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Durham County Council**

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Electoral division(s) affected:

Countywide

Purpose of the Report

- 1 This report provides an update on the development of the Mental Health Strategic Partnership (MHSP) Plan reflecting mental health prevention, provision including promotion across the mental health system for the wellbeing and resilience of the local population.
- 2 To provide an overview to Health and Wellbeing Board on the full MHSP new plan that has been agreed by the MHSP Board.

Executive summary

- 3 The MHSP Board Mental Health Strategy and Concordat (2018-21) document highlighted the ambition and commitment of the Strategic Board to work towards better mental health in County Durham according to the principles in the national Prevention Concordat for Better Mental Health.
- 4 MHSP adopt five strategic workstreams to progress mental health need into deliverables. These workstreams include:
 - Children and Young People
 - Suicide Prevention
 - Urgent Care
 - Dementia
 - Resilient Communities Group
- 5 The previous MHSP Board's Mental Health Strategy and Concordat (2018-21) ran up to 2020/21. It was agreed by the County Durham Health and Wellbeing Board in May 2021 to refresh the MHSP role and remit, including membership and Terms of Reference.

- 6 The previous system-wide Mental Health Outcome, Goals, Initiatives and Measure plan (OGIM) helped to inform the objectives for delivery which embrace priority workstreams for each one of the highlighted areas and was formally monitored over time using SMART objectives.
- 7 In September 2022, following a workshop, a further review of the five current mental health workstreams was undertaken and a new plan was developed and ratified by the MHSP in May 2023.
- 8 To accompany the new plan, a Mental Health, Wellbeing and Resilience Power BI report (Power BI) has been developed and published on Durham Insight to provide an overview of data relating to mental health, resilience, and wellbeing across the county.
- 9 The new plan focuses on the delivery of 15 priority areas, underpinned by a series of interventions. The priorities are taken from each one of the five mental health workstreams detailing national guidance and best practice. The plan reflects local need identified within the Joint Strategic Needs and Assets Assessment (JSNAA), and action designed to build on local assets and address gaps in delivery.
- 10 The MHSP recognises the importance of effective communications and the using the Voice of Lived Experience to help inform each workstream. Therefore, additional priorities have been added to ensure the Voice of Lived Experience and the opportunities for work to be co-produced are embedded into the planning and delivery of each of the five workstreams.
- 11 The priorities in the plan do not represent the totality of work being overseen by each workstreams, however, are a high-level overview of more detailed work programmes.

Recommendations

- 12 Health and Wellbeing Board is recommended to:
 - (a) Note the contents of the report;
 - (b) Consider the progress of the development of the MHSP Plan;
 - (c) Endorse the MHSP new Plan.

Background

- 13 The MHSP was initiated in 2018 and continues to provide the strategic framework for a response to mental health and emotional wellbeing across the county.
- 14 The membership of the MHSP Board for Durham County is currently drawn from statutory and non-statutory partners with backgrounds in health, social care, criminal justice, Voice of Lived Experience, and carers, providers, and housing.
- 15 Reporting to the Health and Wellbeing Board, the remit of the MHSP is to provide strategic co-ordination and leadership for the mental health agenda across County Durham and be accountable for the delivery of our Mental Health Plan. It is also responsible for the engagement, consultation and involvement of mental health service users and carers to support the work of the Health and Wellbeing Board.
- 16 The evidence base taken from The Prevention Concordat for Better Mental Health and other key policy documents, recommended the MHSP adopt five strategic workstreams to progress mental health need into deliverables. These workstreams are:
 - Children and Young People
 - Suicide Prevention
 - Crisis Care Concordat
 - Dementia
 - Resilient Communities Group
- 17 Whilst the MHSP met infrequently during the COVID-19 response due to ongoing demands, the five workstreams continued to deliver on agreed plans and in response to an increasing in demand for mental health support across the county.
- 18 The previous Mental Health Strategic Partnership (MHSP) Board's Mental Health Strategy and Concordat (2018-21) ran up to 2020/21.
- 19 Over the last two years, the Outcome, Goals, Innovation and Measure plan (OGIM's) has provided the structure to help developing a new shared vision for mental health and wellbeing across County Durham. The OGIM has helped to inform the Plan on the Page (Appendix 2).

Developments of the 2023-2028 MHSP plan

- 20 During September 2022, a MHSP Workshop was held in which partners considered the future of the MHSP and its effectiveness of promoting a system-wide approach to addressing mental health, resilience and wellbeing across County Durham.

- 21 The activity of the five current workstreams of the MHSP were reviewed. Each workstream lead provided reflections on the successes of the partnership arrangement and thoughts on where the workstream could be further developed.
- 22 Each workstream represented the many mental health system-wide interdependencies they engage with including health, social care services, early help and prevention services, suicide prevention, crisis care, education, carers, VCSE and wider work within local communities.
- 23 The feedback at the workshop highlighted the significant work that has been achieved over time including during Covid. The workshop enabled participants to consider deliverables and outcomes, helping inform future thinking on the configuration of the new partnership arrangements aligned to the new service developments, including Urgent Care (previously Crisis Care Concordat), MH Transformation and MH Alliance.
- 24 Partners at the MHSP Workshop were supportive of maintaining the OGIM as a base to help provide a sustainable overview to support the delivery of mental health approaches across the county.
- 25 It was agreed to develop a new plan aligned to the [Joint Local Health and Wellbeing Strategy 2023-28](#) which would embrace priority workstreams for each one of the highlighted areas and be formally monitored, over time, using SMART objectives.
- 26 Following from the MHSP workshop, each workstream lead was asked to consider their current plans and develop high level priorities for 2023-2028 for their area based on the following:
 - National policy and guidance
 - Top 3 priorities for the workstream
 - How do we know we have made a difference
 - Data sets that monitor priority outcomes
 - Local governance and accountability
- 27 In addition to the five workstreams, a communications plan was also developed to ensure the MHSP have a standardised approach on ways mental health, wellbeing and resilience is promoted across the county and maximise national and regional campaigns.
- 28 Following a review of all the high-level priorities at the MHSP Board, additional work was carried out to ensure identified gaps were strengthened, including the importance of the Voice of Lived Experience and Workforce development.

Mental Health, Wellbeing and Resilience Power BI report

- 29 To accompany the MHSP plan and the refresh of the JLHWS, a new JSNAA Mental Health and Wellbeing resource was developed and published on Durham Insight covering key areas including the latest available data and intelligence and some key messages arising from that intelligence, national and local context, key plans and strategies that are linked, with links to the latest available evidence (e.g. NICE guidance).
- 30 Work has been undertaken to map the identified data sets of each of the five priority workstream and have been embedded into the JSNAA report to monitor ongoing progress. It is expected that additional data will be manually updated by workstream leads using their own affiliated data sets over time. It is also acknowledged that there can be limitations on published data which is used to measure local outcomes, and this may take time to address within a reporting period.
- 31 The Mental Health, Resilience and Wellbeing JSNAA report and Landing Page on Durham Insight was approved at both the MHSP and PHSMT published on Durham Insight:

[Mental Health and Wellbeing JSNAA report](#)

The New 2023-2028 MHSP plan

- 32 The Joint Local Health and Wellbeing Strategy (2023-2028) has identified mental health as a key priority for action. The new MHSP Plan 2023-2028 has been developed to address the needs related to mental health, resilience and wellbeing across the county taking into consideration a Starting Well, Living Well and Ageing Well approach across the life course.
- 33 Collectively, the Plan focuses on the delivery of 15 priority areas, underpinned by a series of interventions. The priorities are derived from national guidance, best practice and are set against local need as determined by the JSLAA.
- 34 The MHSP recognises the importance of the Voice of Lived Experience and using opportunities for co-production, hence each workstream has an additional priority to ensure the Voice of Lived Experience and co-production is embedded in their planning and delivery.
- 35 It should be noted that the priorities in the Plan do not represent the totality of work being overseen by each workstreams, however are a high-level overview of more detailed work programmes e.g. Suicide Prevention Alliance Action Plan (2022-24)

- 36 The Plan is a live working document and will be updated and amended on a quarterly basis and shared at the MHSP board meetings.
- 37 The Plan on a Page on Appendix 2 gives an overview of the plan whilst the full plan is detailed in Appendix 3.

Conclusion

- 38 The MHSP has embarked on a process that has enabled the five workstreams affiliated with the partnership to be reviewed. This work has resulted in a refreshed MHSP plan, underpinned by a Mental Health Power BI to provide oversight on the data.
- 39 The MHSP Plan is a live document and will be monitored on a quarterly basis, with progress on the outcomes for each of the workstreams reported to the Health and Wellbeing Board.

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Appendix 1: Implications

Legal Implications

None.

Finance

None.

Consultation and Engagement

The consultation and engagement with local individuals, families and communities is a core principle for supporting any new system-wide developments, recommended by the County Durham Approach to Wellbeing. The use of co-production is fundamental to developing any new pathways, or services for mental health support and is encouraged throughout the work of the MHSP.

Equality and Diversity / Public Sector Equality Duty

Equality and Diversity are at the heart of our vision and core values. We understand the wider benefits of improving everyone's quality of life and recognise that inequality continues to affect different people and communities in different ways. We are committed to creating and sustaining a modern and supportive offer for mental health and wellbeing and tackling the inequalities, prejudice and discrimination affecting the diverse communities which we serve.

Climate Change

None.

Human Rights

None.

Crime and Disorder

None.

Staffing

None.

Accommodation

None.

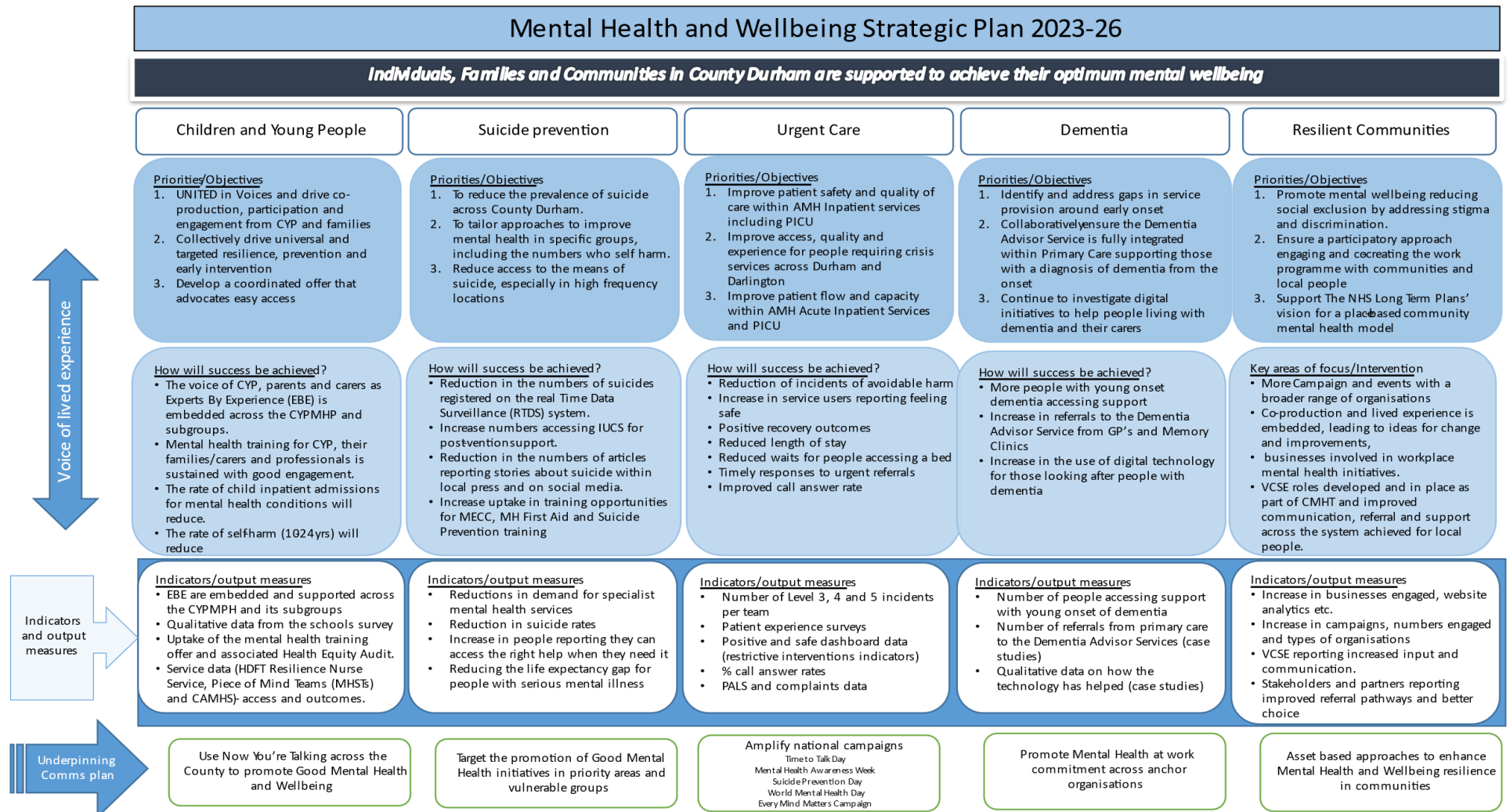
Risk

None.

Procurement

None.

Appendix 2: Mental Health Plan on a page



Appendix 3: Mental Health Strategic Partnership

Action Plan 2023 - 2028

County Durham Health and Wellbeing Board and County Durham Care Partnership are committed to improve the population's Mental Health and Wellbeing. The HWB Board has [four key priorities](#) which include Tobacco control, Alcohol harm reduction, healthy weight and mental health resilience and wellbeing. The Board aims to improve mental health and wellbeing evidenced by increased self-reported wellbeing scores and reduced suicide rates. [The Joint Local Health and Wellbeing Strategy 2023 – 2028](#) is the overarching health and wellbeing place-based plan for County Durham and sets out ways population mental health and wellbeing will be addressed and shaped locally as well as considering overlapping strategic plans and strategies. [The County Durham plan](#) sets out some of the detail delivery mechanisms for this and wider mental health/learning disability and autism priorities.

Partner agencies across County Durham are signatories of the national Prevention Concordat for Better Mental Health becoming part of a community of practice committed to taking evidence based preventive and promotional action to support the mental health of the whole population, those at greater risk of poor mental health, and those receiving treatment. Strengthening protective factors and reducing risk factors sit at the heart of our commitment to promoting good mental health and wellbeing.

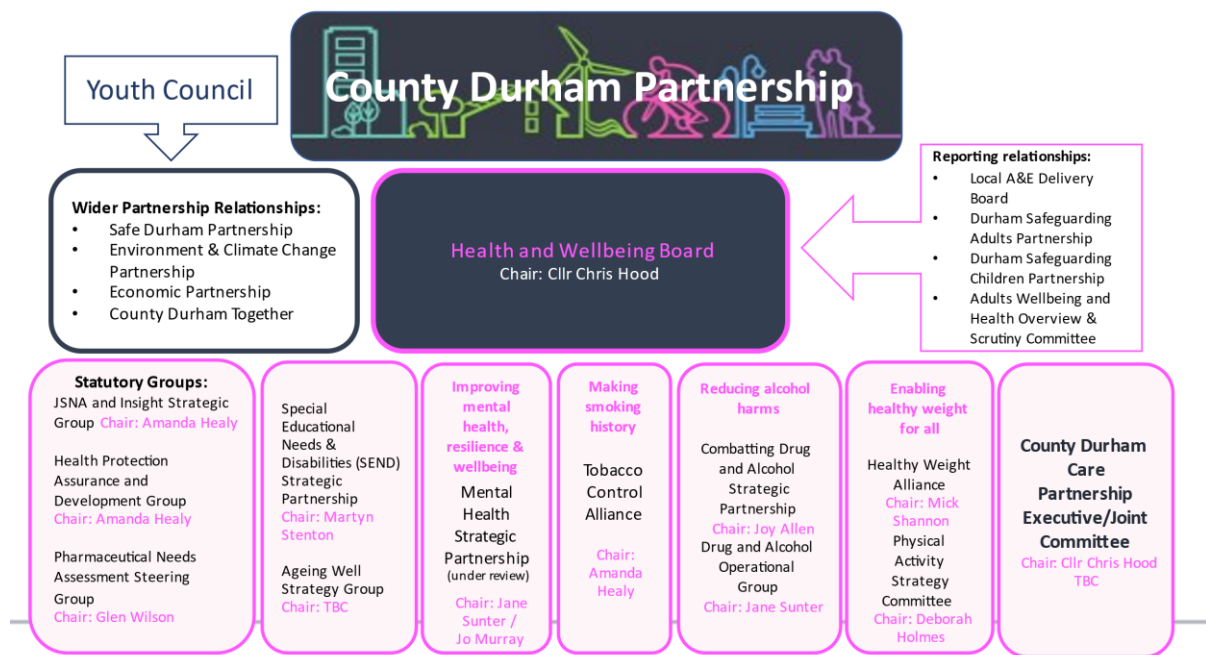
The County Durham Mental Health Strategic Partnership Board (MHSPB) is established to work together according to the principles in the national Prevention Concordat for Better Mental Health. The membership of the MHSPB for Durham County is drawn from statutory and non-statutory partners with backgrounds in health, social care, criminal justice, user and carer, provider and social housing. Reporting to the Health and Wellbeing Board, its remit is to provide strategic co-ordination and leadership for the mental health agenda across County Durham and be accountable for the delivery of our MHSPB action plan. It is also responsible for the engagement, consultation and involvement of mental health service users and carers to support the work of the Health and Wellbeing Board.

The MHSP currently oversees five workstreams:

1. Children and young people (Lead, Julia Bates, Consultant in Public Health, Durham County Council)
2. Suicide Prevention (Lead, Jane Sunter, Public Health Strategic Manager Durham County Council)
3. Urgent Care (Lead, Tom Hurst, Service Manager, TEWV)
4. Dementia (Lead, Sarah Douglas/Lucile Blight, Commissioning, Durham County Council)
5. Resilient Communities (Chair, Carol Gaskarth, Chief Executive, Pioneering Care Centre)

The MHSPB Action Plan has been developed with partners to focus on the key areas from the five workstreams. Collectively, the workstreams are focused on the delivery of 15 priority areas, underpinned by a series of interventions. These 15 priorities, are derived from national guidance and best practice set against local need as determined from the JSNA and national policy and guidance. However, it should be noted that these priorities do not represent the totality of work being overseen by the workstreams, but rather are a subset of more detailed work programmes.

Governance



County Durham Partnership structure as of December 2023

Mental Health Strategic Partnership Action Plan 2023/26

Children and Young People				
Workstream Lead: Julia Bates				
Local Plan Reference:				
National Policy and Guidance	3 key priorities	How do we know we have made a difference	Data sets	Local Governance and Accountability
<p>The NHS Long Term Plan 2022</p> <p>(Perinatal Mental Health; Mental Health Support Teams; Eating Disorders Services)</p> <p>Mental Health of Children and Young People in England 2022 - wave 3 follow up to the 2017 survey. (NHS Digital 2022)</p>	<p>The CYPMHP will be UNITED in Voices and drive co-production, participation and engagement from children and young people and families across all aspects of mental health & emotional wellbeing, including those with lived experience of mild to moderate mental health and emotional wellbeing issues, and those who have reached crisis.</p>	<p>The voice of children of children and young people and parents and carers as Experts By Experience (EBE) is embedded across the CYPMHP and subgroups.</p> <p>This enables the partnership to work on delivery through the approach to wellbeing and in particular to co-produce work to support children and young people's mental health</p>	<p>Qualitative data which identified that EBE are embedded and supported across the CYPMPH and its subgroups</p>	<p>CYPMHP</p> <p>CYP&F Partnership Board (County Durham Care Partnership)</p> <p>Mental Health Strategic Partnership (Health and Wellbeing Board)</p>

<p>Government Response to the Consultation on Transforming Children and Young People's Mental Health Provision: a Green Paper and Next Steps (DHSC & DfE 2018)</p> <p>Future in mind Promoting, protecting and improving our children and young people's mental health and wellbeing (DH & NHS England, 2015)</p>	<p>Aim 2 - Work together to develop capacity across whole communities so that people have better skills, ability and confidence in recognising and dealing with children and young people's mental health issues and promoting wellbeing. We will consider the whole family context and the environments that surround them; with a focus on promoting positive wellbeing and building an individual's networks and abilities through childhood and helping to minimise mental illness later in life.</p>	<p>Children and young people will thrive, they will have good emotional wellbeing and mental wellbeing and mental health needs will be identified and supported.</p> <p>The mental health training which supports children and young people, their families/carers and professionals to enable children and young people to recognise, talk about mental health and wellbeing is sustained and secures good engagement.</p>	<p>Qualitative data from the schools survey.</p> <p>Qualitative data describing the uptake of the mental health training offer and associated Health Equity Audit.</p>	
<p>THRIVE Framework for System Change, 2019)</p>	<p>Work together to develop a coordinated and comprehensive mental health and emotional wellbeing offer to support children, young people and families that is easy</p>	<p>Children and young people with mental health needs will have their needs identified and will be able to access the support and services they need.</p>	<p>Service data (HDFT Resilience Nurse Service, Piece of Mind Teams (MHSTs) and CAMHS) - access and outcomes.</p>	

<p>THRIVE model (Anna Freud Centre, 2015)</p>	<p>to access. This starts from universal prevention/early intervention moving through to providing effective support and treatment based upon the THRIVE model.</p>			
	<p>Work together to drive universal and targeted resilience, prevention and early intervention across County Durham, starting from the Early Years and across the transition to adulthood</p>	<p>The rate of child inpatient admissions for mental health conditions will reduce.</p> <p>The rate of self-harm (10-24yrs) will reduce</p>	<p>OHID Child Health Profile</p> <p>OHID Child Health Profile</p>	
	<p>Ensure the voice of lived experience is embedded in the planning and delivery</p>	<p>The voice of lived experience has been considered</p>	<p>Survey and consultation results</p>	

Suicide Prevention				
Workstream Lead: Jane Sunter				
Local Plan Reference: Suicide Prevention				
National Policy and Guidance	3 key priorities	How do we know we have made a difference	Data sets	Local Governance and Accountability
Local suicide prevention planning: A practice resource (PHE) October 2016	To reduce the prevalence of suicide across County Durham.	Reduction in the numbers of suicides in County Durham registered on the real Time Data Surveillance (RTDS) system.	Reductions in demand for specialist mental health services (requires development with TEWV for County Durham footprint)	Suicide Prevention Alliance.
Guidance for developing a local suicide prevention action plan (2014) PHE	To tailor approaches to improve mental health in specific groups, including the numbers who self harm.	Increase numbers accessing IUCS for post-vention support.	Reduction in suicide rates (measurable annually via Fingertips. We're able to drill in to sub county level over a pooled time period via HES data) Current data from DCC PHI shows that we are below the rate of 2022 with November and December to complete the year but have a higher rate than in 2021. Last year saw 72 suspected suicides across County Durham,	Health and Wellbeing Board.
Support after a suicide: A guide to providing local services (PHE) October 2016				Safe Durham Partnership
Identifying and responding to suicide clusters and contagion: A practice resources (PHE) September 2015				

<p>Preventing suicides in public places A practice resource (PHE) November 2015</p> <p>Help is at Hand (DH) 2012 edition</p>			<p>as of the 15th Nov 2023, there has been 56.</p> <p>Update SPA Action Plan to align with the new Suicide Prevention Strategy. To include autism, pregnancy and online harms.</p>	
<p>Information sharing and suicide prevention (DH) January 2014</p> <p>Samaritan's Media guidelines</p> <p>Samaritan's crisis signs guidelines</p> <p><u>Suicide Prevention Strategy 2023</u> released in September. Five year plan, alongside 10 million funding for grassroots to deliver suicide prevention. This funding is decided by DHSC and is due to be decided December 2023.</p> <p>Addition of online safety harms and 'suicide is everyone's business'. Is an update from 2012 and includes over 100 actions to prevent SH and suicide.</p>	<p>Reduce access to the means of suicide, especially in high frequency locations.</p>	<p>Reduction in the numbers of articles reporting stories about suicide within local press and on social media.</p> <p>Increase uptake in training opportunities for MECC, MH First Aid and Suicide Prevention training</p>	<p>Increase in people reporting they can access the right help when they need it (TBC from qualitative means)</p> <p>Reducing the life expectancy gap for people with serious mental illness (TBC by PHI)</p> <p>Ongoing work at Newton Cap and Chester-le Street Railway station</p> <p>Report of 'Where else is like this?' developed which includes a risk assessment of <i>high-risk</i> locations.</p>	
	<p>Ensure the voice of lived experience is embedded in the planning and delivery</p>	<p>The voice of lived experience has been considered</p>	<p>Survey and consultation results</p>	

Mental Health Urgent Care Services

Workstream Lead: Tom Hurst

Local Plan Reference:

National Policy and Guidance	3 key priorities	How do we know we have made a difference	Data sets	Local Governance and Accountability
NHS Long Term Plan for Mental Health - 111 access ambition	1. Improve patient safety and quality of care within AMH Inpatient services including PICU	<ul style="list-style-type: none"> ➤ Reduction of incidents of avoidable harm ➤ Increase in service users reporting feeling safe 	Number of Level 3, 4 and 5 incidents per team Patient experience surveys	Internal governance and assurance groups including programme boards and project groups
NHS Patient Safety Strategy - Mental Health Safety Improvement Programme QNRHTT Standards		<ul style="list-style-type: none"> ➤ Improved patient experience ➤ Reduction in restrictive interventions ➤ Reduction in complaints ➤ Positive recovery outcomes 	PROMS Positive and safe dashboard data (restrictive interventions indicators) PALS and complaints data	Regional quality transformation programme for inpatient services

<p>100 Day Challenge for Inpatient Services</p> <p>RCPsych CCQI standards for inpatient MH services</p> <p>Mental Health, Learning Disability and Autism Inpatient Quality Transformation Programme (NHSEI)</p>	<p>Improve access, quality and experience for people requiring urgent mental health support across Durham and Darlington</p>	<ul style="list-style-type: none"> ➤ Reduction of incidents of avoidable harm ➤ Improved patient experience ➤ Timely responses to urgent referrals ➤ Improved call answer rate ➤ Compliance with NHSEI 111 ambitions for call answer rate and triage ➤ Positive recovery outcomes ➤ Reduction in complaints 	<p>% call answer rates</p> <p>NHS 111 metrics (to be finalised)</p> <p>Bed occupancy %</p> <p>Length of stay data</p>	<p>ICB partnership groups and LAEDB's</p>
	<p>Improve patient flow and capacity within AMH Acute Inpatient Services and PICU</p>	<ul style="list-style-type: none"> ➤ Reduced occupancy across inpatient areas 	<p>% clinically ready for discharge</p>	
		<ul style="list-style-type: none"> ➤ Reduced waits for people accessing a bed ➤ Eliminate out of area admissions ➤ Reduced length of stay ➤ Reduction in people clinically ready for discharge on wards 	<p>IS bed use/OAP</p>	

	Ensure the voice of lived experience is embedded in the planning and delivery	The voice of lived experience has been considered to coproduce programmes of work	Survey and consultation results	
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Dementia				
Workstream Lead: Sarah Douglas/Lucile Blight				
Local Plan Reference: Dementia				
National Policy and Guidance	3 key priorities	How do we know we have made a difference	Data sets	Local Governance and Accountability
<p>Prime Ministers Challenge on Dementia 2020</p> <p>Living Well with Dementia: A National Dementia Strategy 2009</p>	Identify and address gaps in service provision around early onset dementia	More people with young onset dementia accessing support	Qualitative/quantitative data on the number of people accessing support with young onset dementia accessing support (TBC) 20 people under the age of 65 have accessed the Dementia Adviser Service between April – Nov 23. Expecting increase with the introduction of the new Young Onset DA role.	<p>Dementia Strategy Implementation Group</p> <p>Mental Health Partnership Board</p> <p>Health and Wellbeing Board</p>

	<p>Work in partnership to ensure the Dementia Advisor Service is fully integrated within Primary Care ensuring those with a diagnosis of dementia are supported from the onset</p>	<p>Increase in referrals to the Dementia Advisor Service from GP's and Memory Clinics</p>	<p>Qualitative/quantitative data on the number of referrals from primary care to the Dementia Advisor Services (case studies) There have been 57 referrals from Primary Care between April – Nov 2023. This is an increase on previous years and primarily from SPLW and Care Coordinators. The DAS are currently piloting a clinic style appointment system with one GP surgery and will evaluate the effectiveness this at the end of the year.</p>	
	<p>Continue to investigate digital initiatives that could help people living with dementia and their carers</p>	<p>Increase in the use of digital technology for those looking after people with dementia</p>	<p>Qualitative data on how the technology has helped (case studies shared) DAs regularly signpost to Care Connect and the Equipment Advice Service as well as discussion various technological support items. Alzheimer's Society also provides the</p>	

			<p>Dementia Support Forum- an online peer support site.</p> <p>The Dementia Strategy Implementation Group last meeting had a Technology based meeting looking at various methods that were available.</p>	
	<p>Ensure the voice of lived experience is embedded in the planning and delivery</p>	<p>The voice of lived experience has been considered to coproduce programmes of work</p>	<p>Survey and consultation results</p> <p>Alzheimer's Society have recently (Nov 23) started a young onset Dementia Voice group. The group will help to look at what peer support for younger people with dementia might look like in the County. This is a longer-term piece of work. The DAs have also supported people to take part in the Dementia HNA.</p>	

Resilient Communities

Workstream Lead: Carol Gaskarth

Local Plan Reference:

National Policy and Guidance	3 key priorities	How do we know we have made a Difference	Data sets	Local Governance and Accountability
<ul style="list-style-type: none"> The NHS Long Term Plan (2019) NHS Mental Health Implementation Plan 2019/20 – 2023/24 Five Year Forward View for Mental Health Prevention Green Paper: Advancing our health: prevention in the 2020s. 	<p>The promotion of mental wellbeing in adults whilst reducing social exclusion by addressing stigma and discrimination.</p>	<p>Increase in numbers of campaign and events with a broader range of organisations in the County engaging.</p>	<p>Increase in campaigns, numbers engaged and types of organisations.</p> <p>Records of meetings, suggestions, ideas and implementation.</p>	<p>Mental Health Strategic Partnership</p> <p>Community Mental Health</p> <p>Transformation Steering Group</p> <p>Health and Wellbeing Board</p>
	<p>To ensure a participatory approach through engaging and co-creating the work programme with communities and local people.</p>	<p>Establishment of a shadow RCG or similar to ensure co-production and lived experience is embedded, leading to ideas for change and improvements,</p>	<p>Project plans, service user feedback, evaluation reports.</p> <p>Increase in businesses engaged,</p>	

			website analytics etc.	
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<ul style="list-style-type: none"> Prevention Concordat for Better Mental Health (Office for Health Improvement and Disparities, updated Feb 2023) NHS England and the Department of Health published Future in Mind in 2015 <p>No Health Without Mental Health: a cross-government outcomes strategy (2011)</p>	<p>To support The NHS Long Term Plans' vision for a place-based community mental health model offering whole-person, whole-population health approaches, through</p> <ul style="list-style-type: none"> - Using research, evidence and best practice to test and learn different approaches; - Engaging with workforce and business leads to 	<p>Approaches developed, tested and evaluated.</p> <p>More businesses involved in workplace mental health initiatives.</p> <p>VCSE roles developed and in place as part of CMHT and improved communication, referral and support across the system achieved for local</p>	<p>Increase in people reporting improved support and choice with help provided when they need it</p> <p>VCSE reporting increased input and communication.</p> <p>Stakeholders and partners reporting improved referral pathways and better choice.</p>	
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	<p>improve access to information and support; and</p> <ul style="list-style-type: none"> - Leading on community/VCSE engagement within community mental health transformation (CMHT) hubs as part of the transformation agenda. 	people		
	Continue to investigate digital initiatives that could help people living with dementia and their carers	Increase in the use of digital technology for those looking after people with dementia	Qualitative data on how the technology has helped (case studies)	
	Ensure the voice of lived experience is embedded in the planning and delivery	The voice of lived experience has been considered to coproduce programmes of work	Survey and consultation results	

Comms plan				
Workstream Lead: Yusuf Meah/Fiona Mawson				
Local Plan Reference: MHSP Comms plan				
National Policy and Guidance	3 key priorities	How do we know we have made a difference	Data sets	Local Governance and Accountability
<p>Health Equity in England: The Marmot Review 10 Years On - The Health Foundation</p> <p>Wellbeing and mental health: Applying All Our Health - GOV.UK</p> <p>Mental health promotion and mental illness prevention: the economic case - GOV.UK</p>	To use Now You're Talking across the County to Promote Good Mental Health	<p>Collaborative approach to implement campaign between DCC and five workstreams</p> <p>DCC to establish toolkit and style guide for NYT and shared with CMHT and MHSP</p> <p>CMHT mobilisation to use NYT across all</p>	<p>Reduction in number of people accessing primary and secondary care.</p> <p>5 workstreams embed NYT in their approach</p> <p>All websites have promotion of Good Mental Health and use NYT</p>	<p>NYT to become the MHSP campaign to promote Good Mental Health across the County (start in Oct 2023)</p> <p>Health and wellbeing Board.</p>
<p>Prevention Concordat for Better Mental Health</p> <p>No health without mental health: GOV.UK</p>		<p>areas by lift and shift of toolkit</p> <p>Partners website to be updated and embedded with NYT campaign</p>		<p>Evaluation of the collaborative approach in December 2023</p>

<p>Social marketing for health and specialised health promotion - Stronger together – weaker apart: RSPH</p>		<p>Targeted approach via the PCNs</p>		
<p>Promoting mental health: concepts, emerging evidence, practice. WHO</p>	<p>Target the promotion of Good Mental Health in priority areas and vulnerable groups</p>	<p>NYT campaign to be widely promoted across areas and made visible within the community venues (Using the MHA) and other assets</p>	<p>Increase the number of adults and older adults who are accessing transformed models of mental health care</p>	
		<p>Wellbeing for Life Service visibility in VCS venues, Sport centres and Job Centres</p> <p>Promotion of anti stigma ambassadors via Stamp It Out</p> <p>Promotion of positive mental health and</p>	<p>Reduction in Mental Health rates (measurable annually via Fingertips. We able to drill in to sub county level over a pooled time period via HES data)</p>	
		<p>wellbeing amongst elected members and stakeholders</p> <p>Cascade Rainbow resources regularly to networks and</p>	<p>Increase in people reporting they can access self help when they need it (TBC from qualitative means)</p>	

		partnerships	<p>Number of hits on Mental Health Alliance website for self help and referrals</p> <p>Increase in life satisfaction, feeling that the things done in life are worthwhile, happiness and anxiety (ONS)</p> <p>Number of engagements delivered and uptake</p> <p>De-escalation of suicide concern amongst elected members and stakeholders</p>	
			Strong partnerships to promote Good Mental Health	
	Participate in national campaigns <ul style="list-style-type: none"> • Time to Talk Day • Mental Health Awareness Week 	Using national and local campaigns	Increased awareness of self help	

	<ul style="list-style-type: none"> • Suicide Prevention Day • World Mental Health Day • Every Mind Matters Campaign 	<p>resources to promote campaigns across the County</p> <p>Augment national campaigns locally through the MHSP</p> <p>Collaborate with VCS sectors and anchor organisations</p> <p>Community events for Time to Talk day and World Mental Health Day</p>	<p>Increase in access to Mental Health Alliance for low level support</p> <hr/> <p>Acknowledgement Durham is engaged with national campaigns</p>	
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Workforce Development				
Workstream Lead: Fay Stelling/Marnie Ramsey				
Local Plan Reference: MHSP Comms plan				
National Policy and Guidance	3 key priorities	How do we know we have made a difference	Data sets	Local Governance and Accountability
Public Mental Health Leadership and Workforce Development Framework Action plan for mental health promotion and the Mental Health Workforce Plan	Training offer available to compliments different workforce	Directory available through Wellbeing for Life and wider partners	Uptake of training via different workforce	Review of existing training offer and production of new training resource Link to County's Workplace Health offer
	Volunteering opportunities promoted	Volunteering advocated across different sectors		
	Maximising workforce skills to enhance wellbeing and resilience	Support of the national mental health at work commitment	Sign ups from national Mind.	Promotion and update monitored by Stamp it Out