

Cheshire East Place Mental Health Plan 2024-2029 Draft

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1. Introduction

The Cheshire East Place Mental Plan 2024-2029 covers how we plan to strengthen our efforts to help people in Cheshire East stay healthy and thrive, whilst addressing the fact that we need to do more to support people with mental health problems, including those that live with severe and enduring mental illness.

We all have a part to play in Cheshire East being a mentally healthy place to live, a compassionate place where our default is to listen to others, where everyone feels able to talk freely about their feelings and emotions and where families are supported to ensure good mental health now and for future generations.

The Cheshire East Place Mental Health Plan promotes and enables culture, ethos and practice that strengthens relational approaches and inclusion, and recognises the importance of psychological safety.

This means we can flourish across our diverse communities, enjoy the things that help us feel good and get access to high quality support and compassionate services when we need them.

Mental health is shaped by the wide-ranging characteristics (including inequalities) of the social, economic, and physical environments in which people live. It is acknowledged for example, that people on low incomes have higher rates of mental health conditions, particularly severe and enduring problems, than those in higher income groups. This has been further impacted by recent events including the coronavirus pandemic and more recently the cost of living crisis. These issues have contributed to widening health inequalities, which in turn impact on peoples overall mental health and wellbeing.

Mental health and wellbeing are something that affects us all and only by coming together to address the wider factors that affect mental health, by improving services and focusing on promotion and prevention, will Cheshire East achieve its ambition to be a trauma informed and mental health aware community

Strong local partnerships have already worked closely together to develop this plan as it is recognised that working collaboratively with other interested parties helps to develop a more robust and effective document. Partners have also contributed to develop an associated implementation plan. Implementation will enable us to improve the outcomes of the local population.

The approach brings together public, private and third sector organisations determined to make change happen and build a fairer, healthier Cheshire East.

The development of this plan has been overseen by the Cheshire East Mental Health Partnership Board, whose members represent Cheshire East Council, Cheshire and Merseyside Integrated Care Board, Cheshire and Wirral Partnership NHS Foundation Trust, the main mental health service provider in Cheshire East) mental health service users with lived experience and carers, Healthwatch, Cheshire Police and organisations from the Voluntary Sector Mental Health Alliance. The Mental Health Partnership Board also reports directly into the Cheshire East Health and Wellbeing Board and this plan is fully aligned with the Health and Wellbeing Strategy.

This plan proposes a whole system approach to improve the mental health and wellbeing of individuals and their families, supported by integrated health and social care services, resilient and trauma informed communities, inclusive employers and services that maximise independence and choice

The plan also aligns with several other strategies and plans at both a local, sub regional and national level. This will ensure that we reduce duplication of work and to ensure that strategic priorities are aligned and in turn ensuring that people using services are able to access better joined up support in a timely and effective manner.

The development of the Cheshire East Place Mental Health Plan is not an end. Together with the implementation plan, the plan will be continuously reviewed regularly by the Cheshire East Mental Health Partnership Board, to ensure that it always reflects both national demands and local need.

2. Our Vision and Aims

Vision

Cheshire East partners and people living within the borough have developed a coproduced vision to support the delivery of the key priority actions within the plan.

"We will seek to improve the mental health and wellbeing of all ages in Cheshire East, from children through to older adults, working in partnership with people with lived experience, families, communities, and the voluntary and faith sector.

Working together we will strive to meet the needs of the person, through integrated models of support that focus on people's strengths, recovery, self-care and encourage independence – reducing the need for hospital care.

There will be a clear focus on the prevention of ill health, early intervention, health promotion and the development of strong communities that can support people with mental health needs."

Aims

The Cheshire East Place Mental Health Plan will aim to

- Drive forward the vison and show how we can all play a part in achieving this, and how we will know when we've achieved it
- Set out the implementation plan based on six key priorities that will help achieve the vision

Over the course of this mental health plan's development, several principles and themes have emerged. These themes are reflected by everyone involved in developing this plan agreeing to:

- Ensure that service re-design and future service developments are produced in conjunction with people with 'lived experience'. This way of working sees service users and service providers working together to reach an agreed outcome(s).
- Recognise the impact of trauma and adversity on peoples' mental health.
- Focus on the wider social determinants of mental health and illness. These are a broad range of social, economic and environmental factors which impact on people's health and include things such as education, housing and employment status.
- Ensure parity of esteem that is, to value mental health equally to physical health.
- Challenge stigma and prejudice.
- Ensure actions and service developments / design are evidence-based and coproduced.
- Adopt a recovery focus where possible in terms of mental wellbeing a recovery focus means gaining and retaining hope, understanding of one's abilities and disabilities, engagement in an active life, personal autonomy, social identity, meaning and purpose in life, and a positive sense of self.
- Address issues of inclusion and diversity inclusion is about giving equal access and opportunities and getting rid of discrimination and intolerance. Diversity is about respecting and appreciating what makes people different.
- Adopt a focus on promotion, prevention and early intervention with education being the key focus.

Key Priorities

The six key priorities that have been developed to deliver the vision are outlined below.



3. National Plans and Strategies

A new national Long-Term Plan for mental health is currently being developed and will build on the expansion and transformation of mental health services already underway through the NHS Long Term Plan 2019/20 – 2023/241. The plan recognises that its principles must be implemented in partnership with local systems, non-government organisations and other sectors in order to succeed.

The Health and Care Act (2022)₂ has seen the establishment of Integrated Care Systems, which bring together health, local government, and patients to improve services in every part of the country. The Integrated Care System that Cheshire East Place is part of are required to set out local plans for the next 5 years, and mental health must be a central part of those plans.

The National Strategy for autistic children, young people and adults: 2021-20267 identifies six broad aims to ensure people are diagnosed and receive the right support as early as possible, and across their lifetime. Seven out of ten autistic people have a mental health condition such as anxiety, depression, attention deficit hyperactivity disorder (ADHD) or obsessive-compulsive disorder (OCD). We aim to ensure that our mental health services are autism friendly.

The **Best Start in Life: A Vision for the first 1,001 Days**[®] through pregnancy to the age of two is also a key document to reference as it emphasises the importance of early years, parent-infant relationships and perinatal mental health. Maternal mental health mental health difficulties are common and without the right support they can have serious consequences for women and their families and lasting effects on the health and wellbeing of babies.

The COVID-19 pandemic has had a considerable impact on people experiencing health inequalities, and many people in Cheshire East have felt the effect of poorer mental health, financial worries, and food and employment insecurity for the first time. Build Back Fairer: The COVID-19 Marmot Review3 highlights the impact of anticipated increases in poverty for children, young people and adults of working age, food insecurity, poorer mental health in children and young people, the unequal impact of the pandemic on ethnic minority 'groups' and people from ethnic minority 'backgrounds, rising unemployment and low wages leading to worse health and wider inequalities.

The National Partnership Agreement: Right Care, Right Person9 involves the police working with partner agencies to identify the most appropriate agency to give vulnerable people the care and support they need. While some mental health incidents do require police attendance, there are a significant number that involve no safety risk or crime. The new approach will mean police can focus on attending health incidents where there's a significant safety risk or crime being committed and refer others to the appropriate partner agency. Cheshire and Merseyside have been identified as an early adopter for this scheme and at the time this Plan commences, work is underway to understand the implications across health and social care.

Sport **England's Uniting the Movement** is a 10-year vision that seeks to transform lives and communities through sport and physical activity. Sport and physical activity has a big role to play in improving the physical and mental health of the nation, supporting the economy, reconnecting communities and rebuilding a stronger society for all.

Core20PLUS5 is a national approach to the reduction of health inequalities. The approach targets improvements in health outcomes for key conditions within the most deprived local areas and for other inclusion health groups.

Core20PLUS54 refers to improving outcomes for the most deprived 20% of England's population.

Whilst health and wellbeing outcomes in Cheshire East are often better than the England average, these overall figures mask significant inequalities within our Borough. Those in our most deprived areas not only live shorter lives but spend more years in poor health. Many people in more deprived areas will be in poor health before they reach retirement age.

This is also seen in Cheshire East where the inequality in life expectancy at birth is 9.5 years and 7.2 years for males and females respectively (2018-20) but the inequality in healthy life expectancy at birth is wider at 13.5 years and 12.6 years for males and females respectively (2009-13)¹.

That residents in deprived areas experience more years in poor health is unfair and unpleasant for the individuals but it also increases demands on our health and care services and reduces the local workforce. Reducing the gap is a key step in creating sustainable services and a vibrant economy.

Local Plans and Strategy Alignment

This plan is all age: it covers how we plan to improve mental health from conception through to end of life. It also makes clear the contribution that other policy areas, such as housing or community safety, make towards people having good mental health.

Cheshire East has published its Health and Wellbeing Strategy and mental health is one of the four priority strategic outcomes within the strategy. The Mental Health Plan will sit below the Health and Wellbeing Strategy, and this will ensure that there is alignment between the documents.

Mental health and reducing health inequalities is a key priority in the Cheshire East Council Corporate Plan (2021-2025). The plan seeks to work to improve the mental health of all people working and living in Cheshire East.

There are also other strategies and plans in Cheshire East that address the mental health of children and young people (Cheshire East Children and Young Peoples Plan, Cheshire East Preparing for Adulthood Strategy) and the mental health of older people (Cheshire East Place Dementia Plan, Cheshire East Live Well for Longer Plan) and carers (Cheshire East All Age Carers Strategy). There are also sub regional plans for improving community mental health services (Community Mental Health

Transformation Programme) and for and the Cheshire East Self Harm and Suicide Prevention Action Plan).

All Together Active¹ is a system-wide strategy for Physical Activity, commissioned by the Integrated Care System Population Health Board, developed by MSP and Active Cheshire in conjunction with place based and regional partners. Whilst not a panacea for health inequality, physical activity has been identified as a key tool in health improvement.

The All Together Active strategy sets out how we plan to capitalise on this opportunity by working with partners across the subregion to build physical activity into both health and social care and the wider settings people move through. All Together Active is aimed at strategic and place-based partners across Cheshire and Merseyside in a position to influence changes in physical activity at scale.

The Cheshire East Place Mental Health Plan does not seek to replace these existing plans and strategies and work programmes, but it does provide a unified vision for mental health in the borough. This means that activity across children and adult services, across both prevention and treatment, and in community settings and hospitals, can be better aligned and therefore have the greatest impact on people's lives.

4. Key Facts and Figures

Prevalence of mental health conditions in Cheshire East residents is very variable, and there is some indication that higher rates are linked to the more deprived areas of Macclesfield and Crewe.

The overall rate of prevalence calculated as a rate per 1,000 resident population is highest in Macclesfield with a rate of 175.3/1,000). Crewe is the second highest with a rate of 163.9/1,000. The locality with the lowest prevalence rate is in Middlewood (Bollington, Disley & Poynton) at 128.8/1,000.

Significant variation also occurs within the individual age groups, e.g., Macclesfield has the highest rate for residents aged 0-19 at 58.2 per 1,000 population compared to CHAW (35.2/1,000).

Macclesfield also has the highest rate for residents aged 20-64y (222.9/1,000) when compared to the lowest, Middlewood (164.9/1,000). For residents aged +65y, Crewe is the highest (155.9/1,000) with Nantwich & Rural the lowest (113.0/1,000).

<u>Table. 1i</u> shows the rates for the Care Community footprint areas across Cheshire East for each of the age groups; note that prevalence is for mild to moderate mental health conditions such as depression and anxiety as well a serious mental illness (SMI).

Table, 1i

	Prevalence of Mental Health Condition							
Cheshire East		Rate / 1,000 Population						
Locality	<u>0-19y</u>	<u>0-19y</u> <u>20-64y</u> +65y All Ag						
MACCLESFIELD	58.22	222.96	153.82	175.29				
CREWE	41.93	211.74	155.86	163.92				
SMASH	43.07	215.00	133.76	160.66				
KNUTSFORD	40.23	211.94	145.91	158.40				
CHESHIRE EAST:	44.09	200.29	135.43	153.28				
СНОС	44.17	201.63	128.54	150.98				
NANTWICH & RURAL	40.04	172.66	113.04	131.56				
CHAW	35.15	165.52	128.80	129.68				
MIDDLEWOOD	46.13	164.89	116.00	128.76				

Data Source: CIPHA (NHS Cheshire & Merseyside ICS) - January 2023

<u>Table 1ii</u> illustrates the highest mental health prevalence rates at ward level for residents of all ages. Of the 15 wards with the highest prevalence, Macclesfield has 5 in this group and Crewe has 4. Most of the areas reflect higher levels of socioeconomic deprivation. However, it should also be noted that some of the areas highlighted below do have some of the highest levels of life expectancy in the borough and rate better across physical health.

Table, 1ii

CIPHA @ August 2023			
Cheshire East		<u>Life Exp</u>	ectancy
Ward (highest 15)	Rate/1,000 total popn (All residents)	Males	<u>Females</u>
Macclesfield Hurdsfield	253.63	78.4	82.5
Macclesfield West & Ivy	223.65	79.6	84.8
Macclesfield South	220.35	75.6	81.2
Sandbach Heath & East	210.65	75.4	86.3
Crewe North	210.65	77.3	82.5
Macclesfield East	208.52	79.1	84.7
Handforth	203.62	80.5	85.8
Wilmslow Lacey Green	203.07	77.8	80.5
Macclesfield Central	202.72	79.0	83.9
Crewe St Barnabas	202.49	75.4	80.0
Congleton West	200.49	78.4	83.1
Sandbach Ettiley Heath & Wheelock	198.30	81.7	87.2
Crewe East	196.96	77.4	81.6
Shavington	196.89	81.0	86.3
Sandbach Elworth	192.64	78.8	83.8
Data Source: CIPHA		Tartan Ru	g (cheshire
(NHS Cheshire & Merseyside ICS) - Augus	t 2023	2013-2017	7

<u>Table. 1iii</u> summarises A&E attendances for mental health-related issues (including self-harm) for the period April 2021 to December 2022). This activity is by residents registered at any GP Practice in Cheshire East. There is a monthly average of 232 attendances, across all ages, for this period.

Table, 1iii

20-64y +65y

A&E Attendances: Apr21 - Dec22						
Psychosocial/Behavioural Change						
Environmental						
Key Presentations:						
Depressive/Anxiety Disorder						
Psychosis/Other Serious Mental Illness						
Wounding from Self Harm						
Overdose: Paracetamol/Antidepressants/Opiates						
Alcohol: Intoxication/Dependancy						
Average Monthly Attendances:						
All Ages: 232						
0-19y 62						

Source: ECDS - NHS Cheshire & Merseyside ICS QlikSense

Wider Determinants of Mental Health

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Our mental health and many common mental disorders are shaped by the social, economic, and physical environments in which we live, at different stages of life. Throughout the current coronavirus pandemic, these issues have contributed to widening health inequalities.

Our aspiration is to reduce mental health inequalities associated with wider factors including:

- **Employment/income** (good quality employment linked to education & skills; supportive workplaces; impact of worklessness, income maximisation and better budgeting)
- **Housing** (quality/type of housing; housing conditions, energy efficiency and supporting communities)
- Transport (connectivity; access to public transport and active travel)
- **Justice** Many children, young people and adults in or at risk of being in temporary detention, custody or secure and detained settings experience a disproportionately higher levels of poor mental health.

Quantitative data analysis can confirm this, by demonstrating that high numbers of young people engaged with Youth Justice Service had poor mental health, SEND requirements, and were using drugs and alcohol. 17.7% of young people accessing the service in Cheshire had a formally diagnosed mental health condition. Overall, 47.9% of young people were accessing mental health services.6

• Access to green space & physical activity (accessible routes; using indoor/outdoor opportunities for physical activity) - recognizing the impact that seeing nature and wildlife has in promoting people's wellbeing, and how sharing green space is a simple and effective way to support people's mental wellbeing, achieved by simply

drawing on one of the assets that Cheshire East has an abundance of. Currently, far too few people in Cheshire and Merseyside meet the NHS physical activity guidelines. Half a million adults in the subregion are inactive, (Sport England Active Lives (2022)) with many facing barriers to physical activity because of issues around gender, race, disability, poverty, sexuality, religion and parental status.

- In **rural areas** we also need to ensure that our mental health services work closely with the Cheshire Agricultural Chaplaincy Services. Farming as an occupation has one of the highest rates of suicide due to occupational pressures and this can contribute to serious levels of depression and self-harm.
- For **schools and colleges** to become trauma informed and mentally healthy places for all there is an overarching set of principles and body of evidence that informs the kind of response and support that can reduce the impact of traumatic events. There is also recognition that the experiences of each child must be thought of in the light of their lived experience.

5. Developing the Plan

A comprehensive engagement process was undertaken by the Cheshire East Mental Health Partnership Board between August and October 2022.

This draft plan and the priorities have been written through co-production with providers, people currently accessing services, experts by experience and carers.. This co-production was undertaken through several focus groups (face to face/virtual), attending local forums and meetings, the distribution of a survey and an online consultation. Through this engagement a picture of what good mental health care looks like has been built.

"Early help for children and young people is vital in helping them to avoid much worse problems as they get older. Early help also allows the family to feel like they have been heard and responded to in their concerns for their child/young person, and are taken seriously."

Online Survey

The survey was made available as a full version and an easy read version and received 452 responses in total,

Key themes from the engagement and pre consultation have been summarised below.

Mental Health Support

Of all survey respondents:

- 29% had used mental health support services with Cheshire East
- 57% knew where to get help with their mental health, 43% did not

• 31% felt they had received the mental health support they needed in the past, 40% felt they had not

Respondents listed up to 3 things about mental health services they would want to change/improve.

The areas that were flagged up the most were as follows

Changes to mental health services

Improve service access/increase capacity

People have told us would like to see:

- Access to mental health services become easier and faster
- More funding and resource for mental health services is needed
- Long term access to mental health services, and a responsive service
- More support provided in local areas, and outside of clinical settings
- Access to support should in person, or at home
- Increased service provision through GPs

How we treat mental health:

People have told us they would like to see:

- Improved mental health support in the community
- Better mental health support for parents
- Enhanced mental health support for employers
- Improved wellbeing to improve mental health, don't rely on medication
- Encouragement of healthier lifestyles to improve mental health
- Mental Health Services that are able to listen better to what people require
- More children and young people's mental health services (CYPMHS)
- Have more interaction between mental health servcues and Voluntary, Community, Faith and Social Enterprise (VCFSE) organisations.
- Expand access to "Improving Access to Psychological Therapies" (IAPT),
- Have more access to skills based Dialectal Behavioural Therapy particularly for those experiencing Personality Disorders
- More group sessions
- Encouragement of self-responsibility, resilience and strength

Mental health services and processes

People have told us they would like to see:

- Better links between health services, ensure they are more joined-up
- Service users only having to tell their story once
- Better trained staff across all teams
- Enhanced carer/family support
- Improved communication with families in the system so they know what to expect and when

Better GP support

Promotion of mental health services

People have told us they would like to see:

- Improved awareness of services among different professionals and teams
- Better communications and promotion of mental health services

Reduced stigma around mental health

People have told us they would like to see

- Reduced stigma towards mental health conditions
- Greater awareness around mental health

"In the event of an emergency with physical health, there are clear routes to obtain help. How might this be mirrored for mental health? It's an important question, for certain, but not without some huge challenges."

Face-to-face and virtual engagement was conducted during September and October 2022 with the below organisations, forums and services. During the face-to-face meetings the pre-consultation survey was promoted as the main way to give feedback:

During the meetings people were asked to provide feedback on the draft priorities, how services can intervene earlier when people need support with their mental health, and what were the gaps in current provision, as well as the barriers to accessing services

- Vesta (Support for Polish Communities)
- Voluntary Sector Mental Health Alliance
- Cheshire East Parent Carer Forum
- Cheshire East Mental Health Partnership Board
- The Weston Centre Day Service
- Weston Hub Crisis Cafe
- Cheshire East Youth Council
- Open Mind Forum
- East Cheshire Mental Health Forum
- Cheshire East Youth Council

"Focus on prevention rather than cure, mental health should just be a part of life/wellbeing and-talked about in schools and communities. You shouldn't have to have a mental health 'problem' to benefit from services, but they should be easy to access should you need the extra support."

What people have told us? Early Intervention and Prevention

The following areas were flagged up as key to improving early intervention and prevention and ensuring services work effectively.



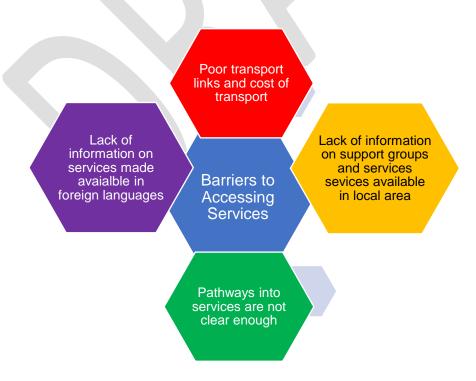
Gaps in Provision

Feedback on current gaps in provision around mental health services were as follows:



Barriers to accessing services

In terms of barriers to accessing services the following were noted as key areas that need to be addressed in the borough.



Community Mental Health Transformation Engagement

Engagement was carried out during the summer of 2022 as part of the Community Mental Health Transformation project.

The purpose of this engagement was to

- Building on previous engagement responding to the views and feedback that people provided to develop the model for community mental health in Cheshire and Wirral
- Talk about and seek views on the new emerging plans to improve community mental health care in Cheshire and Wirral

5 online and face to face community engagement events held in July and August 2022, which were attended by 182 people.

Further opportunities to improve mental to improve community mental health were highlighted through the engagement process and were categorised below.

Further opportunities to improve community mental health





"I think the lack of community care and the lack of mental health training for carers has a negative impact on so many people. I think we need to look at how we can recruit more care staff in the community and how to train them to support individuals with mental health illnesses."

7. Priority Areas

<u>Priority 1 – Children and Young Peoples Mental Health and Emotional</u> Wellbeing

Why is this a priority?

Children and young people (CYP) have indicated that support with their mental health needs would be enhanced by providing support at a much earlier stage, when and where they need it.

Healthy social and emotional development during the first 1001 days lays the foundations for lifelong mental and physical health. Being proactive and intervening at the earliest opportunity is essential.

By promoting initiatives that support mental wellness, emotional wellbeing, and resilience of the whole CYP population (for CYP who do not need individualised support) and support CYP who would benefit from targeted support by enabling access to personalised support when and where they need it.'

What have people told us?

- We need to intervene at a much earlier stage to help build children's resilience and prevent escalations in mental ill health that are often impacted because of long waiting lists
- There needs to be a more a joined-up approach in terms of mental health support for schools, and for parents and carers with healthcare providers to establish a comprehensive support network that supports the wider system.
- The COVID-19 pandemic has impacted heavily on children and young people's mental health
- More mental health support needs to be made available to meet the needs
 of children and young people who have additional needs such as autism
 and ADHD and for those with historic or current self-harm. Some services
 will often see such cases as above threshold of need. Thresholds need to
 be better understood where children and young people have self-harmed.
- Whole school/systems should promote emotionally healthy environments, making every effort to prevent the risk of psychological harm or escalated needs.

What will we do to deliver this priority?

- Undertake a joint strategic needs assessment to help us better understand the emotional and mental wellbeing needs of children and young people and ways we can support and work with families to improve emotional and mental wellbeing. This will include areas such as the impact of social media and bullying.
- Deliver a more enhanced Early Intervention Children and Young People Mental Health Service to bring together colleagues from early years, education, health and the voluntary sector to support children, families and professionals

- Deliver Multi-agency Institute of Health Visiting (IHV) Perinatal and Infant Mental Health Training via Champions to promote understanding of the concepts of perinatal and infant mental health, the impact it can have for the developing baby, infant, parents, wider family and society and what we can do to support good family mental health and wellbeing from the Antenatal period.
- Development of Family Hubs with a focus on improving maternal mental health in pregnancy and during parenthood and children and young people's mental health
- Roll out a range of evidenced based programmes including the My Happy Minds Programme in Cheshire East to support all Local Authority primary schools and academies to deliver an effective curriculum that teaches children and young people the skills to thrive and the skills to bounce back when challenge hits.
- Develop the connectivity between community mental health services and early help provision to reduce the number of children who need additional support and care in hospital
- Give Children, young people, their parents, and carers more opportunities to have their say and ensure they become fully embedded in the development of mental health services at place and across the Integrated Care System

- Cheshire East Council
- Cheshire and Wirral Partnership NHS Foundation Trust
- Cheshire and Merseyside Integrated Care System
- VCFS Sector

Priority 2 – Education, Employment and Training

Why is this a priority?

We will look to enhance mental health support within education settings and workplaces and support people into education and employment opportunities. We will also seek to support the mental health sector workforce to recruit and retain staff across all levels of service provision.

What have people told us?

- Staff working across mental health services should be made to feel more valued and in turn this would lead to increased staff retention and continuity of care
- Leadership in school and college settings need to understand how a
 programme of 'supervision' can benefit staff and pupil wellbeing as part of
 a whole school approach. Those facilitating supervision / reflective space
 must have adequate training and understanding of the function of
 supervision and receive appropriate professional supervision themselves

- with qualified and experienced supervisors, in order to nurture their ability to be emotionally available adults.
- There needs to be more support provided to improve employment opportunities for people with mental health support needs including care leavers

What will we do to deliver this priority?

- Development a multi-disciplinary Mental Health workforce across health and educational settings
- Improve school access to evidence informed information, advice, training, resources and services and support school leadership to match services to their own set of unique needs.
- Provide specialist support to people with mental health support needs to help them into employment, including more integrated working with employers through the work of the Welfare to Work Partnership.
- Place more employment support in NHS Talking Therapies services we can ensure that more people with common mental health conditions are getting the integrated support they need to improve their mental health and remain in, return to or find work. The Provision provides skills-based interventions, information and practical support to help people receiving NHS Talking Therapies services to remain in; return to; and find work. This Initiative also complements the NHS England programme to increase the provision of NHS Talking Therapies to ensure that 1.9m per year have a first session of treatment by March 2024 as stated in the NHS Long Term Plan.
- Where possible seek to embed the recommendations from Transformation Partners in health and care to find ways in which physical activity can be better utilised within NHS talking therapy services to help improve the mental health outcomes of service users. This includes developing a joint plan to better promote best practice and emerging work in the area with credible partners in physical activity such as the Active Partnership Active Cheshire and mental health services providers.

Lead Partners

- Cheshire East Council
- Cheshire and Merseyside Integrated Care System

Priority 3 – Early Intervention and Prevention

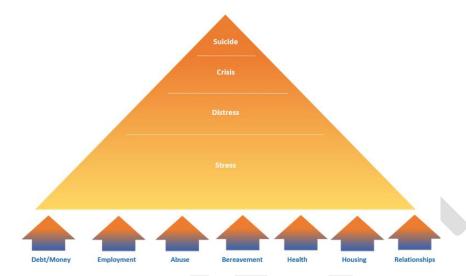
Why is this a priority?

There will be a focus on building on early intervention and prevention support. This will include a greater focus tackling the wider determinants of mental health (including loneliness, social isolation, cost of living crisis, drug and alcohol addiction) with a focus on areas such as self-harm, anxiety and suicide prevention.

Early intervention means identifying and providing effective early support to people who are at risk of poor mental health outcomes. Effective early intervention works to prevent problems occurring, or to tackle them head-on when they do before problems get worse.

Mental health prevention is defined as intervening to minimize mental health problems by addressing determinants of mental health problems before a specific mental health problem has been identified in the individual, group, or population of focus with the goal of reducing the number of future mental health interventions.

Many of the social detriments of poor mental health have their foundation in everyday life issues such as problem debts, poor physical health, relationship breakdown, abuse and loss.



The focus on early intervention and prevention is also supported through the Cheshire East Self Harm and Suicide Prevention Action plan. This is a multi-agency live document that includes key priorities aligned with the national and regional strategy. Priorities in our local plan include: 'tailor approaches to improve mental health in specific groups'.

Some examples are:

- 1. Mens mental health
- 2. Children and young people emotional wellbeing and mental health. People with reduced inequalities and/or overlapping social risk factors

What have people told us?

- We need to shift the focus of services to focus on early intervention to provide better long-term outcomes and reduce the number of people in crisis
- There needs to be more emphasis on wider determinants of mental health and a greater focus on links to improving diet, and exercise.
- Key to improving early intervention services is enhanced partnership working, better signposting to services, improved links into local group/community settings and leisure support
- More support is required for people with depression and preventing self harm and suicide

What will we do to deliver this priority?

- Support our residents to become more physically active by implementing the All Together Active Strategy and Everybody Healthy Programme
- Develop a more joined up approach between specialist domestic abuse services and mental health services
- Provide improved Peer Support Networks and support provided across local areas
- To support a system wide suicide prevention strategy, and the recently developed local suicide place action plan
- Encourage and enable joined up and effective support to VCFS services that address the social determinants of poor mental health
- Family Hubs will aim to bring the council, health and community services together so that families can access the right support at the right time.
 They will build on our current children's centre and early help offer to provide high quality, joined up, whole-family help services.
- Support the wider community to be mental health aware by offering the Tier
 1 intervention training MECC for Mental Health and MECC for physical activity training at a minimum.

- Cheshire East Council Public Health Team
- Active Cheshire
- Cheshire and Wirral Partnership NHS Foundation Trust

Priority 4 – Building Sustainable Communities

Why is this a priority?

We will seek to ensure the communities within which we live support good mental health. This will be achieved by shaping and developing places, connecting communities; planning sustainable places to live which are free from crime. We will also encourage access to green spaces; promoting public health and working to tackle stigma and discrimination within communities.

What have people told us?

- There needs to be a greater focus on enhancing access to green spaces to support and maintain health and wellbeing, especially through the development of new housing developments
- They would like to see reduced stigma within communities associated with poor mental health
- More support and awareness raising within communities on mental health generally for the public and carers

What will we do to deliver this priority?

- More focus on reducing mental health inequalities across communities in Cheshire East, including improved mental health support for carers and people from under-represented groups, including those from different ethnic backgrounds and address cultural and language barriers
- Work with commissioned care and housing providers to deliver an improved and diverse housing offer in Cheshire East to support those with

- mental health support needs or need environmental adapatations due to neurodiversity
- A project by the Mental Health Partnership Board to reduce stigma, normalise human distress and psychological difficulties and consider the needs of those providing unpaid care for someone with mental illness.
- Implement a collaborative approach between specialist domestic abuse services and mental health services to support individuals and families experiencing domestic abuse and sexual violence to have improved mental health outcomes.
- Encourage local providers of housing to better engage with challenges their residents experience and the role they can play in impacting those challenges

- Cheshire East Council
- Cheshire and Merseyside Integrated Care System
- Cheshire East Carers Hub
- Cheshire East Domestic Abuse Partnership

Priority 5 – Transformation of Mental Health Services

Why is this a priority?

We will work in a more joined up way to support people with their mental health and wellbeing needs in the community. Improving community services will mean people will be less likely to need help in hospitals and make sure people can move between the services they need easily. We will utilise the highest level of skill as early in the care pathway as possible as this will ensure a very robust and holistic assessment of needs and will prevent unnecessary, low relevance interventions or placement on unsuitable waiting lists.

What have people told us?

- It is important that mental health services in the community work collaboratively to ensure early access to support as part of recovery and building resilience
- Services need to be easy to access with clear pathways of support to reduce pressure on hospitals and also more easily accessible in local communities, together with more emphasis on the use of technology to reduce the need to travel (which will reduce the impact on climate change)
- More person-centred services are required offering bespoke (1-1) services, supporting long term planning and greater accessibility at different times of the day. This is particularly important for people who are autistic.

What will we do to deliver this priority?

- Develop the market through joint working between health and social care commissioners with providers in the borough, to establish services that meet a range of mental health support needs in the community.
- Development of a lower level mental health pathway to support those discharged from hospital back into the community.
- Implementation of the Community Mental Health Transformation
 Programme to improve support around social prescribing, improve
 accessibility to services through initiatives such as digital technology and
 reduce waiting times,
- Greater partnership working with the Voluntary Community Faith Sector (VCFS) Mental Health Alliance to develop community mental health services which will meet need, demand, and address gaps in services.

- Cheshire and Wirral Partnership NHS Foundation Trust
- Cheshire East Council
- Cheshire and Merseyside Integrated Care System
- VCFS Mental Health Alliance

Priority 6 – Crisis Support

Why is this a priority?

We will look to build on current crisis support by making it easier to access services and ensure that appropriate support is available at all times of day and night. We will also seek to address the current gaps around crisis provision for children and young people through the development of more urgent and emergency care provision.

Mental health crisis support is vital to support to someone experiencing extreme distress. This may lead to self-harm or suicidality – inclusive to planning and further risk Someone may experience a crisis for a range of reasons, such as a big life change, or because an existing mental health condition is getting worse. All crises will be different in their cause, presentation, and progression.

It must be recognised that there have been significant developments in terms of enhancing crisis support within Cheshire East in recent years, with the introduction of an All-Age Mental Health Crisis Line and the establishment of community crisis beds and crisis cafes (in Macclesfield and Crewe). This plan aims to encourage greater integrated partnership working to build on existing available crisis support and ensure that this is further enhanced to meet the needs of our population.

What have people told us?

- Crisis support is vital, and support needs to be available at all times of the day
- There needs to be improved urgent and emergency care provision. available for children and young people within the community
- For non- mental health professionals who work with children and young people at risk: timely access to guidance is required to enable effective

- risk management and support plans that scope both home and school environment
- Support needs to be complimented with better links into other services to prevent people slipping back into crisis situations
- There needs to be clearer routes into accessing crisis support
- People require better information of what crisis support is available in the community to stop people going to hospital

What will we do to deliver this priority?

- We will seek to improve our Children and Young People Crisis Care Service Provision, including the development of an intensive home treatment team
- We will support the priorities set in the Cheshire East Place Suicide Prevention Action Plan.
- We will seek to ensure that our crisis services are more accessible with clear pathways to support and better linkages between services across health, social care and the wider community including the Third Sector.
- There will be wider promotion of the crisis offer available to both adults and children with more accessible information in a variety of formats and languages made available.
- We will work with system partners to understand the implications of Right Care, Right Person and to develop and implement plans for partner agencies to be able to respond where, historically, police services have provided support.

Lead Partners

- Cheshire and Wirral Partnership NHS Foundation Trust
- Cheshire East Council.
- Cheshire Police
- Cheshire and Merseyside Integrated Care System,
- Voluntary, Community, Faith Sector Providers



7 How Will We Deliver Our Priorities and High-Level Outcomes?

To enable us to successfully deliver our priorities in Cheshire East, **several high-level outcomes** have been identified. These key delivery actions in the implementation plan (below) will be delivered and monitored by a range of organisations as part of a partnership approach to ensuring the successful delivery of the plan.

Regular monitoring on the plan will be undertaken through the Cheshire East Mental Health Partnership Board and updates will be made available on the Cheshire East Council Website.

Cheshire East Place Mental Health Plan - Implementation Plan

Priority 1- Children and Young	Peoples Mental He	alth and Emotional Wellbeing			
High Level Outcomes	Wider Strategic	Cheshire East Place Implementation	Lead Organisation (s)	Other Partners	Timescales for
	Links	Actions			Completion
Children and Young People	Cheshire &	Recommissioning of the co- produced	Cheshire East Council	Cheshire and	2024
benefit from individualised	Merseyside CYP	Emotionally Healthy Children and		Merseyside	
support and have timely and	Mental Health	Young People Service		Integrated Care	
appropriate access to Mental	Logic Model			System,	
Health, Emotional Health and	2022-2024,			Participation	
Wellbeing Services	Beyond CYP			Team, Children	
	Transformation			and Young	
Measured by:	Programme			Peoples Groups	
CYP M1: Low wait times to		Develop the connectivity between	Cheshire and Wirral	Cheshire and	Ongoing 2023-2028
access Children and Young		community mental health services and	Partnership NHS	Merseyside	
People's MH services (CWP to		early help provision to reduce the	Foundation Trust,	Integrated Care	
provide data)		number of children who need	Cheshire East Council	System	
		additional support and care in hospital			
CYP M2: Low MH inpatient					
admissions for Children and					

Young People (CWP to provide data) CYP M3: Periodic feedback from Children and Young People and families about service access and provision		Strengthen the Early Help Board and workstreams to improver outcomes for children through an improved early help offer	Cheshire East Council	Cheshire and Merseyside Integrated Care System, Cheshire and Wirral Partnership, Children and Young Peoples Groups	Ongoing 2023-2028 Ongoing 2023-2028
		Implementation of the Beyond Programme Emotional Health and Wellbeing Workstream	Cheshire and Merseyside Integrated Care System	Cheshire and Wirral Partnership NHS Foundation Trust, Children and Young Peoples Groups	Ongoing 2023-2028
		Rollout of the Best Start in Life policy to support early years and recommendations through the Family Hubs operational delivery in communities.	Family Hubs	Cheshire and Merseyside Integrated Care System , VCFS	
Children and Young People who do not need individualised support have access to initiatives that support their mental wellness,	Cheshire East Children and Young Peoples Plan 2022-2026	Development of Family Hubs - with a focus on Improving maternal mental health in pregnancy and during parenthood and children and young people's mental health	Cheshire East Council	ICB, Participation Team, Childrens Trust Board	2023/24

emotional wellbeing, and					
resilience.		Recommissioning of Care Leavers			
		Mentoring Service	Cheshire East Council	Independent	2023/24
Measured by:				Sector Providers	
CYP M3: Feedback from		Development of Joint Strategic Needs			
Children and Young People		Assessment for Emotional Mental	Cheshire East Council –		
and families about service		Wellbeing – This will help to better	Public Health Team	ICB, VCFS,	2023/24
access and provision		understand the emotional and mental		Education	
		wellbeing needs of children and young			
CYP M4: Published Joint		people and their parents,			
Strategic Needs Assessment					
for Emotional Mental Well-		Further implementation and roll out of			
being		'My Happy Mind Software' - to teach			
		school children about the workings of	Cheshire East Council	Cheshire and	Ongoing 2023-2028
CYP M5: Evaluation about		the brain and improving wellbeing, this		Merseyside	
impact of My Happy Mind		has been rolled out across all Primary		Integrated Care	
Software using feedback from		Schools		System	
schools					
		Development of guidance to improve			
CYP M6: reduction of		school attendance. 'Working together			
persistent absenteeism in		to improve attendance' through home			
primary and secondary		centred approaches	Cheshire East Council		Ongoing 2023-2028
schools (Fingertips Public					
Health data)					
Children, young people, their	Cheshire &	Increasing the involvement of young	Cheshire East Council	Cheshire and	Ongoing 2023-2028
parents, and carers are fully	Merseyside CYP	people on the Cheshire East Mental		Merseyside	
embedded in the	Mental Health	Health Partnership Board		Integrated Care	
development of services at	Logic Model			System, Cheshire	
place and across the	2022-2024			East Parent Carer	
Integrated Care System				Forum, Cheshire	
			Cheshire East Council	East Youth	
Measured by:			and Cheshire and	Groups, Cheshire	
				and Wirral	

CYP M7: Number of CYP		Merseyside Integrated	Partnership NHS	
nominated representatives		Care System	Foundation Trust	
and their attendance record at				
CE MHPB or representation				Ongoing 2023-2028
from members of co-	Further development of Children and	Mental Health Support		
production workstream	Young People Co-Production	Teams (Cheshire and		
	Workstream Team	Wirral Partnership NHS		
CYP M8: Outputs from CYP Co-		Foundation Trust)		
production workstream (to be	Engagement and Co production to			
agreed with children and	capture voice via Parent Carer Forum			
young people)	and Youth Groups on future service			
	development			
CYP M9: Feedback from				
Parent Carer Forum and Youth	Mental Health Support Teams using			
Groups on their inclusion and	evidence-based co-production			
involvement in planning of	methods to ensure that their services			
future service developments,	and projects balance the expressed			
together with assurance from	needs of CYP alongside the evidence			
services around co-production	base and service capacity.			
activity				
CYP M10: Bi-annual review of				
co-production activity within				
Mental Health Support Teams				

Priority 2 - Education, Employment and Training								
High Level Outcomes	Wider Strategic Links	Cheshire East Place Implementation Actions	Lead Organisation (s)	Other Partners	Timescales for Completion			
Develop a Mental Health workforce that is multi-	Cheshire & Merseyside CYP	Senior Mental Health Lead (SMHL)-is a new role and the DfE have committed	CEC - Education Team	Cheshire and Merseyside				

disciplinary and maximises the	Mental Health	to funding for up to one SMHL to	Integrated Care	2022 to
potential for workforce	Logic Model	access training by 2025. As of May	System, Cheshire	2025
innovation through embracing	2022-2024,	2023 106, CE settings have completed	and Wirral	
new roles and diversification	Cheshire East	the training. We will continue to	Partnership NHS	
and is representative of the	Children and	promote understanding of the role of	Foundation Trust,	
patient population it serves	Young Peoples	SMHL and uptake of training in	VCFS Sector	
	Plan 2022-2026	remaining 44% of schools and		
Measured by:		promote specialist tools and resources		
Overall:		to enable all CE schools to measure		
CYP M1 : Low MH inpatient		progress and understand that their		
admissions for Children and		approach is effective.		
Young People (CWP data)				
NB It is possible that there		Further facilitation of a Senior Mental		
would be an initial rise in		Health Lead Network involving regular		Ongoing
referrals for community		meetings between education and		2023-2028
mental health support as		health organisations and training		
schools become more aware		providers to improve communications		
of mental health issues		and impact on their work with children		
		and young people and service access.		
Additional proxy measure				
EET M1: By 2025, All Cheshire		Continue to work with a range of local		
East schools will receive		and national training providers to		
training, tools and resources		enable school leads to select from a		
to empower them to work in		suite of evidence informed training		
ways that promote good		that best meets the needs of their		
mental health'		school community. This includes		
		training to improve the quality and		
		capacity of both a universal and		
		targeted aspects of the whole school		
		approach, such as working in trauma		
		and mental health informed ways,		

		self-harm and suicide prevention training. To enable CEC to monitor uptake the training and information will continue be shared via the CEC Wellbeing for Education Chess Hub page.			
Improve mental health support across education settings across Cheshire East	Children and Young Peoples Trust Board, Integrated Care	Ongoing development of the Wellbeing for Education webpage and Training Directory for schools on mental health, self-harm and suicide	CEC - Education Team	Integrated Care System, Cheshire and Wirral Partnership NHS	Ongoing 2023-2028
Measured by: Overall: CYP M2 : low MH inpatient admissions for Children and	Board Strategy, Children and Young Peoples Plan	prevention training that is available locally and nationally on the Cheshire East Council Website.		Foundation Trust	
Young People (CWP data) NB It is possible that there would be an initial rise in referrals for community		Schools to implement the Suicide Prevention Guidance for Cheshire East Schools document	CEC - Education Team		Ongoing 2023-2028
mental health support as schools become more aware of mental health issues		Continue to roll out the Cheshire East iThrive Mental Health Service Directory which has been developed by CEC and ICB, so that school and	Cheshire East Council, Integrated Care System		Ongoing 2023-2028
Additional proxy measure EET M2: further development and usage statistics for iThrive Mental Health Service		college settings can use this to sign post CYP who would benefit from advice and support to the right services at the right time.			
Directory		Develop pathways to support school to-integrate ithrive language throughout policy, procedure and everyday communications.			

Improved employment	Shared	NHS Individual Placement and Support	Integrated Care System	Standguide	Ongoing
opportunities for people with	Prosperity Fund	Service - supporting people with MH			2023-2028
mental health support needs,	2024/25,	support needs			
with employment being one	Cheshire and				
of the most important	Warrington	Shared Prosperity Fund 2024/25 -	Cheshire East Council		2024/25
determinants of physical and	Workforce	People and Skills workstream, will be	Supported Employment		
mental health	Recovery Group	using evidence-based practice to	Team		
	and Welfare To	support people with Mental Health			
Measured by:	Work	needs into work through specialist			
<u>Overall</u> :	Partnership	support.			
EET M3: increased % of people	Board				
in work during lifetime of plan		Welfare to Work Partnership -	Cheshire East Council		Ongoing
(Fingertips Public Health data)		established and will be looking at a	Supported Employment		2023-2028
		range of people with support needs	Team		
Additional proxy measure		including mental health with a focus			
EET M4: Supported		on employer Engagement to look at			
Employment Strategy in place		working with employers.			
		Development of Supported	Cheshire East Council –		Ongoing
		Employment Strategy	Supported Employment		2023-2028
			Team		

High Level Outcomes	Wider Strategic	Cheshire East Place Implementation	Lead Organisation (s)	Other Partners	Timescales
	Links	Actions			for
					Completion
Enhanced suicide	Cheshire and	Development of Joint Strategic Needs	Cheshire East Council	Integrated Care	2023/2024
prevention support by	Merseyside	Assessment to identify local picture	Public Health Team	System, Mental	
increasing awareness of	Suicide			Health VCFS Alliance	
risks, training and	Prevention				
improving the support	Strategy 2022-	Development of Local Suicide Action	Cheshire East Council	Self-Harm and	2022-2025
offer	2027	Plan, aligned with the Cheshire and	Public Health Team	Suicide Prevention	
		Merseyside Suicide Prevention Strategy		Board, Cheshire and	
Measured by:				Wirral Partnership	
Overall:				NHS Foundation	
EIP M1: stabilisation or				Trust	
reduction in % suicide		Delivery of CHAMPs Suicide Prevention	Cheshire East Council		Ongoing
rate for CE during lifetime		Training to frontline staff in education,	Health Improvement		2023-2028
of Plan (Fingertips Public		health, social care and voluntary	Team		
Health data)		community settings.			
Target – The ambition is					
for a zero target across					
Cheshire and Merseyside					
Additional proxy					
measures					
EIP M2: JSNA developed					
EIP M3: Local Suicide					
Action Plan developed					

EIP M4: delivery of CHAMPs Suicide Prevention training widely across system					
Cheshire East residents to become more physically active to support and manage their mental health Measured by: Overall: EIP M5: increase in % of physically active adults during lifetime of the plan (Fingertips Public Health data) Additional proxy measure EIP M6: evaluation of the Green Spaces for Wellbeing project	C&M All Together Active, Cheshire East Council Corporate Plan 2021-2025, Cheshire East Health and Wellbeing Strategy	Implement the All Together Active Strategy to reduce health inequalities resulting from physical inactivity by: - Supporting CE Place to further develop opportunities to use physical activity as a way of improving population health. o Encouraging and supporting inactive people to move more o Removing barriers to participation in physical activity o Increasing opportunities to be physically active o Increasing opportunities to get involved in sport - Embedding movement, physical activity and sport within the Cheshire (and Merseyside) health and social care system.	Active Cheshire	Integrated Care System, Care Communities (Social Prescribing) Physical activity providers Cheshire East Council, Public Health Team	2022-2026
		Delivery of the <u>Green Spaces for</u> <u>Wellbeing Project- a nature-based</u> activities designed around the Five	ANSA	Cheshire East Social Action Partnership,	Ongoing 2023-2028

		Ways to Wellbeing to improve physical and mental health and wellbeing (launched in Crewe in November 2022; Macclesfield in January 2023)		CCICP, Care Communities	
		Implementation of Everybody Healthy Programme	Everybody Health and Leisure	One You – Cheshire East	Ongoing 2023-2028
Improved Peer Support Networks and support provided across the local area	Community Mental Health Transformation	Implement a paid Peer Support workforce	Cheshire and Wirral Partnership NHS Foundation Trust	Mental Health VCFS Alliance, Recovery College	Ongoing 2023-2028
Measured by: EIP M7: increase in paid peer support workforce (CWP and CEC Data)		Establishment of a framework to support the Peer Support Network in Cheshire East	CEC - Communities Team	Mental Health VCFS Alliance	2025
		Ongoing consultation, and co- production with Peer Support Groups	Cheshire and Wirral Partnership NHS Foundation Trust, Cheshire East Council	Mental Health VCFS Alliance	Ongoing 2023-2028

Priority 4 - Building Sustainable Communities							
High Level Outcomes	Wider Strategic Links	Cheshire East Place Implementation Actions	Lead Organisation (s)	Other Partners	Timescales for Completion		
Reduce mental health inequalities across communities in Cheshire	CE Carers Strategy, Cheshire East	Increase mental health support for carers	Cheshire East Council	Cheshire East Carers Hub	Ongoing 2023-2028		
East	Council Equality, Diversity, and	Development of the Cheshire East Health and Wellbeing Strategy	Integrated Care System		Ongoing 2023-2028		
Measured by: EIP M8: increase in the % of adult carers who report as much social contact as they would like (Fingertips Public Health data)	Inclusion Strategy 2021- 25	implement the Oliver McGowan training on Learning Disability and Autism for mental health staff working across health and social care	Integrated Care System		Ongoing 2023-2028		
EIP M9: uptake of Oliver McGowan training across Place							
Stigma and discrimination associated with mental health is reduced		Project to tackle stigma and discrimination in Cheshire East	Cheshire East Mental Health Partnership Board	Cheshire Police, Mental Health Alliance	2023-2025		
EIP M11 – Reduction in levels of hate crime in Cheshire East (Cheshire Police)							
Proxy Measure: EIP: M10: increase in % people aged 16+ who							

agree with the statement I feel like I belong to this neighbourhood (Fingertips Public Health data)					
An improved and diverse housing offer in Cheshire East to support those with mental health support needs	Vulnerable and Older Persons Housing Strategy, Cheshire East Market Position	Collaboration with providers, developers and the Local Planning Authority to improve housing stock across the borough.	Cheshire East Council – Commissioning Team & Strategic Housing Team Planning	Registered Housing Providers, Developers, Care Providers	Ongoing 2023-2028
Measured by: EIP M11: increase in number of adults in contact with secondary mental health services who live in stable and	Statement, Cheshire East Site Allocations and Development Policies	Ensure housing/planning policy is implemented to facilitate the delivery of safe and suitable housing in sustainable locations, with appropriate green space and active routes to improve physical and mental health.	Cheshire East Council – Members, Planning & Strategic Housing Team	As above	Ongoing 2023-2028
appropriate accommodation (Fingertips Public Health data)	Document	Development of renewed Vulnerable and Older Persons' Housing Strategy to understand need for accommodation.	Cheshire East Council - Strategic Housing Team	CEC departments and external partners including developers and care providers	Ongoing 2023-2028
		Increased collaboration between Health and Housing Link Workers and NHS Teams	Cheshire East Housing Options Team	Integrated Care System	Ongoing 2023-2028

Individuals and families	Cheshire East	Whole Housing Approach - Specialist	Cheshire East Domestic	CWP, Domestic	2023/24
experiencing domestic	Domestic Abuse	Domestic Abuse/MH Worker located in My	Abuse Partnership	Abuse and Sexual	
abuse and sexual violence	and Sexual	CWA,		Violence Services	
have improved mental	Violence			(IDVA, RASASC	
health outcomes through	Partnership	Multi-Disciplinary Team including Domestic		and My CWA),	2023/24
a more joined up	Strategy 2021 -	Abuse Worker within Custody Suites		Cheshire Police,	
approach between	2023	around Domestic Abuse with links to		Community Asset	
specialist domestic abuse		Mental Health Services		Providers	
services and mental					
health services (and other		Implementation of Health Pathfinder, to			
services)		improve pathways into domestic abuse			2023/24
		services from health,			
Measured by:					
EIP M12: periodic		Refresh of Domestic Abuse and Sexual			2023/24
evaluation of service		Violence Partnership Strategy			
outcomes, commencing					
2025					

Priority 5 - Transformation of Mental Health Services						
High Level Outcomes	Wider Strategic Links	Cheshire East Place Implementation Actions	Lead Organisation (s)	Other Partners	Timescales for Completion	
Earlier and easier access to support as part of recovery and building resilience	Community Mental Health Transformation,		Cheshire East Council	Integrated Care System	2023/24	
Measured by: TMHS M1: reduction in referrals to adult secondary	CE Market Position Statement	Development of a lower level mental health pathway to support people discharged from hospital back into the community	Cheshire East Council, Cheshire and Wirral Partnership		2023/24	

mental health services (Fingertips Public Health data) TMHS M2: waiting times for adult community mental		ARRS Workers working across Primary Care to triage individuals and link win with social prescribing,	Community Mental Health Transformation Programme	Mental Health Alliance	Ongoing 2023-2028
health services are within 4 week wait (CWP data)		Implement a 4 week waiting time standard by Q1 2023/24 for community mental health services	Community Mental Health Transformation Programme		Ongoing 2023-2028
		Support community asset organisations to ensure greater links with community mental health teams	Community Mental Health Transformation Programme		2023/24
Improved access to services which are joined up with clear pathways of support TMHS M2: waiting times for adult community mental health services are within 4 week wait (CWP data)	Community Mental Health Transformation	Community Mental Health Transformation Programme, including workstreams around - Community Assets, SMI, Neurodiversity, Eating Disorders, Complex Needs (Personality Disorder), Early Intervention Psychosis	Community Mental Health Transformation Programme	ICB, Primary Care Networks, VS Mental Health Alliance, CEC, ICS, Care Communities	March 2024, ongoing
Enhanced commissioned services that are more person centred, deliver positive outcomes and value for	Community Mental Health Transformation	Development of a shared marketplace for Complex Needs (including those with Mental Health Support needs)	Cheshire East Council, Integrated Care System	Lived Experience Advisors, Care Communities	2023/24
Proxy measure: TMHS M3: increase in % of adult social care users who have as much social care		VCFS Mental Health Alliance to develop community mental health services which will meet need, demand and address gaps in services	Mental Health Alliances (Rethink)		Ongoing 2023-2028

contact as they would like			
(Fingertips Public Health data)			

Priority 6 - Crisis Support						
High Level Outcomes	Wider Strategic Links	Cheshire East Place Implementation Actions	Lead Organisation (s)	Other Partners	Timescales for Completion	
Improve the crisis support offer for children and young people	NHS Long Term Plan	Development of Child and Young People Crisis Care Service Provision including an intensive home treatment team	Cheshire and Wirral Partnership NHS Foundation Trust	Integrated Care System, Cheshire East Council	2023/24	
Measured by: CS M1: reduction in hospital admissions as a result of self- harm 10-24 years (Fingertips Public Health data)		Development of Crisis Resolution Service, to ensure children who attend A+E up to age of 16 will receive an assessment and follow up, crisis resolution support for two weeks or intensive home treatment for up to 8 weeks	Cheshire and Wirral Partnership NHS Foundation Trust	Integrated Care System, Cheshire East Council	2023/24	
		Ancora Care – development of service to support children at home.	Cheshire and Wirral Partnership NHS Foundation Trust	Cheshire East Council	2023/24	
		Scoping exercise on the development of alternative places of safety for children and young people	Cheshire and Wirral Partnership, Integrated Care System	Cheshire East Council, VCFS Sector	2023/24	

Improve timely access and clear pathways across existing mental health crisis support services	NHS Long Term Plan	Review of Community Crisis Beds across Cheshire East to ensure improved accessibility, utilisation and onward journey	Integrated Care System	Independent Care Providers	2023/24
Measured by: Overall: EIP M1: stabilisation or reduction in % suicide rate for CE during lifetime of Plan (Fingertips Public Health data) CS M2: reduction in		Recommission of Crisis Cafes in Macclesfield and Crewe	Cheshire and Wirral Partnership NHS Foundation Trust	Cheshire East Council, Independent Care Providers	2024/2025
emergency hospital admissions for intentional self- harm (Fingertips Public Health data)					
Additional proxy measure: CS 3: Periodic evaluation of impact of Crisis Café provision					
Information about crisis services is easy to find, clearly written and include how to gain access to them	NHS Long Term Plan	Promotion of the All Age Crisis Telephone line with targeted approach focusing on schools	Cheshire and Wirral Partnership NHS Foundation Trust	Cheshire East Council	Ongoing 2023-2028
Measured by: Overall: EIP M1: stabilisation or reduction in % suicide rate for CE during lifetime of Plan (Fingertips Public Health data)		Services that support people in crisis produce information in a variety of formats (including easy read and other languages	Integrated Care System	Independent Care Providers	Ongoing 2023-2028

CS M2: reduction in emergency hospital admissions for intentional self-harm across CE during lifetime of Plan (Fingertips Public Health data) Additional proxy measure: Co-produced review of availability and accessibility of crisis information		
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Appendices

1 Mental Health and Wellbeing Discussion Plan, Updated January 202 Mental health and wellbeing plan: discussion paper - GOV.UK (www.gov.uk)

2 The Health and Care Act 2022
Health and Care Act 2022 (legislation.gov.uk)

3 Build Back Fairer: The COVID-19 Marmot Review

Build Back Fairer: The COVID-19 Marmot Review - The Health Foundation

4 Core20Plus5

CORE20PLUS5_Landscape (england.nhs.uk)

Reducing-healthcare-inequalities-Core20PLUS-infographic.pdf (england.nhs.uk)

5 Cheshire East Council Corporate Plan 2021-2025 Cheshire East Corporate Plan 2021-2025

6 Cheshire Youth Justice Services Health Needs Assessment - Executive Summary Report - Liverpool John Moores University

7 National Strategy for autistic children, young people and adults: 2021-2026

The national strategy for autistic children, young people and adults: 2021 to 2026 (publishing.service.gov.uk)

8 The Best Start in Life – A Vision for the 1,001 Critical Days

The best start for life a vision for the 1 001 critical days.pdf (publishing.service.gov.uk)

9 National Partnership Agreement: Right Care, Right Person

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