A Positive Mental Health Manifesto For Lowestoft
Introduction

At the outset, Lowestoft Collaboration Academy 3 was tasked with looking at mental health in Lowestoft and making proposals which will address specific issues. Experience within the group was drawn from a range of backgrounds with the result that as well as identifying potential projects the group also proposed a more systemic approach to improving community resilience, reducing instances of mental ill health and providing support to people experiencing mental health difficulties.

The group assessed that a range of people experience challenges in their mental wellbeing, not all of them having or requiring a formal diagnosis. It was noted that the impact of these difficulties was not limited to the person and their immediate family and friends, and that recovery was not found solely through formal services or systems. Many resources exist which may benefit people in maintaining good mental health but they were not always known or obvious to people, also people could provide themselves or each other with informal but highly effective support.

In order to improve the long term impact of poor mental health outcomes for people across Lowestoft it was felt that a significant and impactful campaign could be launched alongside an approach which helped to identify and draw together resources that may support people. A ‘positive manifesto for mental health’ could be developed alongside the appointment of a Mental Health Ambassador to promote mental health issues and to deliver a programme of activities linked to transforming the approach to preventing and supporting mental ill health. This should including mental well-being statements in all policies for local organisations and agencies working in the Town.

Additionally having noted the impact of Adverse Childhood Events upon the future health of people, and the ongoing strain which trauma may place upon a person’s mental wellbeing the group determined that a trauma informed approach across the town would have the potential for improving community resilience and supporting people dealing with the impact of trauma.

It was recognised that most of the contacts that people had in their daily lives were not with formal services or systems and that these contacts could be a source of support or detriment, depending on delivery, and at the same time the person experiencing difficulties could impact significantly upon those contacts. This also suggests that positive contacts that could support the wellbeing of a person, but which may be missing from their lives at present, need not be established only through formal routes but could come from a variety of community and local contacts. The idea of Community Circles that support an individual are key to maintaining good mental health.

Mental ill health costs Suffolk about £450 Million in direct costs and an estimated £400-£950 Million in indirect costs per year in terms of healthcare, lost jobs, unemployment benefits, homelessness support, police time and prison places. (Suffolk Annual Health report 2016)
With the Communities Embracing Mental Health project already in place the group saw that there was already a campaign which could be developed to deliver a new approach. It was also recognised that statutory services provide a vital and essential role in supporting people with recognised mental health issues and that they would need to be engaged in the approach without compromising the care which they are required to provide.

We intend to make suggestions based upon the use of existing resources and working across a broad range of organisations and services as well as enabling people to support one another within the community. It is our belief, reinforced by our visit to Salford, that communities ultimately know what will heal them and that the Mental Health STP for Suffolk and Norfolk is underpinned by an approach which relies upon community resource. To maximise the potential within the Lowestoft community we would like investment into the town and any service development to ensure co-production is the norm.
Background

The town of Lowestoft faces multiple risks for the mental wellbeing of residents, with areas of deprivation, high unemployment, single parent families, low school attainment, and existing levels of poor mental health. As an area isolated by its physical location it also faces challenges in attracting human and financial resources, and in ensuring that it has prominence within the plans of national and regional government.

The factors outlined within Lowestoft Rising’s statements about the town are replicated here and are relevant when considering a plan which places mental wellbeing and a trauma informed approach at its heart:

Lowestoft, Suffolk is the most easterly point of the UK and has a population of almost 62,000. It is a divided town - both geographically by Lake Lothing, and economically. The 2010 Index of Multiple Deprivation (IMD) shows that parts of Lowestoft are in the 20% least deprived areas in the country, whilst just a few streets away, are areas amongst the 20% most deprived. The level of child poverty in some parts of the town is significant - with over 30% of children living in poverty, compared to the Suffolk average of 14.7%.

Economy and transport
Lowestoft is a port town which initially developed due to its fishing industry. Whilst the fishing industry has since declined, the development of oil and gas exploitation in the North Sea in the 1960s led to the development of Lowestoft, along with Great Yarmouth, as a base for the industry. The town has recently begun to develop as a centre for the renewable energy industry within the East of England and is to be the base for the 'East Anglia One' offshore array for the next 40 years.

It is also a traditional seaside resort with award-winning sandy beaches, two piers and a number of other tourist attractions and is a major administrative and retail centre for Suffolk. It also boasts the Pleasurewood Hills theme park and Suffolk's only zoo at Africa Alive, in nearby Kessingland.

The main road routes in and out of Lowestoft are the A12 (which links to Ipswich to the south and Great Yarmouth to the north) and the A146 (linking to Beccles and the west). A third river crossing is now being planned for delivery in 2022/23. There is a railway station in the town with regular services to Ipswich (East Suffolk Line) and Norwich (Wherry Line). In January 2013 work started on a £1m scheme to improve the railway station and the area outside it in order to address congestion problems and improve cycling and bus links.

There is a 12 year plan (covering the period 2013-25) for the development of short, medium and long term proposals for the improvement of transport and infrastructure within Lowestoft. This plan, ‘Moving Lowestoft Forward’, has been developed in partnership between Suffolk County Council, Waveney District Council, Lowestoft & Waveney Chamber of
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Commerce, Suffolk Chamber of Commerce, the Environment Agency and the New Anglia Local Enterprise Partnership.

Education
Lowestoft has 20 primary and 4 high schools, plus 3 pupil referral units. The majority of post 16 education is provided on a single campus at Lowestoft 6th Form College which opened in September 2011, and at Lowestoft FE College (now part of East Coast Colleges in a merger with Gt Yarmouth FE College) which provides a range of academic and vocational courses. There are also a number of private providers and third sector organisations delivering post-16 education and training in the town. Suffolk County Council’s schools organisation review had a significant impact in Lowestoft in 2011 with all eight middle schools closing and the opening of a fourth high school at Pakefield.

The GCSE performance of Lowestoft’s high schools is poor when compared to county and national averages. The attainment level at Key Stage 4 (GCSE) has been below the county and national averages at East Point Academy, Ormiston Denes Academy and Benjamin Britten High School. East Point Academy was placed on special measures in April 2013 following an Ofsted inspection. Ormiston Denes Academy was placed on special measures in November 2012 and the then Benjamin Britten High School was placed on special measures in 2015. All 3 schools have responded well with two removed from special measures and the third school improving. In December 2016, East Point Academy was rated as 'good' and GCSE results have shown continued improvement with East Point at 62%, Pakefield at 56%, Benjamin Britten Music Academy at 49% and Ormiston Denes at 32% for A*-C grades in Maths and English.

The performance of the primary schools is more mixed with some achieving consistently high attainment levels, namely St Mary’s RCP School, Pakefield Primary School and Poplars CP School.

Lowestoft College provides a small range of higher education courses as part of the University Campus Suffolk network. The college also runs a significant programme for adult learners and industry courses designed to support the offshore and maritime industries which are important employers across the region, and for some specialisms attract an international market.

Health
In Suffolk there are three Clinical Commissioning Groups (CCGs), with NHS Great Yarmouth and Waveney Clinical Commissioning covering the Waveney district. It is broadly aligned with the Great Yarmouth Borough Council and Waveney District Council areas. There are 24 general practices in the Great Yarmouth and Waveney CCG locality.

All 24 practice members in the area have joined this group, and 14 are in the Waveney area. The CCG has a budget of approximately £350m and is responsible for commissioning local NHS services for Lowestoft. The two hospitals generally used by Lowestoft residents are James Paget University Hospital and the Norfolk and Norwich Hospital, both of which are in
Norfolk. Other healthcare services are commissioned by Suffolk County Council and include sexual health, drug and alcohol, 0-19 children’s services and healthy lifestyle services.

Lowestoft does have a new state-of-the-art health clinic at Kirkley Mill, replacing the services offered by Lowestoft Hospital. This provides GP surgeries and a range of local health services.

There are significant health inequalities in Lowestoft with some wards experiencing higher than average life expectancy and lower rates of long terms illnesses, while wards where there are high levels of deprivation, experience the reverse. Life expectancy for females in Lowestoft wards varies from 79 years to 85.9 years and for males varies from 74.3 years to 81.8 years. In both cases, life expectancy is lowest in Kirkley and highest in Carlton.

Although no figures are available at ward level, the Department of Health profile for 2012 shows that Waveney performs below the England average on the following indicators; smoking in pregnancy, breast-feeding initiation, teenage pregnancy and people diagnosed with diabetes.

In addition, Suffolk County Council is working in partnership with the CCG to develop an integrated approach to the commissioning and provision of health and social care in Waveney. The drivers for this project are the ageing population, acknowledgement that the current system does not always deliver the care that people want and/or need, the County Council’s programme of transformation for adult social care (Supporting Lives, Connecting Communities) and the financial climate for both local authorities and the NHS.

Crime
The Lowestoft Safer Neighbourhood Team (SNT) covers the town, with priorities focusing on preventing incidents of dwelling burglary and to raise public awareness of this priority. Burglary has been a consistent priority for the SNT with historic high figures however continued effort has paid dividends with a 74% reduction in dwelling burglaries in Lowestoft over a 5 year period.

A review of anti-social behaviour in Suffolk led to the introduction of ASB teams in all districts. These multi-agency teams bring together officers from community safety, police, housing, mental health, family intervention practitioners, community development, youth offending and others to share information and coordinate activity. These teams provided a useful starting point for Suffolk Family Focus, which is the county’s response to the Troubled Families agenda.

According to statistics from police.uk* during the period between May 2013 and July 2014 there was a total of 6,262 individual reports of crime in Lowestoft North, the most common types being anti-social behaviour (2,680), violent crime (827) and criminal damage and arson. Burglary accounted for 3.86% of reported crime and drug-related crime 3.38%. Statistics indicate that there has been a year-on-year reduction in the number of crimes.
It should be noted that these rates are for reported crime only and that pro-active concentrated police activity in certain areas naturally distorts the information. The nature of ward boundaries and of crime statistics concerning ongoing and confidential cases means that these statistics should not be construed as exact portrayals of crime but rather they offer an estimation of the proportion of crime in each area.

Lowestoft continues to face a multitude of deep-rooted social challenges. In recent years, considerable resources have gone into tackling these with a wide range of individual interventions, actions, projects and support being provided by a range of public sector agencies to the town. Whilst these have experienced some success, the town still faces long term significant challenges. It is also arguable that our collective investment in these approaches for Lowestoft have provided more of a ‘nanny’ state and inadvertently created greater dependency and disempowerment.

However, there are also opportunities. The town has a voluntary sector which is growing stronger and has actively engaged in activity around ‘Education Change makers’ led by Lowestoft Rising following the RSA report as part of the ‘Raising the Bar’ initiative in Suffolk. Lowestoft is more advanced in terms of the collaboration being built through Suffolk Family Focus, Suffolk’s approach to troubled families. Then, there is the placement of Lowestoft with regard to Offshore Wind Industry – jobs and skills are one of the key challenges, but Lowestoft is well placed to take advantage of the green economy opportunity, it has an Enterprise Zone, has ‘Centre for Offshore Renewable Engineering’ status and was most recently awarded Local Pinch Point funding to address some of the infrastructure challenges.

There is an active Systems Leadership Partnership across Great Yarmouth and Waveney Heath economy that engages all key organisations in setting the strategic direction of health and care. One project that this group is supporting is the integration of health and care services in Waveney, implementing a new delivery model that puts the service user at the heart of delivery.

Lowestoft Rising was formed in April 2013 and is a partnership of Suffolk County Council, Waveney District Council, Suffolk Police, Suffolk's Police and Crime Commissioner, GT Yarmouth and Waveney CCG and the voluntary sector with an overarching aim to make Lowestoft a better place for everyone growing up, living in, working in, visiting or investing in Lowestoft.
Proposals

The proposals encompass a concept for an overall approach to mental health in Lowestoft as well as specific actions and projects which could be created. We feel that for Lowestoft to thrive it is essential that the mental wellbeing of local people improve and that the long-term impact of this approach would be significant.

We have created a series of short term and long term activities, all with the ultimate aim of Lowestoft having a trauma informed approach across the community, working with public bodies, schools, third sector organisations and private businesses to build a consistent and comprehensive strategy.

Many of the activities are deliverable with no additional funding but with a requirement for organisations to use their existing resource differently, the long term objective being to see reductions in costs for policing and security, education, physical and mental health systems, and social care. This is achieved not only through reduced demand but through the channelling of support through community resources and through reduced absences from work, staff attrition, and a greater understanding of co-production.
Proposal 1

To state the aim that Lowestoft will develop a trauma informed approach to mental wellbeing and commission a positive mental health manifesto for Lowestoft.

Using the example of Walla Walla in Washington State, we believe that if the NHS and Town, District, and County Council wish to support the community in transforming the outcomes for people in Lowestoft the starting point is to describe a new method of working and a new approach. The development of this approach will require a long-term piece of work co-produced with local people and all of the relevant organisations.

Simply stating this with one voice will not transform lives, but we believe that it is essential in gaining the support, input, and belief of local people, and organisations it is important for the key organisations to state the aim and for us to have buy-in from local councillors, MP etc.

By directing the creation of a positive mental health manifesto for Lowestoft we believe that the community will be able to see that the ambition for the town to be a pioneering place for mental health care will be demonstrated and that a mandate for change can be sought.

The manifesto will make specific reference to ‘at risk’ groups who can be identified as facing greater challenges in maintaining good mental health, including but not limited to:

- Armed forces veterans
- Care leavers
- Offenders and ex-offenders
- Socially isolated older people
- Single ‘middle aged’ men
- Children and Young people
Proposal 2

The appointment of a Mental Health Ambassador for Lowestoft.

We believe that to ensure that the profile of mental health generally - and the ambition of a trauma informed approach specifically – remains high, that a Mental Health Ambassador be appointed by Lowestoft Rising with the support of Chief Executives from both councils, NSFT, CCG, and police.

The ambition is for this person to have a high profile and to work directly with leaders within local organisations, local politicians, and media to promote the mental health agenda. They will lead the activities outlined below and lobby for any relevant assistance from local and national government, working at all levels to promote activities and ensure that they are ‘in the room’ when key decisions are made.

They will also recruit mental health champions across the town with a mix of lived experience and interest in mental health, and formulate the positive mental health manifesto for Lowestoft through co-production with local people and organisations. We also aim to create a ‘mental health council’ which will draw together people with lived experience, councillors, professionals and champions to discuss local issues, monitor progress and inform outcome measures.

Cost / sponsor and delivery – it is possible that this role could be delivered by a partner organisation agreeing to release time from a current employee to sponsor this role.
Proposal 3

‘How are you really doing’ information gathering campaign

It is our belief that in order to understand the outcomes the community would like to achieve and to deliver the most impactful support we need to understand the mental health of people across Lowestoft. We intend to use the mental health ambassador, champions, social media, local media, and staff within partner organisations to ask as many people as possible across the town four very basic questions:

- What makes you happy?
- What keeps you safe?
- What is important to you?
- How would you get more of those things? (or what is inhibiting those things)

In addition people can volunteer to tell us more specific details about themselves and their willingness to engage in supporting others or gaining support for themselves.

Cost / sponsor and delivery – we hope that through volunteers and partner organisations we can deliver this without cost. If we can work with a sponsor organisation to assist in producing printed materials and website we can achieve low costs. The mental health ambassador will be tasked with negotiating and agreeing this. We can also use Waveney data to measure change over time.
Proposal 4

Launch Community Wellbeing Circles

Based upon the community circles organisation in Salford and the STP produced for Norfolk and Suffolk for mental health we believe that the most effective and realistic routes to managing, supporting and preventing mental ill health is through community based and delivered activity.
We believe that supporting people to make connections based on common interests, needs, and with complementary skills or resource can empower people to maintain good mental wellbeing.

Using workers within existing organisations we would change the role of support workers into ‘community connectors’ with their role being to find out what would make a person more happy and more safe and finding ways to help them engage with that activity more often.

- This could be linking together males at risk of social isolation and working with a local rugby or football club to support them to attend matches and develop supportive relationships.
- People who have social anxiety but who have a car they could use may be linked with people who do not have transport but would benefit from getting out more often.
- There may be more intensive support which requires the input of a professional, but the role of the community connector remains the same – to link together people with a need with others who can support them.

The bulk of this work would not be hampered by significant safeguarding, people developing friendships and communities coming together may need some low level support but should be encouraged to be organic and self-managing.

Community circles can also be relevant and applicable to organisations and professionals who need support in specific areas. We have identified a series of areas where community circles can be created to support people in front line roles, where there is specific need for more resilience, and where we believe groups of people would offer effective support to one another.

Cost / sponsor and delivery – in the first instance we hope that via the Mental Health Pooled Fund we can use staff within Home Group’s community mental health team to trial this work. In future other third sector providers, already commissioned to deliver support in the local community could have this style of working within their commissioning. In addition to being cost neutral the impact would be hoped to be a reduction in the need for more formal input for some people and early intervention / prevention work impacting demand. The mental health ambassador will be tasked with negotiating and agreeing this. This model of working could be developed as part of the recovery frameworks used by mental health and drug and alcohol services.
Proposal 5

*Training and supervision for ‘frontline staff’*

We believe that the creation of a package of training designed to teach basic mental health first aid and developmental trauma to staff working in the ‘front line’ will help them to understand some of the situations that they may encounter, in time the introduction of reflective supervision for staff will aid resilience and an opportunity to create formulations around individuals who they may work with or encounter regularly.

In the first instance we imagined this training being for ‘blue light’ services but it came to encompass teaching and teaching support staff, people working in customer facing roles in retail, staff within charities and specialist services, and council staff. It is also considered that businesses agreeing to be part of this may be ‘accredited’ as Communities Embracing Mental Health gold standard in a similar way to fair trade badges. The benefit to businesses will be seen in more skilled staff, the potential for reduced staff absence, and possibly access to a greater number of customers.

In order to demonstrate the learning from the Academy work we have been able to engage the “Time to Change” team services that are coming to Suffolk as part of the role out. Time to Change is a National brand and already offer training support packages for Schools and Employers. Initial discussion with Health watch, who are leading the work to bring this to Suffolk under Time to Change, has indicated that we could use their training resources to upskill a local group of managers to deliver that front line training. We believe this would make it a sustainable roll out programme so that we could reach vast numbers of front line staff, volunteers and Community with good quality mental health first aid training.

We have also discussed this with Dementia Action Alliance and the Autism Society both of who would be prepared to take part in the “Train the Trainer” element so that we upskilled our trainers to be able to deliver a full range of mental well-being, dementia and autism awareness training.

We have also researched the Governments 5 Ways to Well-Being and believe that the 5 strands are a great way to start conversations with people about their own mental health, their employee’s mental health and any client or Community group they are supporting. Indeed we have re designed our logo for “Communities Embracing Mental Health “to reflect the 5 Ways to well-being.

As a reminder they are:-
- Connect
- Be Active
- Take Notice
- Keep Learning
- Give back (Volunteer)
We believe we can give people the confidence to talk to others about the 5 ways to Well-Being in a non-threatening way so that conversations are being had across Lowestoft. We would even see this appearing as part of PDR discussions for employees.

We also believe our brand or logo demonstrates that people are key and the existence of a Community circle of support is vital. The colouring of the logo reflects the 5 colours allocated by Government to the 5 Ways. The sun in the centre reflects Lowestoft and its Sun Rise Coast location. It is also a 5 point star reflecting our ambition to make Lowestoft a Town with a 5 star approach to mental well-being.

**Cost / sponsor and delivery** – initially we are hopeful that we can access existing mental health training and trial supervision via a sponsor organisation from within mental health. The mental health ambassador will be tasked with negotiating and agreeing this, and to engage employers in piloting. Releasing those staff trained to deliver the training to others would need sponsor sign off.
Measures and timelines

The mental health ambassador will be tasked with using the ‘how are you really feeling’ study to create a series of outcomes co-produced with the community. These outcomes along with those negotiated and agreed with sponsor organisations and commissioning bodies will be monitored and reported.

Upon agreement of the proposals herewith it is our ambition that a mental health ambassador be appointed within one month and that they would recruit and appoint champions and begin a three month process of conducting the listening exercise. This would coincide with engagement with media, the three tiers of councils, local MP and businesses already signed up to Communities Embracing Mental Health.

The ambition would be to have the first community wellbeing circles running within six months and frontline staff training within the same timescale. It would be hoped that the mental health council could be recruited and be active at this time as well.

The assumption is that this work would be widely promoted and that the pilot may determine a specific area in which to focus activity – for example Kirkley and Pakefield would encompass two schools, large retailers, Kirkley Mill Surgery, mental health supported living and a number of independent retailers and charity organisations – but that will be determined as the project proceeds. The awareness campaign, champions and ambassador will cover the whole town.

We aim for the mental health ambassador to be able to make a high level interim report and recommendations before the conclusion of the 2017/18 financial year, which will also allow funding options to be discussed and considered if / as needed alongside councils and commissioners. We will seek a strong partnership with the new Lowestoft Town Council, who we hope will recognise the opportunity to support an exciting and potentially transformative approach.
What do we need now?
At this stage we need agreement to proceed with proposals one and two, by doing so the aim is crystal clear and the ambassador is able to begin work on establishing the approach. The appointment of a mental health ambassador with the mandate to formulate a manifesto and approach will make a significant statement. From there all of the other ambitions can be progressed.

We would also benefit from the thoughts and suggestions of the group.