Bradford: using the Prevention Concordat for Better Mental Health

This case study has been selected to illustrate how the Prevention Concordat can be used to structure a mental health response during the coronavirus (COVID-19) pandemic.

Bradford District Mental Health Partnership Board requested that Bradford Council's Public Health Department lead a COVID-19 Mental Health Needs Assessment in May 2020. This drew on the 5 domains outlined in the Prevention Concordat.

1. Needs assessment and effective use of data

<u>A rapid needs assessment</u> of mental health impact and risk and protective factors for Bradford District was carried out. It included quantitative data but also real-time qualitative feedback from mental health service providers and the voluntary sector via an 'emerging needs' survey.

2. Partnership and alignment

This was achieved by working closely with local voluntary sector and community forums on the 'emerging needs' survey which included the Mental Health Provider Forum of over 40 local organisations and services. This work continues with Bradford University providing academic input to a co-designed review of remote crisis services during COVID-19.

3. Translating needs in deliverable commitments — taking action

The needs assessment resulted in a set of recommendations for services, district wide reviews, commissioning and promotion of the wider social and economic determinants of mental health. A number of proposals were put forward by the COVID-19 task and finish group to the Health and Wellbeing Board for funding.

4. Defining success outcomes

An outcomes framework was proposed based on the existing local mental health strategy commitments, along with the new emerging priorities. This covers a mixture of risk and protective factors, diagnosis data, and proxy indicators.

5. Leadership and accountability

Using the Prevention Concordat framework, Bradford District were able to evaluate the effectiveness and strength of the local mental health partnership and their COVID-19 adaption. Going forward all partners

understand that the future success of a prevention approach requires them to actively address existing and newly emerging inequalities.

Key messages

- COVID-19 shone a light on inequalities opening up new vulnerabilities in those with existing mental health issues and creating new ones
- the need for strong workplace wellbeing programmes to protect and maintain health and social care workforce
- the switch to digital services has been rapid and innovative but there is a risk of individuals being excluded
- locally, the 'fear of going out', misinformation, the loss of social support networks, digital language barriers, and lower access to services impacted on mental wellbeing.
- community interventions were widely reported to be successful, for example phone or video check-ins
- working in equal partnership with the voluntary and community services sector, with sustainable and integrated funding streams are essential to maintain a strong preventive tier of support for the challenges to come

Outcome: Bradford COVID-19 Response plan

Peri-natal mental health (young families

- new mum support, specialist training for other staff

Suicide and self-harm prevention

- free access to guideline support service
- Youth in Mind (community connectivity)
- expanding parental support during family crisis
- Council Contact Centre and Credit Union pilot (mental health advocacy)

Money and mental health

• incentivising safe access to credit during COVID-19 for high risk families

Improving mental health of Black, Asian and Minority Ethnic population

• Black, Asian and Minority Ethnic (BAME) collaborative leading review (better translation services, digital offer, working directly with communities, diversity within the service offer) — draft proposals

Digital inclusion

• still exploring via Learning Difficulty networks

• QWELL service went live September

Out of hours mental health support • addressing work/life, sleep problems, fear of COVID-19, financial problems, relationship issues, alcohol

Carer's support

 addressing lack of respite services due to COVID-19 and skills for new carers

Older people's mental health

- specialist training for staff in care homes and for mainstream IAPT
- befriending schemes

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