

Meeting:	Health & wellbeing board
Meeting date:	26 November 2015
Title of report:	Health and wellbeing strategy – mental health update
Report by:	Programme manager, Herefordshire Clinical Commissioning Group

Classification

Open

Key decision

This is not an executive decision.

Wards Affected

Countywide

Purpose

To consider progress against mental health priorities within the health and wellbeing strategy.

Recommendation(s)

THAT:

- (a) The mental health plans, milestones and challenges identified within appendix 1 are reviewed to assess the degree to which they are achieving the mental health priorities within the health and wellbeing strategy; and**
- (b) The board identify any additional actions needed to secure improvement.**

Alternative options

- 1 The board is invited to consider whether any alternative or additional actions are necessary.

Reasons for recommendations

- 2 The board is responsible for reviewing whether the commissioning plans and

arrangements for the NHS, public health and social care are in line with and have given due regard to the health and wellbeing strategy.

Key considerations

- 3 The health and wellbeing strategy agreed by the board in June of this year identifies as a priority 'mental health and wellbeing and the development of resilience in children, young, people and adults'. The strategy also sets out the intention to commission and deliver:
 - public awareness campaigns on keeping well and using the Five Ways to Wellbeing;
 - large scale programmes on emotional health and wellbeing for children, parents and older people;
 - locality based social networks across Herefordshire that create greater community capacity and support across parish councils, pastoral support networks and the community;
 - a targeted programme for carers and parents during pregnancy and early years;
 - a school based programme on emotional health and wellbeing supported by the local school nursing service;
 - early identification of those people in greatest need or at risk of developing a mental health condition who are supported to build self-confidence and change behaviours;
 - a pathway approach across the life cycle for children's mental health covering prevention and treatment;
 - a workforce trained to support behaviour change based on motivation, identifying those people that are ready to and want to change;
 - new models of integrated care that include prevention and self-help provided more locally at a primary care level; and
 - high quality and accessible hospital care and treatment for those who need it most.
- 4 The joint strategic needs assessment approved in July 2015 identifies that emotional wellbeing and mental health of children is a concern. This is built upon the mental health needs assessment that identified more coordinated input was required to address mental health needs earlier.
- 5 The presentation (attached at appendix 1) identifies the plans, milestones and challenges associated with achievement of the priorities, and the board are invited to review these and identify areas for further focus or additional action.

Community impact

- 6 The health and wellbeing strategy identifies the key priorities for the county; by reviewing the plans for achieving these priorities the board can gain assurance that resources across the health and social care system are being directed in the most appropriate way.

Equality duty

- 7 People with mental health illnesses include people with protected characteristics. All actions in the delivery of the health and wellbeing strategy recognise vulnerable groups and seek to address their needs. For example, a full equalities impact assessment has been conducted as part of the children and young people delivery plan.

Financial implications

- 8 None arising directly from this report. If the board identifies additional actions; regard must be had to the financial implications of delivery.

Legal implications

- 9 This report concerns delivery of the health and wellbeing strategy. This is a requirement of the health and wellbeing board.

Risk management

- 10 Risks to delivery are identified in appendix 1.

Consultees

- 11 None. The consultation is at activity level and involves a wide range of stakeholders appropriate to that action, e.g. people with dementia are involved in the work of the Dementia Partnership.

Appendices

Appendix 1 - presentation.

Background papers

- None identified.