of service developments within Avon Wiltshire Mental Health Partnership NHS Trust (AWP), including Children and Adolescents Mental Health Services (CAMHS).

The mental health impacts of the COVID-19 pandemic and the cost-of-living crisis are still emerging and a long-term view is required. We note, however, that the current time is one of financial pressure and reducing budgets, and so while we are ambitious in our plans and optimistic about the beneficial impacts of our action plan, we must be realistic about what can be achieved, as mental health – and physical health – needs rise.

7. Measuring Progress

The North Somerset Mental Health Strategy 2023-28 action plan has measurable targets owned both by North Somerset Council and partners. We will monitor progress in implementation of the action plan and to the targets outlined. We will also use national data reported by OHID as well as local data collected by service providers and partners to evaluate the overall impact of the actions implemented on specific measures of mental health and wellbeing among children, young people and adults.

7.1 Measures of progress and impact

Among adults, we will examine:

- Wellbeing scores: anxiety, feeling that the things people do are worthwhile, life satisfaction, happiness.¹⁴
- The prevalence of depression (%).¹⁵

Among children and young people, we will examine:

- The prevalence of school pupils with social, emotional and mental health need (%)
- The rate of A&E attendance and hospital admission for self-harm among children and young people aged 10-24 years.

7.2. Targets

Our targets to achieve by 2028 for adults are:

- Wellbeing scores to be in line with or below the England average¹⁶
 - High anxiety score (22.9% to ≤22.6%)
 - Low worthwhile score (remaining at 3.3% or lower)
 - Low satisfaction score (5.5% to ≤5.0%)
 - Low happiness score (8.6% to ≤8.4%).
- To reduce the prevalence of depression from 14.9% to 14.6%
- A narrowing of the gap in premature mortality between people with serious mental illness and the general population.

Our targets to achieve by 2028 for children and young people are:

- To reduce the prevalence of school pupils with social, emotional and mental health need from 3.3% to be in line with, or lower than, the England average of 3.0%.

¹⁴ Office for Health Improvement and Disparities.

¹⁵ Quality and Outcomes Framework (2021-22).

¹⁶ Based on currently available data (2021-22, Office for Health Improvement and Disparities)

- To reduce the rate of hospital admission as a result of self-harm among children and young people aged 10-24 years (559/100,000) towards the England average (427/100,000).

The findings of our monitoring and evaluation will be reported quarterly to the Mental Health Strategy Group. Reports will also be provided to the Health and Wellbeing Board and Local Authority Scrutiny Panels and other partners to ensure awareness of progress and impact of shared actions. Membership of the North Somerset Mental Health Strategy Group collectively includes representation from:

- North Somerset Council (Public Health and Regulatory Services, Children's Services, Adults Services, Place and Corporate Services Directorates)
- BNSSG Integrated Care Board – Weston, Worle and Villages and Woodspring Locality Partnerships
- Voluntary Action North Somerset
- Independent Mental Health Network
- Avon and Wiltshire Mental Health Partnership NHS Trust (AWP), including CAMHS and Mental Health Support Teams
- Off the Record
- Kooth
- Vita Health Group (NHS Talking Therapies)
- Primary care
- North Somerset Wellbeing Collective

8. Themes, ambitions and objectives

To achieve our vision of improving the mental health of the residents of North Somerset and to reduce inequalities, we have key objectives and actions to work towards.

Overarching themes have been categorised to align with the North Somerset joint Health and Wellbeing Strategy and Action Plan:

- **Prevention:** these are upstream actions to prevent mental ill-health
- **Early Intervention:** this involves identifying mental ill-health as early as possible and intervening early with the right support to prevent worsening of outcomes. The earlier action is taken to prevent or resolve a problem, the better the outcome.
- **Supported and Living Well:** This includes a focus on the wider determinants of health, such as employment, transport, and housing and places. It also highlights our commitment to improving the physical health of those with severe mental health issues.

Our ambitions and objectives within each theme are:

Prevention: Strengthening action to prevent mental ill health before it arises and to promote protective factors to enhance wellbeing.

Ambition: The foundations of good mental health and wellbeing are developed for all, through focused action in communities and settings across the life course.

Objective 1: The development of healthy, secure attachments and good emotional wellbeing is supported to enable the best start in life.

Objective 2: Wellbeing is maximised across settings and communities to build resilience and to reduce social isolation and loneliness.

Objective 3: Inclusive and trauma-informed and responsive practice is embedded across North Somerset.

Objective 4: People are enabled to have the best possible mental health and wellbeing through effective training and development of professionals, and improved communication and signposting about programmes and services.

Early intervention: Identifying mental health needs and responding to those needs at the earliest opportunity.

Ambition: Timely support and early intervention are available in a range of settings for people of all ages in North Somerset

Objective 1: Children and young people can access a range of mental health services and support.

Objective 2: Adults living in North Somerset receive the right support in the right place at the right time.

Objective 3: Appropriate actions, services, and evidence-based support are available for people at risk of self-harm and/or suicide.

Supported and living well: Providing targeted opportunities and support to enable people with mental ill-health, and members of local communities, to live well

Ambition 1: Services and service developments are co-produced with people with lived experience of mental ill-health and members of local communities, and build on data, intelligence, and engagement.

Objective 1: Local residents and people from a range of population groups are engaged in creating community networks and co-producing mental health and wellbeing activities and interventions using a strengths-based approach.

Ambition 2: Physical health is improved among people with severe mental illness.

Objective 1: The number and quality of physical health checks is improved for people with severe mental illness.

Ambition 3: Support and care provided takes a proportionate universalism approach that tackles inequalities, builds on strengths, and is responsive to risk and mental health need.

Objective 1: Services are targeted proportionately to where, or among whom, need is greatest.

Objective 2: Mental health support is available for people with a dual diagnosis.

Objective 3: Holistic support is provided for people living with mental ill-health that incorporates consideration of the wider determinants of health such as financial pressures, employment and housing.

9. Mental Health Strategy Action Plan 2023-2028

9.1. Prevention: Strengthening action to prevent mental ill health before it arises and to promote protective factors to enhance wellbeing

Ambition: The foundations of good mental health and wellbeing are developed for all, through focused action in communities and settings across the life course.

Objective 1: The development of healthy attachments and good emotional wellbeing is supported to enable the best start in life

Action	Target	Year	Lead
We will provide breastfeeding support aimed at improving maternal attachment and reducing inequalities by focusing more on the areas with lowest breastfeeding prevalence to achieve the BFI target	UNICEF Baby Friendly Initiative (BFI) training uptake among: <ul style="list-style-type: none"> • 90% children’s centre staff • 100% Health Visitors (HVs) • 100% Breastfeeding supporters 	2024	North Somerset Council Public Health and Regulatory Services Directorate (NSC PHRS) (TG)
	70% of mothers breast feeding at 14 days post-natal	2028	

We will continue to provide Maternal Early Childhood Sustained Home Visiting (MESCH) support	100% HVs trained in MESCH	2028	Sirona CiC (children in care) (Public health nursing)
We will increase capacity for delivery of 1-1 interventions such as Theraplay and Video Interactive Guidance (VIG) within the North Somerset parenting team	12 Wellbeing practitioners trained in delivering 1-1 interventions within North Somerset	2025	NSC CSD (LMM)
We will provide targeted group support, e.g. Mellow Parenting, for parents who want to build strong relationships with their children	100% of parents expressing an interest for further parenting support	2025	NSC CSD (LMM)
We will implement targeted parenting support for (i) parents of children with autism spectrum disorder and (ii) non-violent parenting	N attending support groups	2026	NSC CSD (EP)
We will ensure that there are integrated pathways for all agencies working with young families so that children and families receive the right support at the right time, for the best outcome.	Relevant pathways mapped, shared and understood by all partners	2028	Sirona CIC (PH)
We will create a virtual offer of parenting support to make it easier for parents to self-serve courses appropriate to their needs	Virtual offer created	2025	NSC CSD (LMM)

We will create a Parenting Village where parents, neighbours, and members of our communities are providing peer support to each other	Parenting village created.	2028	NSC CSD (LMM)
We will develop an additional hub for providing information across NS on mental health services	Increase information hub from 1 to 2	2024	OTR
We will increase the capacity of Mental Health Support in schools by introducing a further 0.5 team	Increase Mental Health Support Team (MHST) reach from 46.2% to 57.78% of the school population	2024	NS PH (SC) OTR/AWP
We will develop and implement a secondary PSHE Award pilot in five secondary schools	5 secondary schools will have implemented a secondary PSHE Award	2028	NSC PH (SC)
We will develop nurture hubs in 5 schools in the areas of highest need	5 hubs developed	2028	NSC Children's Services (WP)
We will extend current provision of resilience labs (stress management workshops) to community venues	4000 young people attending	2028	OTR
Objective 2: Wellbeing is maximised across settings and communities to build resilience and to reduce social isolation and loneliness			
We will recruit and support more workplaces to join The Healthy Workplace Award Programme	Increase number of workplaces in Healthy Workplaces Scheme from 4 to 8	2024	NSC PH (LG)

We will support local, strengths-based, community approaches to improving health and wellbeing	Increase in numbers engaging in social prescribing destinations and community mental health programmes:	2025	NSC PHRS (KB) NSC Place Directorate (SR)
We will develop and publish a multi-agency action plan to improve the health and wellbeing of men living in North Somerset	Publication of action plan	2024	NSC PH (BT)
We will refresh the North Somerset Social Isolation and Loneliness Strategy ensuring a life course approach and that new areas of concern have been considered	Refreshed Strategy published	2025	ASC (GH)
We will publish and implement a North Somerset Physical Activity Strategy to support the links between activity levels and mental health and wellbeing	Physical activity strategy published and implemented	2028	NSC PH and Place Directorate (RS, KP)
Objective 3: Inclusive and trauma-informed and responsive practice is embedded across North Somerset			
We will support implementation of the BNSSG trauma-informed systems programme.	North Somerset Trauma Informed Practice action plan completed and signed off	2026	NSC PHRS, NSC Adults Services Directorate (ASD), CSD.

We will introduce dedicated capacity to deliver a North Somerset-based action plan to embed trauma-informed practice and responsiveness in all our CYP and adult services	Delivery of all actions in the North Somerset trauma informed action plan	2028	NSC Children's Services Directorate (JS)
We will provide trauma-informed practice training to professionals in health, care and voluntary services	5 training courses provided	2028	NSC Children's Services Directorate (JS)
We will deliver two 2-hour workshops on developing trauma awareness and embed a community of learning, shared purpose and infrastructure to facilitate peer support.	Delivery of two workshops around trauma awareness	2025	North Somerset Wellbeing Collective and Second Step (MG)
We will reduce discrimination and encourage diversity within our workforces including related to age and other protected characteristics in the local authority.	NSC commitment to age friendly pledge Delivery of North Somerset Council Anti-racism action plan	2024 2028	NSC Corporate Services Directorate (STW) and (LR)
We will hold the Good Grief Festival aimed at supporting people who have been bereaved	1 x Festival	2024	Culture Weston
Objective 4: People are enabled to have the best possible mental health and wellbeing through effective training and development of professionals, and improved communication and signposting about programmes and services			
We will provide and embed 5-to-thrive training across children centres, family hubs and early years, health and social care partners.	100% children's centre staff 100% children's hubs 40 staff per year- EY health and social care partners	2025 2028	NSC Children's Services Directorate (CSD)

			and PHRS (MM, TG, GA)
We will provide training for mental health and pastoral care leads, monthly seminars, peer supervision groups and run a pilot project in two schools to embed learning in practice, including thresholds and signposting to services	70% of schools accredited in mental health lead and pastoral lead training programme. 100% of schools knowing where to access the right support for CYP.	2028 2028	NSC Children's Services Directorate (JS)
We will promote Mental Health Leads training from the Department of Education to schools and monitor uptake.	Mental health leads will be supported with three network meetings per year and 70% of Mental Health Lead in North Somerset will have completed the DfE Mental Health Leads training (from 50% in March 2023)	2028	NSC PH (SC)
We will publish and disseminate 'Right Service, Right Time: A pathway for supporting Children and young people's mental health' (available here)	Publication of Right Service, Right Time: A Pathway for Supporting Children and Young People's Mental Health	2024	NSC Children's Directorate (FK)
We will continue to work with Weston College and NS schools to exhibit local CYP artwork in Sovereign Mall, and Town Hall	1 exhibition per term	2024	NSC Place Directorate (JC)
We will deliver a public mental health training programme targeted at professionals who support people living with mental ill-health	200 attending training in 1 year Increased trend in attendance at mental health training among employers.	2023	NSC PH (HY)

<p>We will widen our public mental health training programme offer to those who work in North Somerset.</p>	<p>Increase trend in number of workplaces scheme employees attending Public Mental Health Training programmes.</p>	<p>2028</p>	<p>NSC PH (HY and LG)</p>
<p>We will increase awareness of mental health and wellbeing and available services among professionals and residents, by running three campaigns per year and utilising the Better Health North Somerset website, social media channels, and community-based networks to disseminate information.</p>	<p>3 mental health awareness raising campaigns per year</p> <p>The mental wellbeing services that are included on the Better Health North Somerset website will be up to date</p> <p>Promote the 'Finding your way around wellbeing support services in North Somerset' leaflet</p> <p>Addition of link to Culture Weston's resource booklet to Better Health North Somerset website</p> <p>Inclusion of signposting to the North Somerset Adult Carers brochure via the NS Better Health Website</p>	<p>2024</p> <p>2024</p> <p>2024</p>	<p>NSC PHRS (HY)</p> <p>NSC PHRS (DH)</p> <p>NSC PH (HI)</p>
<p>We will ensure that reading well resources about mental health and wellbeing are available in libraries in regular book, e-book and audio book format</p>	<p>Increase awareness and use from 3,000 to 3,500 annually</p>	<p>2024</p>	<p>NSC Place Directorate (Libraries team)</p>

9.2. Early intervention: Identifying mental health needs and responding to those needs at the earliest opportunity

Ambition 1: Timely support and early intervention is available in a range of settings for people of all ages in North Somerset			
Objective 1: Children and young people can access a range of mental health services and support.			
Action	Target	Timeline	Lead
We will explore opportunities to incorporate infant mental health specialist support for children aged <5 years into the service provision in North Somerset.	Opportunities explored between partners	2026	NSC PH (GM)
We will provide the Mind Aid and Shameless group workshops for CYP in secondary schools for those with the greatest need and support.	N=120 young people engaged in MindAid and Shameless workshops	2025	OTR
We will raise awareness of the Kooth online counselling and wellbeing support service for young people aged 10-25 in North Somerset and ensure provision is responsive to local need.	Increased access to Kooth, particularly among those groups currently under-represented in the service.	2028	Kooth (RL)
We will continue to roll out of mental health support teams in schools.	Increase by 0.5 team	2024	BNSSG ICB (LW)
We will scope and review BNSSG transition services for young people who are transitioning from CAHMS to adult services and pilot a transition service.	Review of YP MH services completed. Pilot completed.	2025 2028	BNSSG ICB (LW)

Objective 2: Adults living in North Somerset receive the right support, in the right place at the right time.			
We will identify women who have suspected perinatal mental ill-health through screening and will ensure referral to perinatal mental health services for a comprehensive assessment and treatment plan	All women who meet criteria are referred for assessment and treatment	2025	Sirona CiC (PHN)
We will provide support for mothers with postnatal mental ill-health, including through peer support.	Peer support provision in place for mothers.	2024	NSC PH
We will pilot the North Somerset Together Virtual hub (front door for social prescribing) in 4 GP practices	Pilot completed and evaluated.	2025	North Somerset Citizen's Advice Bureau
We will conduct a detailed review of VCSE provision and provide recommendations for re-procurement of VCSE contracts (subject to approval)	Options appraisal completed	2024	BNSSG CMH Programme Team (VB)
We will reprocure our VCSE contracts according to best practice, to align with the BNSSG model of community mental health.	Contracts reprocured	2028	BNSSG CMH Programme Team (VB)

We will explore opportunities to improve co-ordination of, signposting to, and delivery of services to address the mental health impacts of the menopause.	Options appraisal completed	2026	NSC PHRS, CS.
We will develop and publish an Adult Carers Strategy for North Somerset	Adult Carers Strategy approved and published	2028	NSC AS Directorate (KB)
We will carry out a carers' health and wellbeing needs assessment and put a support plan in place for all unpaid carers including training if required	Completed carers health and wellbeing needs assessment	2024	NSC PH (RK) NSC Adults Services Directorate
Objective 3: Appropriate actions, services and evidence-based support will be available to people at risk of self-harm and/or suicide			
We will conduct a deep-dive data analysis to understand the characteristics of people admitted to hospital for self-harm and mental health conditions and to understand pathways through services.	Deep dive analysis completed	2024	NSC PH and BNSSG ICB (GM, NR)
We will use the deep dive to understand how best to target resources and provide the most effective support	Resources targeted according to need	2025	

We will develop a set of shared principles for addressing self-harm among children and young people for implementation by the services involved in providing support.	Shared principles agreed.	2025	NSC PH (HY) and partners
We will evaluate the impact of the Self-Injury A&E follow-up service for adults who self-harm and implement recommendations for future service development.	Self-Injury A&E follow up service is evaluated and further commissioned	2025	BNSSG ICB (KT)
We will review the Self-harm: assessment, management and preventing recurrence NICE guidance and ensure compliance locally across local providers	Publish a report and implement recommendations to ensure compliance to NICE guidance on self-harm	2024	AWP (NE)
We will implement the North Somerset Suicide Prevention Action Plan to reduce the incidence of suicides in North Somerset	Publication of North Somerset Suicide Prevention and Self harm action Plan Six monthly progress updates	2028	NSC PH (HY) with suicide prevention steering group
We will continue to promote and bereavement support services and groups for people bereaved by suicide.	Increasing numbers of people attending bereavement support groups and services.	2026	Pete's Dragons, Second Step, Survivors of bereavement by suicide

We will deliver the BNSSG HOPE project in North Somerset to address the disproportionately high numbers of men who lose their life to suicide	Explore ways to increase referrals, from services with low referral rates, to ensure higher NS numbers and also representation from men from equality groups	2028	Second Step
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9.3. Supported and Living Well: Providing targeted opportunities and support to enable people with mental ill-health and members of local communities to live well within their communities.

Ambition 1: Services and service developments are co-produced with people with lived experience of mental ill-health and members of local communities and build on data, intelligence, and engagement.			
Objective 1: Local residents and people from a range of population groups are engaged in creating community networks and co-producing mental health and wellbeing activities and interventions using a strengths-based approach.			
Action	Target	Year	Lead
We will explore opportunities for enhanced delivery of peer support for people with mental ill-health at different points in the life course.	Number of peer support projects in place <i>(subject to funding)</i>	2028	IMHN; NSC PH
We will ensure that people with lived experience and people from a range of population groups are involved in co-design and where possible co-producing new policies or strategies via input of the Independent Mental Health Network (IMHN) and members of the North Somerset population across the life course.	Inclusion of IMHN in all MH planning groups	2024	IMHN
Ambition 2: Physical health is improved among people with severe mental illness.			
Objective 1: The number and quality of physical health checks is improved for people with severe mental illness.			

<p>We will ensure that people with severe mental illness receive a complete annual health check screenings and appropriate follow up interventions.</p>	<p>Increased number of people with severe mental illness receiving a full annual physical health check.</p> <p>Increased number of people with severe mental illness receiving referrals into healthy lifestyle advice, cancer screening programmes and onward referral to primary or secondary care for monitoring or treatments</p>	<p>2026</p>	<p>BNSSG ICB</p>
<p>We will ensure that when Primary Care and Avon and Wiltshire Mental Health Partnership undertake health checks for SMI that they are joined up and follow up is undertaken in a timely manner.</p>	<p>TBC</p>	<p>2025</p>	<p>System partners</p>
<p>Ambition 3: Support and care provided takes a proportionate universalism approach that tackles inequalities, builds on strengths, and is responsive to risk and mental health need.</p>			
<p>Objective 1: Services are targeted proportionately to where, or among whom, need is greatest.</p>			
<p>We will continue to develop the eating disorders service</p>	<p>Continued development of eating disorder service</p>	<p>2028</p>	<p>BNSSG ICB (LW)</p>
<p>We will increase intensive outreach for young people in crisis through our urgent care and assessment (UCAT) team</p>	<p>Increase team by 3 practitioners</p>	<p>2023</p>	<p>OTR and AWP</p>

We will ensure that funding and service developments are responsive to clinical and demographic mental health need and build on the findings of the CYP and adults mental health needs assessments and other relevant data	All new community grants supported prioritised for funding in line with greatest need	2028	NSC PH and partners
We will ensure that new services and programmes funded complete and respond to Equality Impact Assessments	EQIA completed for all new services	2028	NSC PH & all partners
Objective 2: Mental health support is available for people with a dual diagnosis			
We will develop pathways to support adults with dual diagnosis via all mental health pathways	Establish a baseline for people with dual diagnosis being assessed by the Mental health nurse/ MH service	2024	North Somerset Drugs and Alcohol Partnership (NSC PHRS SH)
We will deliver improved access to mental health support for people using We Are With You services. This will be achieved partly through appointment of a mental health nurse.	Increased proportion of individuals referred to mental health nurse in the We Are With You Service for support or accepted by local mental health services	2025	North Somerset Drugs and Alcohol Partnership

			(NSC PHRS SH)
We will encourage collaboration between Substance Use and Mental Health services to build rapport and trust.	Increased trend in accepted referrals between substance use and MH services.	2024	North Somerset Drugs and Alcohol Partnership (NSC PHRS SH)
We will lead a shared benchmarking audit against NICE guidance to understand current practice.	Benchmarking audit 100% Completed by all relevant stakeholders and published for shared awareness	2024 & repeat 2026	North Somerset Drugs and Alcohol Partnership (NSC PHRS SH)
We will offer training to improve awareness of supporting people with dual diagnosis	100% attendees report increased confidence in supporting people with dual diagnosis	2025	North Somerset Drugs and Alcohol Partnership (NSC PHRS SH)

We will explore opportunities to identify and respond to mental ill-health among people with long-term conditions in primary care	Expansion of existing primary care reviews to incorporate mental health	2026	NSC PH (GM) and Woodspring LP (NW)
Objective 3: Holistic support is provided for people living with mental ill-health that incorporates consideration of the wider determinants of mental health such as financial pressures, employment and housing			
We will improve awareness of entitlement to Healthy Start and free school meals and uniforms via social media and other sources	% increase in residents that are eligible for support in receipt of benefits/ financial support	2024	NSC Children's Directorate, PH
We will assist with downloading Healthy Start vouchers as required.	Library staff will facilitate downloading of HS vouchers as required	2024	NSC Place Directorate (Libraries)
We will provide a range of training opportunities relevant to the needs of our client group as a first step into employment	Review the current levels of support and to identify further support in the local area	Ongoing	NSC Place JH/JG/DWP (VM)
We will provide a range of disability confident employers to assist people back into the workforce	Increase the number of disability employers to meet the needs of the customers with disabilities	Ongoing	DWP (VM)
We will launch the new Talking Therapies Employment Support Service in North Somerset	Number of people seen within North Somerset broken down by: <ul style="list-style-type: none"> • Remaining in work 	2023-2024	Vita Health

	<ul style="list-style-type: none"> • Returning to work • Finding work <p>Number and % of people achieving their agreed goals broken down by:</p> <ul style="list-style-type: none"> • Remaining in work • Returning to work • Finding work 		
We will continue to develop and implement the Mental Health & Wellbeing Integrated Teams (MINT) in our two locality partnerships to provide holistic, person-centred support in response to need	Continued delivery of IMHT in the two locality partnerships	2028	AWP and BNSSG ICB (Locality Partnerships)

10. Glossary

Abbreviation	Name
AWP	Avon and Wiltshire Mental Health Partnership
BNSSG	Bristol, North Somerset, and South Gloucestershire
CIC	Children in Care
Co-produced	The term 'co-production' describes working in partnership by sharing power between service users, carers and families, to ensure that our service accurately fits their expressed need
DfE	Department for Education
IAPT	Increased Access to Psychological Therapies (Talking Therapies)
IMHN	Integrated Mental Health Network, consisting of a diverse network of people with lived experience
ICS Integrated Care System	<p>Integrated Care System, comprising of the Integrated Care Board (ICB) and Integrated Care Partnership (ICP)</p> <p>BNSSG ICS was set up on 1 July 2022, along with another 42 across the country, to plan and deliver joined up health, council and voluntary sector services, for the people who live and work within the area. Within North Somerset our 2 Locality Partnerships.</p>
LP	Locality partnership work at a local level with their communities, to improve health and wellbeing. North Somerset's two locality Partnerships are Woodspring, and Weston, Worle and Villages
NSC	North Somerset Council
OTR	Off the Record: mental health support and information service
PH	Public Health
PHRS	Public Health and Regulatory Services

SMI	Severe Mental Illness. This term is used to describe anyone whose life is enduringly affected by mental ill health.
Sirona CIC PHN	Public Health Nurses employed by Sirona Care and Health a not-for-profit community interest company
SEND	Special Educational Needs and Disabilities
VANS	Voluntary Action North Somerset
VCSFE	Voluntary, community, faith and social enterprise (VCFSE). These organisations have formed an alliance/enterprise to facilitate joined up working to improve health and care outcomes.
WAWY	We are With You: an organisation providing free confidential support to anyone with drug, alcohol or mental health issues.
WHO	World Health Organization