



## Greater Manchester Integrated Care Partnership Board

**Date:** 30<sup>th</sup> June 2023

**Subject:** Greater Manchester (GM) Mental Health and Wellbeing Strategy refresh

**Report of:** Prof Manisha Kumar, Chief Medical Officer and Mental Health SRO, NHS Greater Manchester Integrated Care

---

### **PURPOSE OF REPORT:**

The purpose of the report is to present the refreshed five-year GM Mental Health and Wellbeing Strategy (Appendix 1) which sets out what we intend to do as a city-region to improve the mental health of people in GM, better support those with mental ill health, and reduce mental health inequalities across GM. It sets out the priorities which identify where we, as a city-region, particularly need and want to focus on achieving a step change in mental health outcomes.

The report provides an overview of the consultation and engagement processes undertaken in developing the strategy, and it outlines the governance arrangements and the next steps required to deliver this ambitious strategy.

### **RECOMMENDATIONS:**

The Integrated Care Partnership Board are requested to

- Note the content of the report.
- Endorse the GM Mental Health and Wellbeing Strategy refresh

## **GM Mental Health and Wellbeing Strategy**

### **1. Background and Context**

While there are many great examples in Greater Manchester of work to respond to various mental health and wellbeing issues, we know we can do more. We know that mental health problems affect certain groups of people more than others. Providing access to support and appropriate treatment that meets the needs of people is important.

We also know that no single agency, body or organisation can solve the mental health and wellbeing challenges we face as a city-region. This strategy is an all-age 'system-wide' strategy, recognising that mental health is influenced by various issues from formal health services to social and economic conditions, to community, individual and family circumstances.

This strategy is about more than how we spend NHS money. One key element of the strategy is the recognition that mental health is everybody's business and good mental health should be actively promoted across a range of strategies, policies, and programmes throughout the system. We must think differently about how we access all available budgets and work together as an integrated public service system (including the Voluntary, Community, and Social Enterprise sector (VCSE)) in partnership with residents and communities.

The development of the Greater Manchester Integrated Care Partnership provides us with an opportunity to take a very different approach to responding to mental ill health as part of a whole system, whole society approach.

This GM Mental Health and Wellbeing Strategy refresh will sit as a subcomponent of the recently launched Integrated Care Strategy and progress reports will align directly with the GM Joint Forward Plan reporting arrangements.

### **2. Data, insights and consultation**

In spring 2022 work commenced on the development of a Mental Health and Wellbeing Strategy refresh for Greater Manchester, overseen by the GM Mental Health Partnership Board. A Mental Health Strategy 'writers group' has been meeting on regular basis, since July 2022, to develop the strategy. The group included representatives such as VCSE, Mental Health Trusts, Localities, to Greater Manchester Combined Authority (GMCA).

#### **3.1 Data and intelligence**

As an Integrated Care Partnership, we collect and have access to substantial levels of intelligence and data. As writers group, we have utilised a variety of sources of both data and insights to identify our vision and shared missions. Sources of intelligence utilised included; [Build Back Fairer in Greater Manchester: Health Equity and Dignified Lives](#), [Measuring Mental Wellbeing in Greater Manchester Report 2023](#), [#BeeWel survey findings](#), [Review of the 2019-2022 Greater Manchester Children and Young People's Plan](#) This together with data resources available via

NHS England and the Office for Health Improvement and Disparities will enable us to measure progress moving forward.

### 3.2 Engagement and insights

Much of the work to assess need and engage communities and service users has already been completed, either through; [The GM Big Conversation](#), [Greater Manchester Residents' Surveys](#), [The Big Mental Wellbeing Conversation](#), and the [Mental Wellbeing and Disability report](#). The writers group has been crucial in ensuring we have taken all available insights captured from GM citizen engagement work carried out. This had been analysed to give the following outlined themes;

- *The system needs to be flexible to work with people on their terms in a place, time and manner that works for them.*
- *The system needs to be accessible, person centred, and service user led.*
- *We need to instil resilience in people and communities and make sure we are not set up simply to respond to people after they get worse or reach crisis point.*
- *We need to actively support and mainstream provision of more joint up support including the VCSE offer, finding ways to ensure that initiatives are not siloed and short-term.*
- *We must bring resources together and test new ways of commissioning with people and communities.*
- *We need to have a shared language around how to address the mental health challenges we face as city-region.*

Further engagement has been undertaken with lived experience groups both adults and young people to sense check the development of the draft strategy and to enable the groups to translate the content to focus on what this means in practice. A series of workshops have been held focusing on 'So what does this mean to me?'

### 3.3. Stakeholder consultation and engagement

The writers group has been involved in ensuring that there is wide engagement across the system from all stakeholders. Stakeholder engagement has been critical to ensure that there is system-wide ownership of the strategy and of the role organisations will play in contributing to the delivery of the five missions. The developing strategy has been discussed as part of a system wide interactive event in October 2022 with over 80 stakeholders from across the system in attendance. It has also been shared and/or discussed at Board sessions in individual organisations in GM and other key forums in the system, including; the Violence Reduction Health and Wellbeing Delivery Group, GM LD & Autism Programme Board, GM MH Blue Light Mental Health Response, GM Population Health Board, GM VCSE leadership Group, MH Adult and Childrens Commissioners Meeting, GM Reform Board, GM Directors of Public Health, GM Aging Well Meeting, GM Gambling Harms Group as well as individual locality meetings i.e. All-Age Mental Health Salford Board Meeting.

Through the engagement and consultation process outlined above, the strategy has been modified to reflect what people told us. The vision, five missions and principles that sit within each mission has been amended to be more inclusive of groups who are most at risk, and to reflect an all-age strategy.

### **3. The vision and five shared missions**

The engagement work led to the development of five shared missions that will drive forward the vision that “Greater Manchester will be a mentally healthy city-region where every child, adult and place matter, The five missions highlighted below reflect the ambition for mental health and wellbeing support across GM;

1. People will be part of mentally healthy, safe and supportive families, workplaces and communities.
2. People’s quality of life will be improved by inclusive, timely access to appropriate high-quality mental health information, support and services.
3. People with long-term mental health conditions will live longer and lead fulfilling and healthy lives.
4. People will be comfortable talking about their mental health and wellbeing and will be actively involved in any support and care that they receive.
5. The mental health and wellbeing system recognises the inequality, discrimination and structural inequity people experience and are committed to developing more inclusive services and opportunities that people identify with and are able to access and benefit from.

We all have a part to play in Greater Manchester becoming a mentally healthy city-region. Achieving our vision is dependent upon a strong partnership approach that takes positive action across the areas highlighted within the five missions. This means working in partnership with the public, VCSE and Private sector to enable them to continue to take responsibility and provide leadership on aspects of the Strategy. The Mental Health and Wellbeing Strategy has been coproduced and will provide the framework needed to develop a shared culture and commitments across the GM footprint.

### **4. Action plan development**

A comprehensive two-year action plan detailing specific commitments and timeframes for delivery will be developed following strategy sign off. The action plan will galvanise the support offers already in place across the system (from prevention right through to treatment) and identify any modifications necessary to enable full implementation of the strategy. The action plan will also identify gaps and areas for immediate action. Through engagement with the writers group and at board meetings it was emphasised that we need to ensure that we build enough flexibility into action planning to allow for ‘course correction’. Agreement has been reached to review the action plan after two years and produce a further iteration to enable both the strategy and action plan to stay relevant, respond to additional unknown pressures over the coming years and continue to boost momentum.

The action plan will be codeveloped, owned and delivered by the system. Each of the five missions and related principles will include commitments to drive action forward. Key success indicators to measure progress will be identified as part of the action plan development phase. Reporting of progress against key indicators will align directly with the GM Joint Forward Plan annual reporting arrangements.

## **5. Resource**

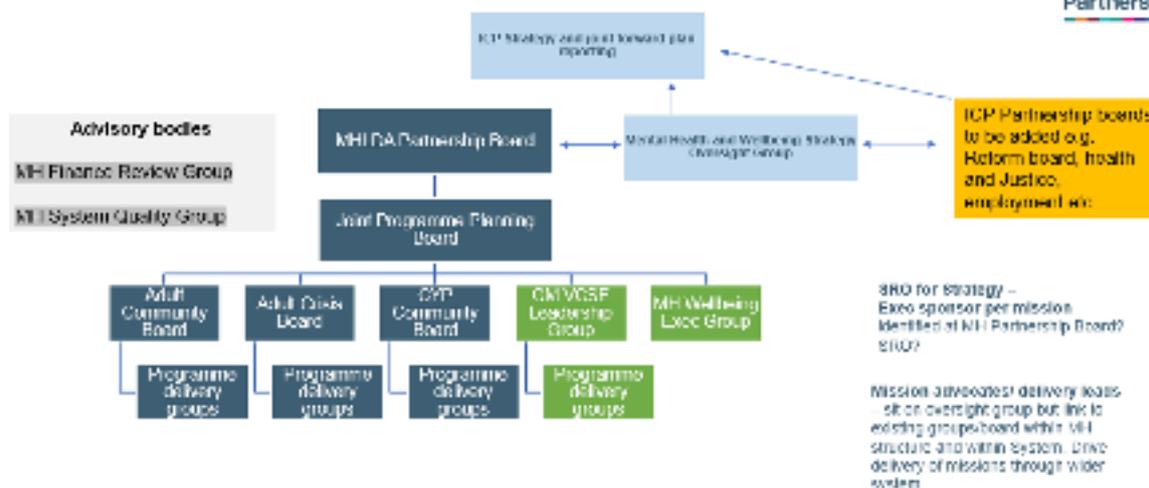
The Mental Health and Wellbeing Strategy refresh and action plan will not have a specific separate associated budget; rather it sets out action that is taking place already in the city-region through the current funding streams including but not limited to NHS mental health core and transformation funding allocations. However, it is hoped that agreeing shared missions across a range of partners will enable new and innovative ways of working which will have both social and wider economic benefits. This includes existing funding commitments related to specific early intervention, THRIVE, mental wellbeing and trauma-responsive programmes.

The NHS Long Term Plan clearly signals the need to improve services and wider support for people with mental ill health, underpinned by a commitment to addressing mental and physical health inequalities through a focus on prevention and through integrated approaches. The NHS Long Term Plan brings with it some funding, some of which will already be earmarked specifically for mental health developments over the next few years. The five missions within the Mental Health and Wellbeing Strategy will further help inform where such streams of funding could be targeted.

## **6. Governance arrangements**

Implementation of the Strategy and action plan will be governed through to the GM Mental Health Partnership Board which is chaired by the GM ICB Mental Health SRO. Where key decisions are required about resource allocation including future investment, these will be progressed through the necessary channels. Progress on the strategy will ultimately be reported, on a regular basis, to the GM ICB Board. As highlighted in the below diagram the GM Mental Health and Wellbeing Strategy delivery will be underpinned by a clear system governance with organisational and system accountability, executive sponsorship, and a support framework.

## Governance proposal to monitor delivery against missions and targets



Given the scope and breadth of the strategy it is recognised that implementation of some of this work will sit across sectors. Successful implementation of the strategy and action plan will only take place with concerted effort from all partners, as such it has been suggested that there is a need to identify an executive sponsor for each mission. Executive sponsors will be identified through the Mental Health Partnership Board and supported by Mission advocates/delivery leads. These leads will include representatives from the third sector, GMCA, MH trusts and ICB staff both at a GM and locality level. These leads will form part of the membership of the Mental Health and Wellbeing Strategy Oversight Group and report progress and risks to the GM Mental Health Partnership Board. Adult and young person lived experience representatives will also sit on the oversight group and support Mission advocates/delivery leads in coordinating the action plan development and monitoring progress.

## 7. Recommendations

7.1. The Integrated Care Partnership Board are requested to

- a) Note the content of the report.
- b) Endorse the GM Mental Health and Wellbeing Strategy refresh, subject to comments from group.

## Contact officers

**Name:** Prof Manisha Kumar

**Telephone:** 07773 226499

**E-Mail:** [manisha.kumar1@nhs.net](mailto:manisha.kumar1@nhs.net)

**Name:** Lynzi Shepherd

**Telephone:** 07432869401

**E-Mail:** [Lynzi.shepherd@nhs.net](mailto:Lynzi.shepherd@nhs.net)

**Name:** Sandeep Ranote

**E-Mail:** [sandeep.ranote@gmmh.nhs.uk](mailto:sandeep.ranote@gmmh.nhs.uk)

**Number of attachments to the report:**

**One attachment – appendix 1: Draft GM Mental Health and Wellbeing Strategy**



Mental Health and  
Wellbeing DRAFT Stra

# Doing Mental Health Differently

Mental Health and Wellbeing Strategy  
2023 - 2028

Draft

# Introduction



-  We all have mental health – in the same way we all have physical health. Sometimes our mental health is good and sometimes our mental health is not so good. Sometimes we become ill.
-  As an Integrated Care System we have a responsibility to deliver the clear targets of NHS England’s 10-year plan for mental health. However, we know that simply delivering that would not change the way people experience and understand their mental health and wellbeing.
-  We understand that mental health and wellbeing is impacted by far more than the services we provide through the investment given to us by NHS England. Tackling poor mental health involves improving mental wellbeing for the whole population as well as preventing and reducing mental illness.
-  We all have roles and responsibilities in improving mental health and wellbeing and we want this strategy to be developed and actioned jointly, alongside people who live and work in Greater Manchester.

-  We understand that the mental health and wellbeing of those who live in Greater Manchester is also impacted by the many different organisations and support offers that exist across the city region.
-  We know we need to do more in prevention and early intervention. However, we need to balance this with the fact that we know people will continue to require specialist mental health services. This is where the NHS focuses its financial resources.
-  This Mental Health and Wellbeing Strategy for Greater Manchester is all-age and builds on our previous Mental Health and Wellbeing Strategy 2016-21. Many of our aspirations and objectives have not changed, but we are aware that the world we exist in has.
-  This refreshed strategy seeks to join the dots and looks at how together we can tackle, head on, some of the greatest challenges we face as a city region and ultimately improve the mental health and wellbeing of people living in Greater Manchester.



# Improvements can only be made once the whole system understands the problems

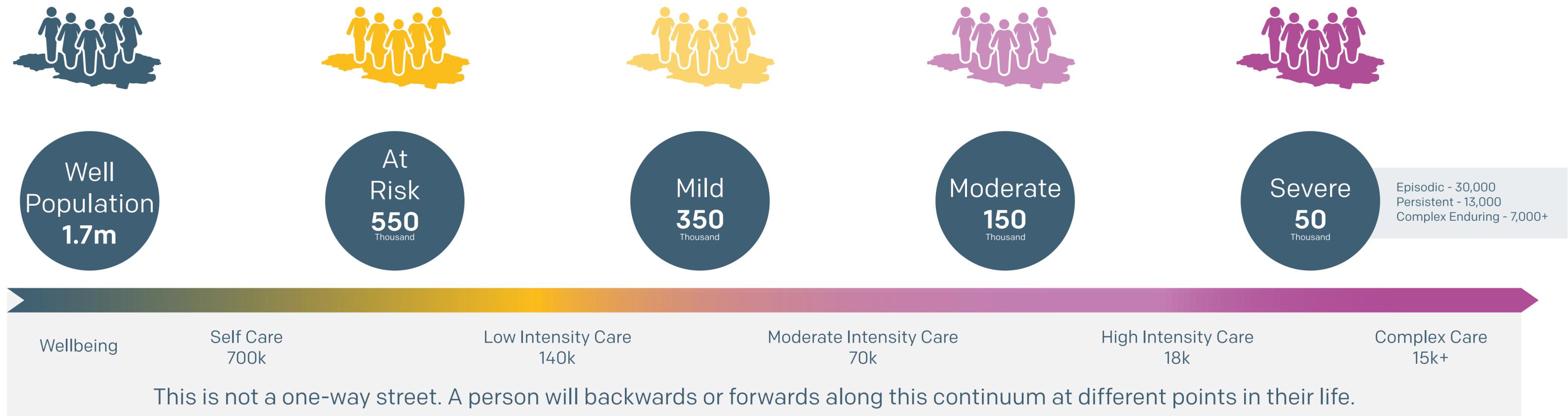
Our services need the infrastructure or flexibility to provide practical help to people experiencing mental health problems in their own lives. To achieve this:

- Systems need to be flexible to work with people on their terms in a place, time and manner that works for them. This is a particular issue for people who are experiencing a range of issues at the same time.
- Staff working with people in formal mental health and broader public services want to work in a person-centred way; we need to give staff the confidence, time, training or freedom to do this.
- We need to ensure that the responses to mental health issues are not simply driven by risk, remit, thresholds or convention but by peoples' needs in the context of their own lives.
- We need to make sure we are not only set up to respond to people after they get worse or reach a crisis point.
- We must move away from relying solely on emergency or referral routes rather than proactive and open engagement. We need to respond to people in a manner, time, and place which suits them.
- There is limited integration with or support for complementary offers in the Voluntary Community and Social Enterprise (VCSE) sector or within the community. We need to actively support and mainstream these offers.
- Individual initiatives have been developed to act as stopgaps to meet this need. However, we need to find ways to ensure that these initiatives are not siloed and short-term but are used as good practice examples that feed into universal services.

The commissioning process can create complexity through a lack of integrated budgets and commissioning processes across health services, other public services and the VCSE sector. We must bring resources together and test new ways of commissioning with people and communities.

- We need to bring together leaders across services for the public, which enables the system to focus on the needs of individuals and communities rather than the needs of organisations and programme areas. We need to have a shared language around how to address the mental health challenges we face as a city region.

# Estimated spectrum of mental health need across Greater Manchester population



Estimated number of people (adults and children) in each group based on their mental health state over 12 months  
 People categorised as having a mental health problem (mild/moderate/severe) if they had an episode in a calendar year  
 Categorised at risk if they had an emerging symptom within a 12 month period, an episode of in the year before or were children/parents of a person presenting with mental health problems

Based on the Productivity Commission Issues Paper into the Social and Economic Benefits of Improving MH (Jan 2019)



# Mental Health in Context

Around **80,000** people in Greater Manchester are in contact with mental health services each month.

More children in Greater Manchester **live in poverty**. More children are **in the looked-after system**, a number that is increasing.



School readiness for all pupils has been improving steadily in Greater Manchester but is **still behind the national average**.

Covid mortality rates were **25% higher** in Greater Manchester than in England at the height of the pandemic.

1 in 5 working-age adults

are economically inactive, more than the national average.

37% of Black secondary school pupils in Greater Manchester **experience discrimination because of race, skin colour or where they were born**.

££££££££

Greater Manchester still invests **8.5% less** money in mental health per head overall than the England average (£192.88 compared with £210.86).

On March 31, 2020

# 3,304

households were in temporary accommodation across Greater Manchester. Of these, **63%** were households with **children**.

The population of Greater Manchester grew to **2.8million** in 2021. A rise of **6.9%** from 2011.

The number of people living in the City of Manchester has grown **36.3%** over the last 30 years.

# X3

Older people who self-harm are at three times greater risk of suicide than younger people who self-harm.

Those with serious mental illness are experiencing inequality in life expectancy, **dying on average 17 years earlier for men and 15 years earlier for women** than the general population.



# What we are doing is good, but more is needed.

While there are many great examples in Greater Manchester of our work to respond to various mental health and wellbeing issues, we know we can do more. We know that mental health problems affect certain groups of people more than others. Providing access to support and appropriate treatment that meets the needs of people is important. Given the centrality of mental health and wellbeing to everything, this strategy is purposefully ambitious, not just in setting out what we need to do but also in how we need to do it.

The challenge is to ask how we can bring all our expertise, knowledge, resources and relationships together to improve all citizens' mental wellbeing and respond to mental health issues in a flexible, person-centered way designed around people's needs.

The NHS, in its many forms, can only do so much. We can provide services and entry to opportunities but we need more than that to achieve our vision. We need to think optimistically and more broadly about solutions. This is about more than how we spend NHS money. We have to think differently about how we access all available budgets and work together as an integrated public service system (including the VCSE) in partnership with residents and communities.



# We have to take a whole system, whole society approach.

No single agency, body or organisation can solve the mental health and wellbeing challenges we face as a city region.

This strategy is a 'system wide' strategy, recognising that mental health is influenced by various issues, from formal health services, to social, cultural, environmental and economic conditions, to community, individual and family circumstances. We are clear that our strategic approach must span and balance the medical and social models, without subscribing to one or the other. This strategy recognises the value of statutory, formal and informal support as well as the broader influences on mental health such as where we are in society: work, family, housing, money, etc.

The development of the Greater Manchester Integrated Care Partnership provides us with an opportunity to take a very different approach to creating a mentally healthy city region, as part of a whole system, whole society approach. We know that to rise to the challenges and pressures on the health system, we will need to significantly change how we operate in Greater Manchester.

We want to use this refreshed strategy to unite the different approaches to improving mental health in Greater Manchester. Some solutions will include better provision of services for those who have distinct mental ill health. Still, some solutions can be broader, involving all working closer harmoniously with partners in building community health through housing, education, lifestyle and cultural bases. It is not just about sharing budgets. It is about sharing ideology, sharing outcomes and sharing aspirations.

## Living Well Tameside Services

Getting the correct mental health support is vital, and for residents of Tameside accessing the right care at the right time has been a huge priority.

Living Well Tameside is a new mental health system designed to help empower the individual, by offering open door integrated services that includes medical, clinical, and wider social support.

Working collaboratively enables different services to support individuals at the same time focusing on what matters to the person and not driven by their diagnosis. The mental health system collaborates with a wide range of partners both formally and informally which have huge impacts on the lives of people living with mental illness. This includes relationships with housing providers, the local authority, drug and alcohol services, local police, and physical health.

The new way of working ensures no one 'falls between the threshold'. The offer is built around each person having a 'My Story' which collates their support, care, and recovery plan in one place. This fresh approach looks at individuals as a 'whole person', so any situation or issue is looked at in the wider context of their lives, to be able to provide the most effective service.

The Living Well Tameside Services team understand what it is like to have a mental health condition and walks with anyone accessing the services side by side. Since the set up of the service it has seen over 9,171 people and has been recognised nationally for leading the way with new ways of working to support people with their mental health.

Living Well Tameside is a formal partnership made up of The Big Life group, Pennine Care NHS Foundation Trust, Tameside, Oldham and Glossop Mind, and The Anthony Seddon Fund, Tameside Local Authority and CGL (drug and alcohol provider), commissioned by Tameside Integrated Care Board.

Our overall approach for the GM Mental Health and Wellbeing Strategy will be fuelled by:



# Vision: A mentally healthy city region where every child, adult and place matter



1

## People will be part of mentally healthy, safe and supportive families, workplaces and communities.

Commitment by all sectors to work together on a delivery plan focused on missions to improve the mental health and wellbeing of citizens.

Areas to include – (Presumption towards community and integration provision)

- Further integration of mental health offers into Early Help, family support, housing, employment, social prescribing, schools and education.
- Development of evidence-based interventions in early years settings supporting social and emotional development. Building upon approaches including 'Think Equal.'
- All agencies support and enable a comprehensive and consistent, community-led 'Live Well' offer in all communities across GM (regardless of the postcode and including alternative psychosocial, biological, social and spiratual offers).
- Employees in areas outside of mental health services have a good understanding of mental health and wellbeing issues and can offer enhanced responses to communities (equally, those in mental health services can offer an enhanced response and connection to contextual issues, e.g. Trauma-Informed, Poverty awareness, fundamental issues – housing, finance, relationships, etc).
- Further integration of mental health support available through community spaces into a neighbourhood to 'blue-light' policing as part of place-based working (e.g. cost of living, food/warm banks, ageing well-related offers).

Primary Care/ physical health related case study to be added

2

People's quality of life will improve through inclusive, timely access to appropriate high-quality mental health information, support and services.

Commitment by all sectors to work together on a delivery plan focused on missions to improve the mental health and wellbeing of citizens.

Areas to include – (Presumption towards community and integration provision)

- Ensure we have a sustainable workforce that is supported to provide the best possible person-centred care that is recovery focused.
- Adopt a 'no wrong door' approach, which means no rejected referrals.
- Provide clear, accessible care pathways for people, integrating mental wellbeing, social care and physical health.
- Ensure that all our services recover from the effects of the pandemic as effectively and fairly as possible, including further development to ensure adequate workforce capacity across GM to deliver mental health and wellbeing support.
- Create a system that provides integrated, 24/7, all-age access for service users, including those with multiple complex needs. No person should fall through the gaps between services or their operating hours.

### I-Reach 7 Day Follow Up Service

I-Reach is a 7 Day Follow Up service which ensures that children and young people get the right level of support at the right time, aiming to reduce the number of schools that send young people, or direct parents, to take their children to A&E which may not always be the most appropriate place. The service educates and supports seeking earlier help via the school Mental Health Lead or Child and Adolescent Mental Health Service (CAMHS). It empowers people and schools to make better use of resources to provide a faster response to concerns.

Since launching, the service has seen 35 high schools and 13 primary schools that are registered as 'Emotionally Friendly Schools', benefit from the offer. The I-Reach team contacts schools 7 days after a young person presents at A&E, to offer advice, discuss issues around safeguarding and signpost to websites and other relevant services.

I-Reach is building collaboration and pathways between the Thrive in Education team, schools, A&E, Mental Health Liaison team and core CAMHS and helping to improve understanding of the Salford mental health system.

In the first three months of 2023, the service prevented 37 schools from sending young people unnecessarily to A&E. The service is constantly developing as the message is communicated about the offer ensuring that there is a focus on making the pathway even more robust listening to the children and young people as well as the schools involved.

### 3 People with long-term mental health conditions will live longer and lead fulfilling and healthy lives.

Commitment by all sectors to work together on a delivery plan focused on missions to improve the mental health and wellbeing of citizens.

Areas to include – (Presumption towards community and integration provision)

- People with long-term mental health conditions will be supported to achieve their best physical health status, ensuring services identify and equip people to address health-risky behaviours in a human and holistic manner.
- Work collaboratively across organisational and service boundaries to ensure young people have a smooth and supported service, including age-appropriate support at transition points.
- Complete the transformation of community mental health support for adults.
- Develop our system, services and staff to ensure we can empower and equip people to receive integrated, flexible and multi-agency responses that reflect their individual complexities. These will specifically address those who experience multiple disadvantages and co-occurring conditions.
- Create opportunities for facilitating learning, collaboration, innovation and research to reduce stigma, raise awareness around mental health and drive continuous improvements in availability, access and quality of care.

#### Building the Foundation: community rehabilitation and supported housing partnerships in Greater Manchester

Forging new partnerships with housing partners can lead to new life and opportunities for people with complex mental health needs. These partnerships can open the door for people to move on from expensive and restrictive inpatient units, sometimes many miles away from friends and family, to more independently living closer to home.

Gore Avenue is one such example in Salford - accommodation with a support service delivered by Sanctuary Supported Living - a 24/7 double staffed, waking nights offer, aiming to support people who need a higher level of support. A package of Enhanced Intensive Housing Management and Support was put in place with ForHousing, (commissioned by Greater Manchester Mental Health NHS Trust), supporting people to move into independent social housing, with wrap around housing and individual support.

Strategic partnerships - in this case between health and housing and between the NHS and Social Care – can allow Greater Manchester to build a better future for many more people who need a higher level of support tailored to their needs. Developing sustainable pathways with shared investment enables people to 'step down' from inpatient wards into supported accommodation and in some cases to move into their own homes. It allows us all as a system to continue shifting the balance away from costly inpatient care and instead reinvests our resources into Greater Manchester's communities, homes and people.

4

People will be comfortable talking about their mental health and wellbeing and will be actively involved in any support and care that they receive.

Commitment by all sectors to work together on a delivery plan focused on missions to improve the mental health and wellbeing of citizens.

Areas to include – (Presumption towards community and integration provision)

- Peer support and advocacy opportunities available for all those within the mental health and wellbeing system.
- Lived experience leadership embedded across the system(s) with a practical and integrated offer developed and implemented.
- Roll out targeted campaigns and literacy programmes promoting mental health knowledge and support available to empower the people to have greater control over their mental health and support needs.
- Build capability, capacity and confidence of the wider public to enable them to have mental wellbeing and suicide prevention conversations.
- Working with the Good Employment charter, all GM employers will be offered to promote a psychologically safe culture, including providing mental-health-literacy training to all employees and training leaders as well as managers to recognise signs of distress.

### Refugee football project in Manchester

Football connects people no matter what their ethnic or cultural background. The game turns strangers at the start of the match into friends when the final whistle blows. A new sports initiative, The Football Freedom Project is using the sport to bring over one hundred refugees and asylum seekers living in Greater Manchester together for weekly matches.

The games are improving their physical and mental health as well as creating a sense of normality and helping players feel more connected to the new community, they now live in. Taking place in Ardwick the sessions attract mainly women, but men and children from the Ukraine and African, Middle Eastern and Asian countries are also being drawn to play. Many of the refugees have struggled with their physical and mental health, so football provides a safe space where they can integrate and get a better sense of belonging and healing.

The chance to improve their fitness by running and moving around, particularly for the children, provides the perfect opportunity to forget their struggles and make new friends.

The ground-breaking project has been co-created by charities Football for Humanity and Refugee and Asylum Participatory Action Research (RAPAR). GreaterSport has helped to fund the sessions, through Sport England's 'Together fund'. The Freedom Football Project is helping refugees from all over the world to feel happier, more settled and use sports to break down cultural and language barriers.

5

The mental health and wellbeing system recognises the inequality, discrimination and structural inequity people experience and are committed to developing more inclusive services and opportunities that people identify with and are able to access and benefit from

Commitment by all sectors to work together on a delivery plan focused on missions to improve the mental health and wellbeing of citizens.

Areas to include – (Presumption towards community and integration provision)

- Support historically excluded groups and people with expertise through experience into employment opportunities to create a workforce that represents and is better able to support the population it serves.
- Invest in a system that embraces and learns from partners and experts. The system should be open to challenge and support as we adapt to more inclusive approaches and services.
- Expansion and integration of culturally appropriate services across the system that better tackle structural inequity.
- Create the ability to respond effectively to continual change in the social and political landscape, this includes increasing mental health investment long term to better enable universal and equitable coverage of core mental health service.
- Make sure that people with complex and intersectional needs can access and get support from all services by adapting them to meet their cultural, social and economic conditions.

### Greater Manchester LGBTQ+ Youth Led Project

Findings in the #BeeWell data 2022, show inequalities in wellbeing for LGBTQ+ young people. This has prompted a collaborative project between 42nd Street, The Proud Trust and The LGBT Foundation- all 3 organisations have a long history of working with LGBTQ+ young people across Greater Manchester but this is the first time they will have collaborated in this way.

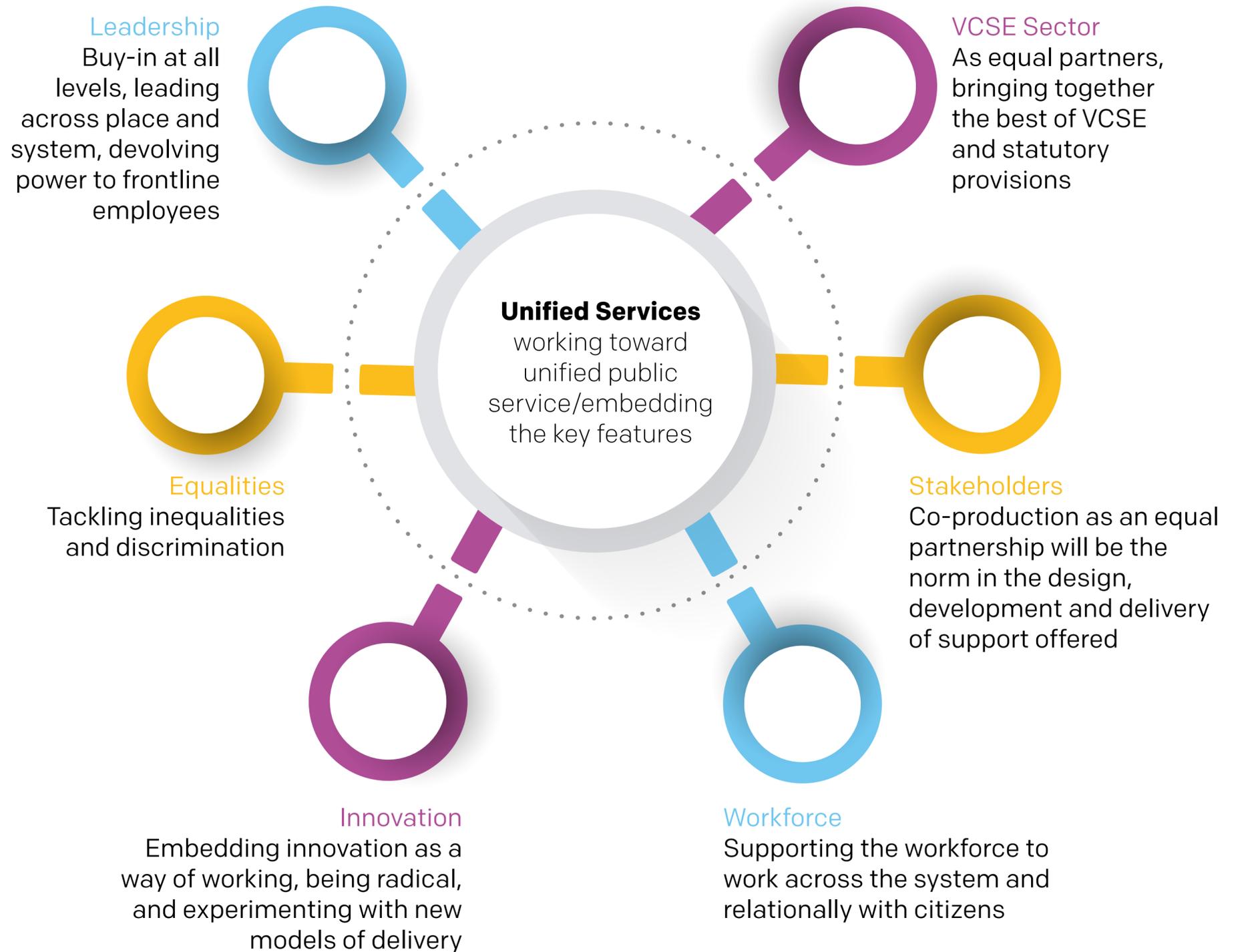
This project aims to understand the impact of the inequalities and discrimination experienced by LGBTQ+ young people, the impact on their mental health and wellbeing and the barriers that they experience to getting support. The partners will engage with young people to unpack what is driving the data. A critical part of engaging with LGBTQ+ young people will be for the project to give a voice to young people who often feel marginalised and who do not necessarily identify with or have the confidence and support to visit obvious places of support for curious, questioning and out LGBTQ+ young people. The project will focus on young people across Greater Manchester aged 13-19 year olds and the partners will work alongside young people to co-produce approaches which aims to reach out to all LGBTQ+ young people across the city-region wherever they are in their journey and geography. As part of this work, young people will be offered the opportunity to participate in a young leaders course, which will enable them to lead peer workshops within schools, youth organisations, sports and faith clubs and other environments they feel are important to talk to young people in.

The partners will measure improvements in wellbeing for the young people involved in the co-design aspect of the project and as approaches are co-designed and adopted across the city region we will also monitor the wider impact on wellbeing for young people and their families. Overall this project will give us a greater understanding of the barriers faced by LGBTQ+ young people and the approaches required to address this critical area of inequality, discrimination and structural inequity across the health and social care system in Greater Manchester and beyond.

# Enablers and ways of working:

The building blocks for achieving our goals and how we work across the system are as important as what we are trying to achieve. Without certain enabling conditions in place, we will not be able to achieve our goals. Ways of working are central to the Greater Manchester Strategy - the diagram on the right illustrates the areas most relevant to our Mental Health and Wellbeing Strategy.

Governance/Accountability – shared across the system



Capacity and resource – shared across the system

## Our Missions

Our missions are for every single person in Greater Manchester; they are not limited to a group or specific cohort of people.

This strategy aims to provide us with a set of missions which can be applied to remove barriers where we know marginalised and underserved populations have previously suffered and lacked support.

We all have a part to play in Greater Manchester becoming a mentally healthy city region. Achieving our vision is dependent upon a strong partnership approach that takes positive action across the areas highlighted within the five missions. This means working in partnership with the public, VCSE and Private sector to enable them to continue to take responsibility and provide leadership on aspects of the Strategy.

## Insights and data

As an Integrated Care Partnership, we collect and have access to substantial levels of intelligence and data. We have utilised a variety of sources of both data and insights to identify our vision and shared missions. Sources of intelligence utilised included; Build Back Fairer in Greater Manchester: Health Equity and Dignified Lives, Measuring Mental Wellbeing in Greater Manchester Report 2023, #BeeWel survey findings.

## Citizen engagement

Much of the work to assess need and engage communities and service users has already been completed, either through; The GM Big Conversation, Greater Manchester Residents' Surveys, The Big Mental Wellbeing Conversation, and the Mental Wellbeing and Disability report. In addition to this further engagement has been undertaken with lived experience groups both adults and young people to sense check the development of the draft strategy and to enable the groups to translate the content to focus on what this means in practice. A series of workshops have been held focusing on 'So what does this mean to me?'

This by no means is reflective of every group/community which exists but we are committed to build on this as we bring the strategy to life. We will continue to explore insights from our citizens and lived experience leaders to ensure that our system, services and staff are equipped to do what it takes to adapt and meet peoples need rather than trying to provide the same offer to everyone.

## Stakeholder engagement

Stakeholder engagement has been critical to ensure that there is system-wide ownership of the strategy. The developing strategy has been discussed as part of a system wide interactive event in October 2022 with over 80 stakeholders from across GM in attendance. It has also been shared and/or discussed at Board sessions in individual organisations in GM and other key forums in the system, including; the GM Integrated Care Board, GM Clinical Effectiveness Group, GM Health and Care Joint Planning and Delivery Committee, GM MH Blue Light Mental Health Response, GM VCSE leadership Group, GM Reform Board, GM Directors of Public Health, as well as individual locality mental health board meetings.

## Governance

The GM Mental Health Partnership Board will take overall responsibility for and provide leadership on, reporting all progress relating to the GM Mental Health and Wellbeing Strategy back to Integrated Care Partnership Board.

Working with partners, a delivery plan linked to an outcomes framework is being produced to enable progress tracking against the five missions outlined within this strategy. The intension with the delivery plan is to give structure and meaning to each of the principles that sit under the missions, to ensure co-production throughout implementation, building on the co-production that led to the development and publication of the strategy.