

**Report To:** Community Health & Care  
Partnership Sub Committee

**Date:** 28<sup>th</sup> February 2013

**Report By:** Brian Moore  
Corporate Director  
Inverclyde Community Health &  
Care Partnership

**Report No:**  
CHCP/13/2013/HW

**Contact Officer:** Helen Watson  
Head of Planning, Health  
Improvement and Commissioning

**Contact No:** 01475 715369

**Subject:** 'Inverclyde – Health in Mind'

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## **1.0 PURPOSE**

1.1 The purpose of this paper is to inform the CHCP Sub-Committee of the 'Inverclyde – Health in Mind' event.

## **2.0 SUMMARY**

2.1 'Keeping Health in Mind' is NHS Greater Glasgow & Clyde Director of Public Health's report, which focuses on improving mental health as an important aspect of reducing health inequalities.

2.2 The report aims to put mental health into perspective and takes a life course approach from early years to older people. It highlights the work of NHS Greater Glasgow & Clyde and its partners in promoting mental health and emphasises early intervention, resilience and an asset based approach to support the promotion of positive mental health.

2.3 The Inverclyde Alliance, supported by a multi-agency planning group, organised 'Inverclyde – Health in Mind' and the event had 4 key aims:

- to raise the profile of the GGC Director of Public Health's 'Keeping Health in Mind' report for 2011-13;
- to provide a local response;
- to provide a space for preliminary discussions on the work required to continue the sustainable approaches to local suicide prevention and the reduction in the prevalence of self-harm; and
- to give a better understanding of the links between all of the above and the on-going delivery of the Inverclyde Single Outcome Agreement (SOA).

### **3.0 RECOMMENDATION**

- 3.1 It is recommended that the Sub-Committee notes the content of the report, and comments as appropriate to the CHCP Corporate Director.

**Brian Moore**  
**Corporate Director**  
**Inverclyde Community Health & Care**  
**Partnership**

## 4.0 BACKGROUND

- 4.1 Inverclyde Alliance, with the support of the CHCP, recently organised a seminar entitled 'Inverclyde – Health in Mind' (25th September 2012), which aimed to raise the profile of the Director of Public Health's biennial report, 'Keeping Health in Mind'. A key aim of the seminar was to provide a local response to the report by facilitating preliminary discussions on the work required to improve mental wellbeing; reduce the prevalence of self-harm and suicide, and to ensure that these factors were properly and sufficiently embedded within the Inverclyde Single Outcome Agreement (SOA).
- 4.2 A key output of the event was the 'call to action' for people to sign-up to a mental health improvement network and for the workshop discussions to inform the writing of 'Makin' Well-being Matter in Inverclyde' (CHCP Mental Health Improvement Plan), including the sustainable approaches for local suicide prevention activities.
- 4.3 A total of 66 delegates attended the event and an overwhelming 75% signed-up to a local mental health improvement network.
- 4.4 At the Inverclyde Alliance Board meeting on 17<sup>th</sup> December 2012, it was agreed that the Inverclyde Alliance would:
- provide clear leadership and vision;
  - bring to the attention of all partners that improving mental health and well-being requires everyone to recognise they have a part to play;
  - ensure for future planning and activities for improving mental health and well-being, there are concerted efforts by all partners to encourage full representation at events;
  - facilitate partnership working as a required minimum;
  - place a greater emphasis on asset-based approaches, in order to maximise returns on investment, for mentally well communities;
  - involve communities, particularly young people, in improving their mental health and well-being and service improvement ;and
  - encourage support for people to come together and network regularly to share best practice and learn from each other. This will be the cornerstone of the local mental health improvement network.

## 5.0 NEXT STEPS

- 5.1 The Inverclyde September 2012 event highlighted some key areas of focus, in particular, a focus on the Nurturing Inverclyde approach. Key activities supporting this are:
- The Triple P programme, which aims to ensure that parents in Inverclyde are supported to be the best, positive parents they can be;
  - The Special Needs In Pregnancy (SNIPs) programme, which aims to support vulnerable and at-risk women, including those with addictions during pregnancy;
  - The Mentors in Violence Bystander Project, which aims to teach young people about gender based violence and to stand up against it;
  - The Financial Inclusion Partnership and Strategy – working to reduce

poverty and to try to ensure that people in Inverclyde don't find themselves in unsustainable debt, as well as building their capacity to manage the money they do have;

- Employability programmes that aim to help people become employable, get into work and work themselves out of poverty;
- Positive Learning Pathways – support for young people leaving or at risk of leaving school early, providing alternatives as a result of disengagement, or for those who can benefit from experiences outside of the school environment;
- The Alcohol and Drug Partnership, which is closely tied to the Community Planning Partnership, has an action plan aiming to tackle alcohol and drug misuse and the culture around alcohol in Inverclyde;
- Tackling the unequal health outcomes experienced by some of our communities is being taken forward the Health Inequalities Outcome Delivery Group, supporting capacity building amongst communities at risk of poorer outcomes so that communities themselves are more involved in achieving positive outcomes for themselves;
- A Nutrition Policy has been developed for Inverclyde ;
- An Active Living Strategy, has been developed for Inverclyde;
- Intergenerational relationships are being fostered to promote sustainable community cohesion.

Whilst this work is being led at Community Planning Partnership level, the CHCP is an active partner within that forum and is pivotal to supporting the wider work of the Inverclyde Alliance in improving population mental health.

## 6.0 PROPOSALS

- 6.1 Provide the local CHCP response, particularly from the workshop discussions, in terms of articulating a mental health improvement delivery plan, appropriately called 'Makin' Well-being Matter in Inverclyde'.
- 6.2 Agree to receive further reports, allied to the improvement in the local population's mental health and well-being and suicide prevention & the reduction in the prevalence of self-harm.

## 7.0 IMPLICATIONS

- 7.1 Legal: There are no legal implications in respect of this report.
- 7.2 Finance: There are no financial implications in respect of this report.

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments

- 7.3 Personnel: There are no personnel implications in respect of this report.
- 7.4 Equalities: There are no equalities implications in respect of this report, although recognition will be given to the wider and associate equalities agenda.
- 7.5 Repopulation: There are no repopulation implications in respect of this report.

## **8.0 CONSULTATION**

8.1 The delegates at the event received the full report outlined below.

## **9.0 LIST OF BACKGROUND PAPERS**

9.1 'Inverclyde – Health in Mind' Event Report (available on request).