

Title of report: Update to the board on the Good Mental Wellbeing throughout lifetime Implementation Plan

Meeting: Health and Wellbeing Board

Meeting date: Monday 9 June 20255

Report by: Public Health Lead: Good Mental Health

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards)

Purpose

To provide an update on the progress of the implementation plan for the board's strategic priority of 'Good Mental Wellbeing (GMW) throughout Lifetime', attached as Appendix 1.

Recommendation(s)

That the board considers the report and appendices and notes the progress to date on the Good Mental Wellbeing (GMW) priority.

Alternative options

1. The board could choose not to adopt and acknowledge the challenges to date.

Key considerations

- 2. The report highlights the progress and challenges in the delivery of the GMW implementation.
- 3. Strategic leads from internal and partnership organisations are responsible for leading on specific areas in the plan and report quarterly to the Adult Better Mental Health partnership board on progress to date against action.

- 4. The Mental Health Needs Assessment (MHNA) epidemiological findings to date have been considered in the development of the GMW implementation plan. This includes findings from the community wellbeing survey and children and young people survey.
- 5. The outcomes dashboard (attached as Appendix 2) has been developed with the proposed outcome trajectories for the next few years. The majority of outcomes are taken from the Public Health outcomes framework, which allows for regional and national comparisons, using a RAG rating. However, there is time delay for some of this nationally reported data meaning it is not always current.
- 6. The most recent health profile data for Herefordshire shows a red RAG rating against the following indicator 'Hospital admissions as a result of self-harm (10-14 years)'. We are currently exploring this data in more detail with our partners.
- 7. Amber indicators (Herefordshire's performance is not significantly different from England) relate to our suicide rate, emergency admissions for self-harm and smoking prevalence in adults with long term mental health condition.
- 8. Green areas within the plan include premature mortality in adults with severe mental illness; proportion of clients entering drug treatment identified as having a mental health treatment need, who were receiving treatment for their mental health.
- 9. Completed actions include becoming a signatory for the prevention concordat for better mental health, development of the local suicide strategy and implementing a local suicide audit group.
- 10. Whilst the outcomes dashboard provides reliable and robust data, there are other measures and data sources to consider which provide more localised, regular and detailed community information, for example the community wellbeing survey and the children and young people survey.
- 11. After consulting with partners additional service data and local survey data is being explored and expected to be included to inform real-time information and provide more localised intelligence.
- 12. As we go into year two of the implementation plan, we are mindful of the need to review, revise and develop new actions to ensure we are effectively meeting our ambitions. We are bringing stakeholders together in early July to review our actions, identify new actions and agree ways of working to take forward the next iteration of the implementation plan covering 2025/27.
- 13. The mental health needs assessment will help shape the plan and the suicide prevention strategy commitments will also be supported through the action plan.

Community impact

14. The purpose of the GMW implementation plan is to specify the actions and activity that will improve the wellbeing of Herefordshire residents. One of the key principles upon which the Joint Local Health and Wellbeing Strategy (JLHWBS) was developed was that of involving our communities in any actions that are proposed which will be enhanced by the Herefordshire Together initiative. The plan will also support the ambitions of the Council plan.

Environmental impact

15. There are no general implications for the environment arising from this report; however the plan includes support to increase physical activity including through active travel which may have a positive environmental benefit.

Equality duty

- 16. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.
- 17. The principles of equality and the reversal of health inequalities are key strands of the plan. The MHNA provides an assessment of our system need, highlights priority groups and makes recommendations for action. In addition, our ongoing engagement with a wide range of partners will continue to support this. An Equality Impact Assessment was completed in December 2024.
- 18. To be effective in delivering good population outcomes and helping those most in need, the plan calls for intervention by working together at system, place, and community levels to tackle issues reflecting whole system priorities as well as specific concerns at the right scale.

Resource implications

19. There are no resource implications associated with this report. However, the resource implications of any recommendations made by the board will need to be considered by the responsible party in response to those recommendations or subsequent decisions.

Legal implications

- 20. In accordance with Health and Social Care Act 2012, Health and Wellbeing Boards are responsible for encouraging integrated working between health and social care commissioners, including partnership arrangements such as pooled budgets, lead commissioning and integrated provision.
- 21. The functions of the Health and Wellbeing Board are set out in paragraph 3.5.24 of the constitution.

Risk management

22. There are no risk implications identified emerging from the recommendations in this report. However, the delivery of these plans require system and collaborative working across all partners. Where possible, we have identified where activity is funded, but given the fiscal position across partners these will need to be kept under review.

Consultees

23. Consultation on action planning and setting targets undertaken with the Adult Better Mental Health Partnership Board and 1HP and action leads identified.

Appendices

Appendix 1 GMW Implementation Plan 2023-2025

Appendix 2 GMW Outcomes Dashboard

Appendix 3 Healthy Lifestyles group background information

Background papers

None identified.

Glossary of terms, abbreviations and acronyms used in this report

ABMHPB Adult Better Mental Health Partnership Board

GMW Good Mental Wellbeing

JLHWBS Joint Local Health and Wellbeing Strategy

1HP One Herefordshire Partnership

MHNA Mental Health Needs Assessment

RAG Red, Amber, Green