

# Bolton Council

<b>Report to:</b>	Executive Cabinet Member - Wellbeing			<b>Consultation with other officers</b> Finance No Legal No HR No Equality Impact Assessment required? (a) Pre-consultation reports Is there a need to consult on the		
<b>Date of meeting:</b>	7 <sup>th</sup> September 2020					
<b>Report of:</b>	Director of Public Health	<b>Report number:</b>	PH169			
<b>Contact officer:</b>	Shirley Goodhew Consultant in Public Health	<b>Telephone number</b>				
<b>Report title:</b>	Population Mental Wellbeing programme update					
<b>Not confidential</b>						
This report does not contain information which warrants its consideration in the absence of the press or members of the public.						
<b>Purpose:</b>	The purpose of this paper is to provide an update on the evidence based projects which will be commissioned within the mental wellbeing programme.					
<b>Recommendations:</b>	The Executive Cabinet Member is recommended to: (i) Note the progress updates outlined in the report.					
<b>Decision:</b>	Non					
<b>Background documents:</b>	Proposal to commission a population mental wellbeing programme – 9 <sup>th</sup> March 2020 Approved (attached)					
<b>Signed:</b>	Leader/Executive Cabinet Member		Monitoring Officer			
<b>Date:</b>						

proposals?  <b>(b) P o s t c o n s u l t a t i o n r e p o r t s</b>  Please confirm that the consultation response has been taken into consideration in making the recommendations.			
<b>Visi on out co mes</b>  Plea se iden tify the appr opri ate Visi	1. Star t Well		X
	2.Li ve Well		X
	3.A ge Well		X
	4.Pr osp erou s		X

on outc ome (s) that this repo rt relat es or cont ribut es to by putti ng a cros s in the rele vant box.	5. Cle an and Gre en	X
	6.St rong and Disti ncti ve	X
1. St art W ell	Our children get the best possible start in life, so that they have every chance to succeed and be happy.	
2. Li ve W ell	The health and wellbeing of our residents is improved, so that they can live healthy, fulfilling lives for longer.	
3.	Older	

A ge W ell	people in Bolton stay healthier for longer and feel more connecte d with their communiti es.
4. Pr os pe ro us	Business es and investmen t are attracted to the borough, matching our workforce' s skills with modern opportunit ies and employm ent.
5. Cl ea n an d Gr ee n	Our environm ent is protected and improved so that more people enjoy it, care for it and are active in it.
6. St ro ng an d Di sti nc	Stronger, cohesive, more confident communiti es in which people feel safe,

tiv e	welcome and connecte d.
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## 1. INTRODUCTION & BACKGROUND

- 1.1. The vision for public mental health is that everyone, irrespective of where they live, has good mental health and wellbeing, especially communities facing the greatest adversity and barriers. This includes those living with and recovering from mental illness. Living a happy life shows a positive association with survival, averaging an additional nine years later in life<sup>1</sup>.
- 1.2. Our ambition is to work collaboratively to embed mental health and wellbeing across the system, and to achieve measurable improvements.
- 1.3. In March 2020, a proposal to commission a population mental wellbeing programme was approved by the Executive Cabinet Member. The purpose of this paper is to outline the key projects which will now be implemented this year as part of the three-year population mental wellbeing programme, in line with the approved approach outlined in the original report (9<sup>th</sup> March).
- 1.4. The key goals of the mental wellbeing programme include:
- Promote good mental health across the population
  - Across the life course to strengthen protective factors and reduce risk factors
  - Prevent mental illness and suicides
  - Early identification and referral, to improve the quality and length of life for those living with a mental illness
- 1.5. It is important to highlight that the Covid-19 pandemic has caused direct and indirect widespread psychological and social effects which could adversely impact on the mental health and wellbeing of our residents and workforce now and in the future.<sup>2</sup>
- 1.6. In addition, the pandemic has exacerbated health inequalities within socially and extremely vulnerable population groups, such as BAME communities, the homeless and low paid casual workers. During these challenging times, research suggests a rise in symptoms of anxiety and responses to stress, and a risk that the numbers of people with anxiety, depression and those engaging in harmful behaviors (such as suicide and self-harm) will increase.<sup>3</sup>
- 1.7. Whilst this programme start has been delayed as a result of the pandemic, it is now vital that this important work is now mobilised as a priority, as they are needed now more than ever. A selection of evidence based interventions have been identified to mitigate the adverse psychological and social impacts of lockdown, and to improve the mental health and wellbeing of all our residents.

### **National, Greater Manchester and Bolton Context**

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<sup>1</sup> Marmot Review, Fair Society Healthy Lives, 2010.

<sup>2</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7159850/pdf/main.pdf>

<sup>3</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7159850/pdf/main.pdf>

- 1.8. Every year, one in six adults experiences a common mental health problem. Mental ill health is the largest single burden of disease in the UK, with mental health accounting for almost half of days off sick and 50% of people on disability benefit. Mental health problems are unevenly distributed across society with disproportionate impacts on people living in poverty, those who are unemployed and identified population groups including sexual and gender minority groups and ethnic minorities in the community. Half of all mental health problems have been established by the age of 14, rising to 75% by age 24.
- 1.9. The life expectancy of someone with a serious mental health problem is 15 to 20 years less than the general population. In addition, people with long term physical illnesses suffer more complications if they also develop mental health problems, increasing the cost of care by an average of 45 per cent.
- 1.10. In Bolton an estimated 42,000 (around 15%) of residents aged 16 and over have a common mental health disorder, with an estimated prevalence of 9.8% for children aged 5 to 16 years. Bolton has seen some positive improvements in wellbeing measures at a locality level<sup>4</sup>, but has over 37% of respondents reporting medium or high anxiety, ranking four out of ten in Greater Manchester. Bolton also has the highest proportion of respondents with low feelings of happiness (10%) in Greater Manchester.
- 1.11. Bolton has a higher proportion of patients with severe mental illness than England. Although this is lower than the regional average the rate has been rising at a faster rate than that seen nationally. Bolton ranks relatively poorly for the percentage of adult social care users who have as much social contact as they would like.
- 1.12. Bolton's suicide rate is currently 11.7 per 100,000 persons, with 87 deaths recorded as suicide in the period 2016-18. This rate is similar to national and regional rates, reflecting a similar increase in the latest reported data, though overall the trend remains one of gradual decline. Risk factors for suicide are complex and varied but evidence suggests that the majority of deaths by suicide are preventable through actions to reduce known risk factors and adopt a preventative approach<sup>5</sup>.

## 2. **PROPOSED PROJECTS**

- 2.1. The aim is to commission and deliver evidence based projects that improve emotional wellbeing, builds social capital, promotes individual and community resilience and reduces stigma associated with mental health.

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<sup>4</sup> Office for National Statistics, 'Personal well-being in the UK', annual survey, October 2019.

<sup>5</sup> Local suicide prevention planning: a practice resource. PHE 2016.

- 2.2. Good practice suggests that localities should facilitate or commission a range of co-produced interventions that enhance emotional wellbeing, social capital, promote individual and community resilience and reduce stigma.
- 2.3. The development of the programme includes a collaborative approach with key partners across the system including Bolton's Mental Health People's Network ensuring a co-designed approach with residents and professionals. Key projects identified as part of this three year programme include:
- 2.4. **Shared leadership**– A citizens and professional leadership group will be established to develop a governance framework which enables effective leadership and direction embedding mental health and wellbeing into Bolton's Vision across the system. This group will play a key role in the design, delivery and evaluation of the overall programme including individual projects. Multiple inter-related factors such as employment, housing, adverse childhood experiences, stigma, access to services, substance misuse, the environment, living and working conditions all influence mental health. The social determinants of health are complex, so it is vital to work in equal partnership with residents to gain a shared understanding of the influences so these issues and barriers can be addressed.
- 2.5. **Community engagement** - Mental health and wellbeing are recognised as being extremely important to personal growth, development, empowerment, learning and resilience across the life course. Community engagement activities will ensure commissioning and delivery of local wellbeing initiatives to be more effective, as these initiatives will be built on the expressed needs and assets of local people and what effects their lives. Mental wellbeing is enhanced by having a sense of purpose, being involved in decisions that affect you, a sense of belonging, and being able to make a positive contribution to your local community.
- 2.6. **Mental wellbeing survey** - Greater Manchester Health and Social Care Partnership plan to undertake a digital mental wellbeing survey across GM, insights from this survey will provide a good basis to identify key themes and gaps to further commission focused community engagement pertinent to the people of Bolton. To also note the GM digital survey will not reach those that do not have access to digital means, therefore this project will explore other methods of engagement such as focus groups/interviews ensuring adequate representation of Bolton's population. As evidence suggests groups such as children and young people, Black and Minority Ethnic (BAME) communities, older adults, low paid workers, carers, those living with long term conditions are more at risk of poor mental health and wellbeing, these groups will be prioritised when designing this work, which alongside local intelligence and data sets.
- 2.7. **Mental wellbeing capacity building (ie. training)** – The overall aim is to ensure individuals or care givers have the good knowledge, skills and confidence to look after themselves as well as support others, in both a personal and professional capacity. A comprehensive tiered training ladder of



training options has been developed to inform decision making on the training packages required to meet the local need and context.

- 2.8. This programme will initially take up the GM Connect5 offer and train up individuals across the health and social care system as fully accredited Connect5 Community Trainers. This will provide a sustainable approach to delivering this training to the wider workforce and communities. Aims include increased understanding of mental health, reduced stigma, increased confidence in opening positive conversations about mental health, well-being, or suicide.
- 2.9. Alongside the development of Connect5, this project will look to pump prime investment in direct delivery of Applied Suicide Intervention Skills Training (ASIST) to build capacity and skills among organisations, staff and volunteers who provide support to a range of individuals from high risk groups.
- 2.10. **Five ways to wellbeing community grant scheme** – The aim of this project is to empower greater community ownership and investment in developing local solutions to improving mental health and wellbeing. The findings from the community engagement activities will provide valuable insights to inform the criteria for the grants scheme based on the needs and assets of local communities and strengthen community support networks within neighbourhoods.
- 2.11. The programme will also align with and build on activities commissioned via the Bolton Fund, to avoid duplication and achieve maximum benefit for population mental health.
- 2.12. **Mental Wellbeing digital offer for adults-** Evidence suggests effective interventions such as the use of online technology can promote and improve mental wellbeing at primary, secondary and tertiary levels, in particularly for men or full time employees who may find it difficult to access traditional mental health support services. In addition, choice and access was an important theme in the NHS 2014 Five Year Forward View report, which made the case for talking therapies and emotional support services being made more available to adults when needed 24 / 7.
- 2.13. In Bolton, the Children and Young People's Emotional Health and Wellbeing Transformation Group commissioned provision of a 24/365 online mental health and wellbeing support for children and young people. The digital tool offers many functions such a drop in chat function to speak to a readily available counsellor, information, activities and self-care tools, resources on the site for Service Users to download and many more.

- 2.14. This offer has prevented mental health issues escalating and reaching crisis, improved access to the provision of self-care tools and resources which support adults, carers and their families to help themselves and build emotional resilience as well as offer long-term support for those with multiple mental health issues. Currently there are no digital support options for adults in Bolton, so this is an important format to explore as part of the wider digital transformation of community services.
- 2.15. **Prevention Concordat for Better Mental Health** – Public Health England have led on establishing the Prevention Concordat Programme for Better Mental Health as a strategic framework, which is set out in of the government's Five Year Forward View for Mental Health strategy. The focus is on promoting good mental health and preventing mental health problems which enables a place-based approach. The five key steps for successful delivery (Leadership and direction, understanding local need and assets, working together, taking action, defining success) will provide a strategic framework for the overall mental wellbeing programme.
- 2.16. The programme will look to deliver a stakeholder engagement event to galvanise cross-sector action across the system and collaboratively sign up to the Prevention Concordat for Better Mental Health and align with the strategic direction set out in the Vision Strategy, Locality Plan and emerging Health and Wellbeing Strategy.
- 2.17. **Mental wellbeing awareness and campaigns-** Mental health and wellbeing is complex and has many influencing social factors affecting individuals across diverse communities and backgrounds. A series of high profile campaigns will aim to raise awareness of mental health and suicide, to education and ultimately change attitudes and behaviours in order to reduce negative mental health stigma. The promotion of good population mental health will improve a wide range of health and wellbeing outcomes, including increased productivity and economic benefits.
- 2.18. Working collaboratively with Bolton's Mental Health Peoples Network (citizens) and Marketing and Communications leads from Bolton Council, Bolton NHS CCG, Bolton NHS Foundation Trust, Greater Manchester Mental Health Trust and the VCSE partners a mental health wellbeing campaign will be developed. This campaign will be linked to national campaigns such as World Suicide Prevention Day, World Mental Health Day, Time to Talk, which will be amplified locally to maximize impact.
- 2.19. **Monitoring and evaluation-** Evaluation will be embedded into the design and commissioning of the mental wellbeing programme, following principles and guidance in the PHE evaluation toolkit for mental health interventions. It is important to capture the benefits and outcomes of the mental wellbeing programme as whole, in order to demonstrate the value for money and effectiveness of the interventions at achieving the overall aim, and capturing the positive different made for the people who live and work in Bolton.

2.20. This can include mental health specific interventions or wider programmes which contribute to positive mental wellbeing e.g. physical activity, policy on green spaces. The toolkit provides a guide to short, medium, and long-term outcomes suitable for measuring improvements in population mental wellbeing. Identification of key outcomes will be supported by work on the locality JSNA and Single Outcomes Framework.

### **3. STRATEGIC ALIGNMENT OF PUBLIC MENTAL HEALTH**

3.1. To achieve real, sustainable improvement in population mental health the aspiration is to align and embed opportunities to promote mental wellbeing across key policies, programmes, strategies and plans in the Borough. As a local prevention plan is developed this will be connected with:

- The Children and Young People's emotional health and wellbeing Transformation Plan
- Bolton Mental Health People's Network
- Mental Health and Emotional wellbeing Planning and Strategy Group (Adults)
- the integrated neighbourhood model (e.g. through workforce development, social prescribing offer)
- Town Centre Master Planning and regeneration
- Bolton's Cultural Strategy

3.2. Design of the population mental wellbeing programme will follow this principle and build on the opportunities of existing policies, programmes and strategies

### **4. NEXT STEPS**

4.1. It is proposed that the Executive Cabinet Member notes the projects and interventions which are to be mobilised this year.

4.2. Governance of the programme development and commissioning will be through the Shadow Partnership Board reporting to the Active, Connected and Prosperous (Vision) Board.

4.3. The work will be led through key fora including the Emotional Wellbeing and Mental Health Strategy and Partnerships Group and the Children and Young People Emotional and Wellbeing Group.

### **5. IMPACTS AND IMPLICATIONS:**

#### **5.1. Financial**

Financial: An allocation of £130k per annum of Public Health budget to support a three-year mental wellbeing programme from existing commissioning budgets was approved in March 2020 by Executive Cabinet Member.

## 5.2. **Legal**

None provided all commissioning activity is conducted in accordance with Standing Orders relating to Contracts and appropriate legal advice is taken at the relevant time in respect of any proposed contractual arrangements.

## 5.3. **HR**

None

## 5.4. **Other**

None

## 6. **EIA**

Completed as part of original proposal

## 7. **CONSULTATION**

7.1. This proposal has been informed by initial discussions with voluntary, community and social enterprise leaders, key officers and commissioners, GM and North West population mental health leads.

## 8. **VISION 2030**

8.1. Developing a mental health and wellbeing prevention plan, including a mental wellbeing programme, will contribute to the goals of Vision 2030. This will be achieved by taking a whole system, co-production approach, using evidence and intelligence to develop programmes of work, and ensuring strategic alignment.

## 9. **RECOMMENDATIONS**

9.1. The Executive Cabinet Member/Cabinet is recommended to:

- (i) Note the progress update on the mental wellbeing programme and the projects to be implemented in year.

