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Southend-on-Sea Borough Council

Department for Corporate Services

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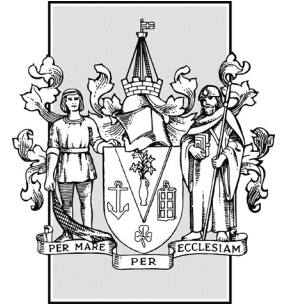
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Date: 9th February 2016

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Dear Health & Wellbeing Board Member,

HEALTH & WELLBEING BOARD - TUESDAY, 9TH FEBRUARY, 2016

Please find enclosed, for consideration at the next meeting of the Health & Wellbeing Board taking place on Tuesday, 9th February, 2016, the following report(s) that were unavailable when the agenda was printed.

Agenda No Item

10. **Mental Health Discussion Summary December 2015 (Pages 1 - 2)**

Yours faithfully,

Robert Harris
Committee Officer

1. General comments/themes		
Key issues/gaps	Notes/progress	Work stream/lead
a) It is helpful to compare ourselves with other seaside towns (rather than rest of Essex)	This has been fed back to key data intelligence leads to inform future comparisons.	Rob Walters
b) Consider the wider determinants of mental health - not just a health issue. Consider broader factors that significantly influence mental wellbeing such as the quality of housing and employment.	An increased focus on wider-determinants can have a stronger emphasis within the longer term HWB Strategy (2016-2020). *HWB Strategy development session scheduled for May 2016.	SBC(PH)/SEPT
c) Can services can be joined up in “clusters” e.g. Police, Fire, Ambulance, Smoking cessation	Response pending	Pending
d) Can we Focus on repeat callers/clients – particularly to some of blue light services	“Parity of esteem in access” work stream already in place as part of Systems Resilience Group. This work stream is exploring ways to help people who have frequent attendances at A&E access the right treatment or support. Southend has an action plan in place to respond to the Mental Health Crisis Care Concordat.	MH Crisis Group
e) Would be helpful to specify what “parity of esteem” (POE) would look like in practice	POE and premature mortality are linked, due to the life expectancy gap between someone with a mental health condition compared to the general population. Link to findings regarding premature mortality in the JSNA and identify ways to increase parity based on local evidence.	Pending
Small group discussion		
2. Parenting & mental health		
Key issues/gaps	Notes/progress	Work stream/lead
a) Recognition that information / advice needs to be given before individuals become parents. Where does learning about parenting start?	A Better Start Southend have secured being part of a bid won by the Mental Health Foundation as part of the Maternal Mental Health Alliance to help review and develop the pathway for Maternal Mental Health over the next 3 years. Only 4 areas in the country are part of this exciting opportunity.	A Better Start
b) Needs to be something young people are aware of. However, there was a loss of parenting on the school curriculum. This is partly due to the fact that teachers are spending their time focusing on increasing educational attainment – which in its self is a protective factor for mental health.		
c) Local initiatives:		
o ‘Streets Ahead’ – 400 families have engaged with this programme, which includes parenting. Need to have further ‘follow up’ and evaluation at 6 months to check whether the interventions with the family have been successful and if not what else needs to happen.	Response pending	Pending
o There is recognition that further thought needs to be given to how advice and support on parenting is delivered as there is no ‘one size fits all’.	Response pending	Pending
o Often, groups such as mother & baby/toddler groups are a better way to give parenting messages in a non-threatening way. With additional training and investment such classes could help to deal with parenting needs.	Response pending	Pending
o There was consensus that parental substance misuse and domestic abuse can have significant impact on quality of parenting		
d) Parenting is a key strand in ‘A Better Start Southend.’		
e) Establish whether there is a current parenting strategy	<ul style="list-style-type: none"> • There is a Child and Family Support Strategy 2014-2016 • There is also a Corporate Parenting Strategy for Looked after children • A Better Start Southend have secured being part of a bid won by the Mental Health Foundation as part of the Maternal Mental Health Alliance to help review and develop the pathway for Maternal Mental Health over the next 3 years. Only 4 areas in the country are part of this exciting opportunity. 	N/A

Summary of discussion themes and potential actions – DRAFT v3

<u>Small group discussion</u>		
3. Place based activities in areas where there are high levels of deprivation; fuel poverty; smoking in pregnancy; physical inactivity; unemployment		
<i>Key issues/gaps</i>	<i>Notes/progress</i>	<i>Work stream/lead</i>
<ul style="list-style-type: none"> a) Recognition of the ten year life expectancy gap between certain wards. b) Recognition of the HWB Board's priority to reduce such health inequality- Group discussed concentrating the Boards efforts on addressing issues in deprived wards. 	Addressing inequality is integral within the current HWB Strategy priorities, specifically, within Ambition 9: Maximising Opportunities/tackling health inequality (including improved access to services) and promoting opportunities to thrive; Education, Employment. It is also a focus of Broad Impact Goal B: Increased Aspiration and Opportunity.	HWB partners
<u>Suggestion for consideration:</u>		
<ul style="list-style-type: none"> c) Could all deprived wards have a community centre? - informal locations for residents to meet and talk about health matters with helpers / volunteers. 	<p>A focused piece of work is underway regarding the Better Queensway redevelopment project to map existing <u>physical</u> community resources in the area (i.e. buildings) and to better understand <u>virtual</u> community resources and connections that exist independently of a specific building.</p> <p>This work can help to inform a wider understanding of the kinds of resources and needs that contemporary communities have across the borough.</p> <p>Additionally, engaging with existing MH services users to understand their community aspirations and social connection needs will be useful to inform responsive measures.</p>	<p>SBC</p> <p>SBC</p> <p>Pending</p>
<u>Suggestion for consideration:</u>		
<ul style="list-style-type: none"> d) Could additional resource be committed to deprived ward schools; through education and learning, changes in culture can be influenced. 	Response pending	Pending
<u>Suggestion for consideration:</u>		
<ul style="list-style-type: none"> e) Could the Civic Centre be used for education during the school holidays? 	Response pending	Pending
<u>Small group discussion</u>		
4. Employment & mental health		
<i>Key issues/gaps</i>	<i>Notes/progress</i>	<i>Work stream/lead</i>
<ul style="list-style-type: none"> a) Whilst work related stress is a common problem, it seems that different employers (and professions) may have different attitudes to it and different approaches b) Simply seeking to raise awareness of the problem (and its impact in terms of costs to employers associated with sickness, recruitment etc) is not enough, we will need to develop a targeted offer whereby we are able to demonstrate impact. c) There are a number of large local public sector employers (SUHFT, SEPT, SBC, Police etc). If it is possible to work with one of them to develop a scheme working with local services in a co-ordinated way that can be demonstrated to have had real impact, this will not only be directly beneficial in itself, but will provide a platform to promote further work in this area. 	<p>Mindful Employment and Responsibility deal</p> <p>Response pending</p> <p>Response pending</p>	<p>Public Health</p> <p>Public Health/SEPT</p> <p>Public Health</p>