

# Health Improvement Plan Workshop November 2007 Collated Group Information

## Mental Health Promotion

What has worked well?

Partnership and networking  
Range of programmes locally delivered  
Hype linked in with school nursing  
Assist training  
Peer Education service  
Post natal depression  
Screening & support of health visitors  
Targeting of services & areas  
Voluntary stroke services  
Baby massage programmes  
Towards better mental health (community direct)  
Expert patient programme  
Mental health strategy on agenda, awareness & de-stigmatisation  
The women's information group approach to health & well-being  
Training but needs to be followed up and developed to provide a wide range of options to meet all needs  
Space

What hasn't worked?

The overlap of meetings between different groups  
Post natal depression support group  
Multiple forums/funding and monitoring streams too many often covering for similar issues  
Need to be more joined up in the approach to mental health promotion  
Short term funding & slippage funding, ridiculous timescales and it doesn't support meaningful work  
Partnership working in theory but not at practice. There is a lot of tokenism  
Possible duplication, some areas better organised than others  
Equity between areas  
Not enough engagement with ethnic minority groups

What gaps are there?

Not enough local activities for mental health promotion work  
No respite care  
Health groups for men  
Life skills programme

Comparative studies

The mind out programme and turn it around

Counselling schools

More work needs to be done confirming informing parents, public & others

Monitoring special supervision governance – not enough planning in these areas

Mental health promotion is a huge area, hard to ensure all stake holders are informed and involved. Need to keep working with the process to improve it.

Proposed future action?
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Work on reduction of stigma

Expand membership of change of community of interest

Neighbourhood support services & respite should be involved in work

GP brief interventions sub group informed to look at the issue of mental health promotion (DHSSP)

The majority of services projects to continue on until March 09

Protocol for inter agency working between family and addiction services developed due to be piloted and evaluated

Eastern board development of prescribed misuse pack and training for community

Regional initial assessment tool for substance misuse

EDACT

- Regional Initial Assessment Tool for Substance Misuse for young people being piloted January to July 2008
- Accompanying training

More partnership working with leisure services

Leisure services do have a role to play

Multi-Disciplinary one stop shop linked with school nursing (perhaps there is an opportunity to link in with the fully extended schools programme.

Peer mentoring training

Co-ordinating funding schemes

Joined up commissioning required between IfH, EDACT & Trust

More initiatives for stroke patients who would be depressed

Programme to help women identify mental health issues

More training and education programmes particularly for those suffering stress

Workplace focus for new programme development

Streamlining of meetings

Showcase of project