

Agenda item:

Title of meeting: Health and Wellbeing Board

Subject: Mental Health Alliance

Date of meeting: 25th February 2015

Report by: Dr Matt Smith

Wards affected: All

1. Requested by

2. Purpose

2.1 The purpose of this report is to update the Health and Wellbeing Board on the development and work of the Mental Health Alliance.

3. Mental Health Alliance

3.1 On the 5 June 2014, Dr Janet Maxwell, Director of Public Health Portsmouth, brought together and chaired an initial meeting of key stakeholders. At this meeting it was agreed that improving mental health was a key priority for the City and in order to take this agenda forwards it was necessary to establish a Mental Health Alliance for the City of Portsmouth.

3.2 The first meeting of the Mental Health Alliance was held on World Mental Health Day, 10 October 2014. This brought together all the major mental health stakeholders including service users. The purpose was to review current policy, need and identify the key priorities for the City over the coming year.

3.3 Five areas were subsequently identified and progress will be monitored by the Mental Health Alliance over the next year. These are to:

- Support schools in the early identification of mental health problems (links to Priority E in the Children's Trust Board);
- Support employers to help more people with mental health problems to remain in or move in to work (e.g. building on Mindful Employer);
- Improve the integration of mental health care and physical health care at every level (Parity of Esteem);
- Implement the Crisis Care Concordat;

- Improve the transition of care for people moving between Child and Adolescent Mental Health Services and Adult Mental Health Service.

3.4 The complexity of the mental health agenda was recognised. Good mental health does not simply depend on access to high quality services; many of the determinants of good mental health are influenced by cross-cutting issues such as education, employment and housing. It was also therefore agreed to develop an overarching mental health strategy for the City, building on the five areas already identified as immediate priorities. This would be taken forwards by a working group of the Alliance.

3.3 The opportunity was also taken at this meeting for stakeholders to sign up to the Crisis Care Concordat and delivering the commitments within it.

3.4 Terms of reference and governance for the meetings were agreed and the Alliance will meet biannually.

4 Mental Health Strategy

4.1 The Mental Health Strategy Group is a working group of the Mental Health Alliance. The initial meeting, on the 5th December 2014, was chaired by Dr Janet Maxwell and future meetings will be chaired by Dr Matt Smith.

4.2 At the meeting the broad scope of the strategy was agreed. It will take a community focused, life course approach and the key areas that it will cover are promotion and prevention, settings (e.g. schools, university and workplaces), services and recovery. It will be aligned to the key recommendations from national policy and strategy documents including the Chief Medical Officers Annual Report focusing on mental health¹, the WHO Mental Health Action Plan², the national strategy No Health, Without Mental Health³ and Closing the Gap⁴; it will also be informed by evidenced based guidance from the National Institute for Health and Care Excellence (NICE).

4.3 There are many sources of information available on the mental health of residents within Portsmouth. These sources will be reviewed and key metrics will be identified for inclusion within the final strategy. Groups with specific needs will also be considered e.g. veterans.

4.4 It was recognised that within the City there were already many services and initiatives that were contributing to maintaining and improving mental health for residents and patients. Given the financial challenges organisations are facing over the coming years the emphasis will not be on identifying the need for new services but how existing statutory services and third sector organisations can be better co-ordinated and shaped from a mental health perspective as part of the existing transformation programmes.

4.5 The mental health strategy development timeframe is outlined below:

Action	To be completed by:
Agree the structure of the mental health strategy	April 2015
Complete draft strategy	July 2015
Consultation and engagement	July - September 2015
Mental health strategy sign off by Mental Health Alliance	October 10 2015 (World Mental Health Day)

5 References

- 1.) Davies, S.C. "Annual Report of the Chief Medical Officer 2013: Public Mental Health Priorities: Investing in the Evidence" London: Department of Health (2014)
<https://www.gov.uk/government/publications/chief-medical-officer-cmo-annual-report-public-mental-health>
- 2.) Mental Health Action Plan 2013-2020. WHO (2013)
http://apps.who.int/iris/bitstream/10665/89966/1/9789241506021_eng.pdf
- 3.) No Health, Without Mental Health: a cross-government mental health outcomes strategy for people of all ages. Department of Health (2011)
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf
- 4.) Closing the Gap: Priorities for essential change in mental health. Department of Health (2014)
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281250/Closing_the_gap_V2_-_17_Feb_2014.pdf

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Signed by

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

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