

# **Health & Wellbeing Board**

UNITAS EFFICI MINISTERIUM	
Title	Mental Health Charter for Barnet
Date of meeting	28 September 2023
Report of	Dawn Wakeling, Executive Director, Communities, Adults and Health
	Tamara Djuretic, Joint Director of Public Health and Prevention
	Chris Munday, Executive Director Children's & Family Services
Wards	All
Status	Public
Urgent	No
Appendices	Appendix A – Mental Health (MH) Charter
Officer Contact Details	Ellie Chesterman, Interim Head of Commissioning – Mental Health & Dementia ellie.chesterman@barnet.gov.uk  Magdalena Magliulo, Health & Social Care Commissioner, Joint Commissioning Unit magdalena.magliulo@barnet.gov.uk

# **Summary**

The Mental Health Charter for Barnet has been developed between February and September 2023 in partnership with Barnet Together Alliance and in coproduction with residents and experts by experience of all ages. The Charter is intended to be aspirational – describing what we want for the Barnet of the future. The Charter will be a guide for key Council partners, statutory bodies and businesses, to support the mental health of people living and working in the borough and foster a culture of positive mental well-being.

The Charter will be launched on 10<sup>th</sup> October 2023, world mental health day, with local organisations encouraged to pledge how they will support delivery of the charter ambitions. Following the official launch, we will work with residents to develop a child-friendly version and an easy-read version, to support accessibility to all. People with lived experience will be involved in monitoring progress throughout the year.



### Recommendations

That the Health and Wellbeing Board:

1. Approves the Mental Health Charter, ahead of its launch and wider circulation

#### 1. Reasons for the Recommendations

The Administration made a commitment to deliver a Mental Health Charter for Barnet, which would drive activity to support the mental health of people living and working in the borough, foster a culture of positive mental well-being, promote equality and inclusion and tackle stigma.

An outline plan for delivering the Charter was developed in January 2023 and over 300 residents of all ages have been involved in coproducing the charter.

The Charter is intended to be aspirational – describing what we want for the Barnet of the future. Instead of dictating the actions we hope to see, we ask key Council partners, statutory bodies and businesses to sign up to the Charter and to 'pledge' what they will do in the next 12 months to support delivery of the Charter. We intend to monitor progress over the course of the year and hold organisations to their pledges – bringing the Charter to life.

We had originally intended to have some overarching statements, supplemented by some age-specific sections. However, through coproduction activity, it became evident that there are strong themes across all ages and therefore the Charter can be applicable to all in its entirety.

The Charter steering group, consisting of experts by experience, Voluntary Care Sector (VCS), Family Services, Public Health, adult social care and adult joint commissioning met several times between February and April 2023, to discuss feedback received from initial focus groups with young people and to draw together the expertise and experience in the room. The group identified four key areas for the Charter to cover. These are:

- To us, mental health is...
- We are a supportive and inclusive borough because...
- Barnet residents are...
- We expect services to...

The steering group also put some initial thoughts underneath each area to stimulate further discussion.

In partnership with the Barnet Together Alliance, a coproduction toolkit was then produced that would enable VCS organisations to organise a workshop and gather feedback to inform further drafts of the Charter. Working to a hub and spoke model, the Barnet Together Alliance reached out to the wide range of organisations in their network to deliver these workshops between May and July. The Alliance provided support with the sessions, both in set up and delivery as needed, and coordinated a pot of funding to cover expenses, provided by the Adult Social Care engagement team.

Data collected from workshop participants evidences that over 230 young people and adults (of which 92 were young people under the age of 18) were involved in these sessions. We know that the total cohort of residents who have been involved in coproducing the charter is higher, as a number of residents were not willing to share their data with us.

A further draft of the Charter, incorporating all the feedback received, has subsequently been to three resident focus groups attended by a further 25 people across all ages, with a particular emphasis on reviewing the language used.

Public Health colleagues analysed the wider demographic information collected and compared this to the borough profile. We can confidently say that we have heard from a widespread and broadly representative group of residents across all ages, genders, ethnicities and religions.

The final version of the Charter will be launched at an event on 10<sup>th</sup> October 2023, with organisations encouraged to pledge how they will support delivery of the charter ambitions. Following the official launch, we will work with residents to develop a child-friendly version and an easy-read version, to support accessibility to all. People with lived experience will be involved in monitoring progress throughout the year.

# 2. Alternative Options Considered and Not Recommended

2.1 Not Applicable

# 3. Post Decision Implementation

- 3.1 A launch event will take place on world mental health day on 10<sup>th</sup> October. This will include sharing the charter, Barnet Together Alliance presenting the co-production activity, and organisations in attendance being asked to make pledges on what they can do to support the achievement of the charter's aspirations. In addition, a special event for children and young people will also be held.
- 3.2 The council and steering group will also produce some different versions of the charter, to increase its reach and accessibility: a 'pocket' version with headlines only, an easy-read version and a child-friendly version.
- 3.3 Monitoring of the implementation of the Charter and delivery of the actions pledged by the partners will be carried out by dedicated resource within the council's community participation team.

# 4. Corporate Priorities, Performance and Other Considerations

#### **Corporate Plan**

- 4.1 The development of Mental Health Charter for Barnet supports the council's corporate plan priorities under the tackling inequalities and living well themes.
- 4.2 The Mental Health Charter for Barnet has been developed with underpinning principles of being an engaged and effective council, through co-production with residents and people with lived experience.

#### Sustainability

4.3 N/A

#### **Corporate Parenting**

4.4 The mental health charter is a document that sets out our aspirations for mental health in the borough. The principles and aspirations in the charter apply to residents of all ages, including to children and young people who are looked after by the local authority or who are care experienced. The mental health of children and young people has formed a core part of the charter development.

#### **Risk Management**

4.5 N/A

Insight

4.6 N/A

**Social Value** 

4.7 N/A

# 5. Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)

5.1 Implementation of the Charter is intended to be met within existing budgets. Should any future funding requirements arise, these will be considered through the Council's medium term financial planning process. Other partners making delivery pledges will address resource implications through their own financial and budget processes.

## 6. Legal Implications and Constitution References

- 6.1 In line with Part 2B of the Council's Constitution, the Health and Wellbeing Board has the following functions:
  - To work (together with Barnet Borough Partnership) with Integrated Care Partnership (ICP)
    and Integrated Care Board (ICB) to determine the integrated approach that will best deliver
    holistic and streamlined care and prevention activities, including action on wider determinants
    in their communities.
  - To jointly assess the health and social care needs of the population with NHS commissioners and use the findings of a Barnet Joint Strategic Needs Assessment (JSNA) to inform all relevant local strategies and policies across partnership including North Central London Integrated Care Strategy.
  - To work together to ensure the best fit between available resources to meet the health and social care needs of the whole population of Barnet, by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental and social wellbeing. Specific resources to be overseen include money for social care being allocated through the NHS; dedicated public health budgets; the Better Care Fund; and Section 75 partnership agreements between the NHS and the Council.
  - To provide collective leadership and enable shared decision making, ownership and accountability.
  - To promote partnership and, as appropriate, integration, across all necessary areas, including
    joined-up commissioning plans and joined-up approach to securing external funding across the
    NHS, social care, voluntary and community sector and public health.

- To explore partnership work across North Central London where appropriate.
- Specific responsibilities for:
  - Overseeing public health and promoting prevention agenda across the partnership
  - Developing further health and social care integration.
  - Receiving regular reports on the North Central London Integrated Care Board and their partner NHS trusts and NHS foundation trusts, including joint capital resource use plans, ICB Annual reports, Forward Plans and Performance Assessments

#### 7. Consultation

- 7.1 Over 300 young people and adults have been involved in coproducing the Charter and refining the language. This activity was led by organisations within the Barnet Together Alliance
- 7.2 Public Health colleagues analysed the demographic information collected from participants involved in coproduction workshops and compared this to the borough profile. The analysis shows that we have heard from a widespread and broadly representative group of residents across all ages, genders, ethnicities and religions through the co-production.

## 8. Equalities and Diversity

8.1 Decision makers should have due regard to the public sector equality duty in making their decisions. The equalities duties are continuing duties they are not duties to secure a particular outcome. The equalities impact will be revisited on each of the proposals as they are developed. Consideration of the duties should precede the decision. It is important that Cabinet has regard to the statutory grounds in the light of all available material such as consultation responses. The statutory grounds of the public sector equality duty are found at section 149 of the Equality Act 2010 and are as follows:

A public authority must, in the exercise of its functions, have due regard to the need to:

- a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- a) Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
- b) Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
- c) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- a) Tackle prejudice, and
- b) Promote understanding.

Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act. The relevant protected characteristics are:

- a) Age
- b) Disability
- c) Gender reassignment
- d) Pregnancy and maternity
- e) Race
- f) Religion or belief
- g) Sex
- h) Sexual orientation
- i) Marriage and civil partnership

Advice on completing Equality Impact Assessments (EIAs) can be found <a href="here">here</a>.}

# 9. Background Papers

9.1 N/A