

	Agenda Item: 11
Report to:	Birmingham Health & Wellbeing Board
Date:	19 th March 2019
TITLE:	THE MENTAL HEALTH PARTNERSHIP AND PRIORTY PARTERSHIPS FOR THE FUTURE
Organisation	BSMHFT
Presenting Officer	Charlotte Bailey – Executive Director of Strategic Partnerships

Report Type:	Presentation Report
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Purpose: For discussion and partner action

2. Implications:		
BHWB Strategy Priorities	Detect and Prevent Adverse Childhood Experiences	Yes
	All children in permanent housing	
	Increase the control of individuals over their care through Integrated Personal Commissioning (Personal Health Budgets and Direct Payments)	
	Increasing employment/ meaningful activity and stable accommodation for those with mental health problems	Yes
	Improving stable and independent accommodation for those learning disability	
	Improve the wellbeing of those	Yes
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	with multiple complex needs	
	Improve air quality	
	Increased mental wellbeing in the workplace	Yes
Joint Strategic Needs Assessm		
Joint Commissioning and Servi		
Maximising transfer of Public H		
Financial		
Patient and Public Involvement		
Early Intervention		
Prevention		

3. Recommendations

- For Health and Wellbeing Board members to understand the Mental Health priorities, which are managed within the STP and the partnership projects.
- Health and Wellbeing Board members to nominate representatives from each organisation to attend the MH Partnership meetings, which meets quarterly and take a proactive link in the partnership. (Nominations required by the end of March 2019)
- Where purposeful, for the Health and Wellbeing Board to request the MH Partnership to undertake a piece of work for the Board

4. Background

- 4.1 The STP has moved into a life course approach with three main portfolios:
 - Childhood and adolescence: giving children the best start in life; developing our local maternity system and improving the mental health of children and young people.
 - Adulthood and work: Promoting health and well-being and managing chronic disease including supporting our staff, the skills and prosperity of our



citizens and breaking the cycle of deprivation.

- Ageing and later life: supporting people to age well, improving the health and care services for older people and creating a better experience at the end of life
- 4.2 Mental Health is fully integrated into each of the portfolios and sits aside physical health
- 4.3 The current Mental Health Programme Delivery Board has become 'Business as Usual' and is accountable for the delivery of the current work programme, any new Mental Health projects under the STP will have a line of sight to this group.
- 4.4 The STP will disband the Mental Health System Strategy Board but launch an 'independent' Mental Health Partnership' that covers public, private and social sectors.
- 4.5 The role of the MH partnership will be to:
 - Focus on the priority partnerships required for mental health over the forth coming years (as detailed in attached – appendix 1) Engage partners from across the public, social and private sector to play an even greater role in mental health
 - Focus on 4 local priorities for mental health each year which wider sectors can make a contribution
 - To ensure a flow down from the West Midlands Mental Health Commission into BSOL ensuring all innovations and projects are run well locally and that we optimise further opportunities for devolution or innovation funding in mental health
 - To provide an annual 'check and challenge report' on the STP work
 programme to ensure that it is adequately addressing mental health aside
 physical health, is covering the right priorities and is having impact
 - To provide thought leadership for mental health from across sectors, to provoke and challenge the system and support innovation; including the production of national thought pieces
 - To link to the existing mental health advisory committees (clinical senate, MAC, PAC etc.) enabling effective subject matter expertise engagement into the system
 - To support the co-production network to become a wider co-production partnership, providing a system approach to engaging those with mental



health problems and enabling effective co-production

- To undertake commissioned pieces of work from the HWBB, STP Board and MH Delivery Group as requested
- To ensure that any matters arising that require operationalising and project managing flow through to the Mental Health Programme Delivery Group

5.	Future development				
	March 2019 9.30am – 1pm				
	Suicide Prevention – A Joint Approach Including: □ Zero tolerance to suicide □ Safe environments □ Access to help and support				
	13 June 2019 9.30am – 1pm				
	Prevention of mental illness and crisis Including: $\ \square$ Mental health in the workplace $\ \square$ Sport and mental health $\ \square$ Good practice in early support				
	19 September 2019 9.30am – 1pm				
	Supporting people's recovery from mental illness Including: ☐ Helping people back to work ☐ Supportive workplaces and communities				
	12 December 2019 9.30 – 1pm				
	The mental health workforce Including: □ New roles in mental health □ Working in partnership across sectors □ Apprenticeships				
	All Grant Thornton UK, The Colmore Building, 20, Colmore Circus, Birmingham, B4 6AT				
6.	Compliance Issues				
6.1	Strategy Implications				
6.2	Governance & Delivery				
6.3	Management Responsibility				

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6. Risk Analysis						
Identified Risk	Likelihood	Impact	Actions to Manage Risk			
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Appendices

- 1. More detailed paper outlining the purpose of the MH partnership
- 2. Priority MH partnerships