Mental Health Partnership Board Priorities and Actions for 2012-2013

The priorities and actions described in this document have been developed by the Buckinghamshire Adult Mental Health Partnership Board, which is a sub-group of the Executive Partnership Board. This document will form the action plan and work plan for the Mental Health Partnership Board, the contents of which will be reviewed and updated at each of the formal meetings of the Board.

Adult Mental Health priority areas arising from the national strategy – 'No health without mental health' (DH, 2011):

- More people will have good mental health
- More people with mental health problems will recover
- More people with mental health problems will have good physical health
- More people will have a positive experience of care and support
- Fewer people will suffer avoidable harm
- Fewer people will experience stigma and discrimination

The members of the Mental Health Partnership Board have attempted to apply a limit to the number of priority areas in order to ensure that the range of actions required is manageable.

Priority	Action	Lead Agency
Objective 1 That people in receipt of benefits are supported and assisted where needed through the changes that are taking place within Benefit System.	 The Mental Health Partnership Board will feed into the wider work being coordinated through the Executive Partnership Board Develop understanding of the changes that are taking place Identify likely implications for benefit recipients 	Jacci Fowler - Lead
	4. Evaluate activities taking place to enable benefit recipients to receive/ understand impact of changes 5. Evaluate & recommend level of training frontline staff have received	

Priority	Action	Lead Agency
Agreed at 14 November meeting that Rob Micl Dates to be agreed by January meeting and al	6. Identify & support capacity of services to manage the impacts of Benefit change 7. Monitor impact of Benefit Changes on service users within the Mental Health Partnership Board 8. Take opportunities and make recommendations for improvements in benefit support hael Phillips and Stephen Archibald would arrange four to five meetings. It to be held by end March.	
Objective 2 That people accessing mental health services are given information about what they can expect to receive, including information about clinical pathways, what types of treatment are on offer and who will be involved in their care and treatment.	 The Mental Health Partnership Board will engage with groups of service users to look at the variety of pathways in preparation for the adoption of the Payment by Results regime in mental health Map the range of mental health services available to people across the health and social care sector Identify gaps in services Investigate different levels of support Describe step-down pathways that will encourage recovery 	Kurt Moxley or Alastair Penman to lead
Agreed at 14 November meeting that Stuart Bell to be invited to January or March Meeting. SB could not attend either, but has agreed to attend the May meeting. (MTK)		

Priority	Action	Lead Agency
	 The Mental Health Partnership Board will support the planning and delivery of a calendar of public events (e.g. world mental health day) to publicise mental wellbeing Map the range of mental health training available Develop a tiered-approach to training to offer appropriate levels of information and training to the public, carers, organisations not involved in direct work in front-line mental illness, those involved in health and social care and specialists in mental health care and treatment O Progress to be presented to the January meeting. to be arranged in connection with World Mental Health Day – 10 October 	Rob Michael- Phillips to lead