

Prevention Concordat for Better Mental Health: Commitment level application form: Tower Hamlets Partnership Group

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Section 1 - Information required from signatories to the Consensus Statement

We are delighted that you are interested in becoming a signatory to the <u>Prevention Concordat for Better Mental Health Consensus Statement</u>. You will be joining a number of organisations who have committed to working together to prevent mental health problems and promote good mental health through local and national action.

The Prevention Concordat Commitment level registration process

- **Step 1:** Contact the national Public Mental Health team at publicmentalhealth@dhsc.gov.uk to request a Prevention Concordat application form. We will also introduce you to your OHID Public Mental Health regional lead.
- **Step 2:** Your regional lead will contact you to arrange an informal conversation to discuss your application and provide you with support during the process.
- **Step 3:** Please review the Prevention Concordat Consensus Statement (Appendix A) and the list of prompts and resources (Appendix B) to support your prevention and promotion planning.
- **Step 4:** Complete the first draft of your Prevention Concordat Commitment action plan and send to your regional lead for feedback.
- **Step 5:** Prior to sending your final application, please use the checklist in Appendix C to ensure you have covered all our requirements
- **Step 6:** Once both you and your regional lead are satisfied, send your final submission to publicmentalhealth@dhsc.gov.uk.
- **Step 7:** The Prevention Concordat assessment panel date will be sent to you with an optional invite to attend. Panels are held every 2 months.
- **Step 8:** The panel will review your application and provide feedback to support your work going forward.
- **Step 9:** We will be in touch with detailed written feedback and formal confirmation of the result within 8 weeks.
- **Step 10:** We will then confirm your signatory status, provide a Prevention Concordat certificate and promote your success on the Gov.uk website.
- **Step 11:** We will follow-up progress after 12 months.

Section 2 - Registration form

Please note: If you are signing up on behalf of a partnership, e.g. health and wellbeing board, Integrated Care System or another type of health partnership¹, please provide name, email, telephone number and job title of all the lead officers. Add additional columns as needed.

Lead contact name	Angela Burns	
Lead contact details	Angela.burns@towerhamlets.gov.uk	
Job title of lead officer	Public Health Programme Manager, London Borough of Tower Hamlets (LBTH)	
Name of organisation / partnership	Tower Hamlets Partnership	
Region	North East London	
Post code	Multiple (E1, E3, E1W, E14)	
Weblink	https://www.towerhamlets.gov.uk/lgnl/community_and_living/community_plan/tower_hamlets_partnership.aspx	
Social media (e.g. Twitter)		
Please tell us more about your organisation's work (no more than 150 words)	The Tower Hamlets Partnership is a group of local institutions, businesses, community members, and residents who work together to improve Tower Hamlets. The Tower Hamlets Partnership works to improve the borough's economic, social, and environmental wellbeing. It focuses on making services better and achieving positive results for residents. The partnership takes a proactive approach, coordinating and facilitating improvements, and making sure work is connected where needed. Partners work together to find new ways to deliver better public services, lead on complex issues, and promote partnership working. We work with local individuals and organisations to find creative solutions and take advantage of opportunities in Tower Hamlets and beyond. Key members of the Partnership Executive Group (PEG) include senior officers from public, VCS, and private sector organisations across Tower Hamlets.	
Please list any key partners you are working with including a lead contact name and email.	Abidah Kamali, Senior Strategy and Policy Officer, LBTH	

¹ For the purposes of the Prevention Concordat application, 'any other partnership' should include two or more eligible organisations eg: partnerships between two or more anchor institutions – this can include NHS partnerships and emergency services.

Section 3 – Action Plan template

The Prevention Concordat for Better Mental Health is based on <u>the five-domain framework for local action</u>. Please describe in bullet points what your partnership will be committing to over the **next 12 months (minimum)** using the form below. Actions should be evidence based and can be a continuation of an existing prevention and promotion plan or a new plan.

Please include links or attachments to all relevant documents as part of your application e.g., needs assessments, strategies, plans.

The application form is designed to capture your <u>current and future</u> commitments.

You may list any relevant achievements in Section 3. Please note that this section is optional and will not contribute towards the application assessment. If you would like to showcase your achievements to a wider audience, please fill out the case study template (provided within your application pack).

Please look at our list of prompts and resources for domains 1-5 contained in Appendix B to help guide your application. You may also find it useful to look at example plans and case studies when considering how to frame your commitments. These are available on request from publicmentalhealth@dhsc.gov.uk.

Domain 1: Effective use of data and intelligence.

Demonstrate a clear understanding of the key mental health issues affecting local communities, and which interventions should be prioritised to best meet local needs. Tell us about your plan for a needs assessment or provide a link to the document if completed.

Prompts for action planning:	Proposed actions over the next 18 months	Lead	Timeframe
 Assess mental health and wellbeing needs including risk and protective factors for prevention/promotion 	Undertake a collaborative community asset mapping exercise involving identification of opportunities to participate in mental health prevention and promotion activities with input from stakeholders across the Tower Hamlets Partnership Executive Group	Malachi Howe, Community Navigator, LBTH Public Health	April 2024
Analyse quantitative as well as qualitative dataMap assets	Develop and ensure application of an Adult mental health needs assessment to inform strategic planning and commissioning	Angela Burns, Public Health Programme Manager, LBTH Public Health	April-July 2024
Take into account the disproportionate impact of COVID	Develop and ensure application of a needs assessment about healthy early years including mental wellbeing, attachment, and adverse childhood experiences	Bridget McGlinchy, Public Health Officer (Maternity and Early Years), LBTH	2024-2025
 Identify priority groups, gaps in provision and the scale of need 	Develop and ensure application of a needs assessment about mental health and emotional wellbeing during childhood and adolescence	New Public Health Programme Manager, CYP Mental Health, LBTH	2024-2025

Domain 2: Partnership and alignment.

Tell us how local organisations and populations will be working together across sectors to align plans and undertake joint or complementary programmes of work.

Prompts for action planning:	Proposed actions over the next 18 months	Lead	Timeframe
	Collaboration on development of new Adult Mental Health Strategy and Action Plan with members of the Tower Hamlets Mental Health Partnership Board	 Carrie Kilpatrick? LBTH Public Health? Day Njovana, Borough Director, ELFT Dr Judith Littlejohns, GP Phil Warburton, Chair of VCS Alliance 	2024-2025
 Collaborate internally with teams working on the wider determinants Involve and co-produce with 	 Working together with the voluntary and community sector Involve and co-produce mental health and wellbeing interventions with member organisations of the Tower Hamlets Mental Health Voluntary and Community Sector Alliance Publicising and supporting VCS organisations that people can interact with to improve their wellbeing (e.g. advice services, employment, leisure activities etc) to ensure alignment, collaboration, and networking 	 Phil Warburton, Rethink Mental Illness Alison Robert, Partnerships Manager, Tower Hamlets Council of Voluntary Services (TH CVS) 	2024-2026
 experience of mental ill-health Agree the prioritisation of 'at risk' groups with partners to avoid widening inequalities Align with existing and future plans covering population mental health and wellbeing eg: Mental Health strategy, Borough plan, ICS strategy. 	 Working together with residents Organise involvement and co-production opportunities for people with lived experience of mental ill-health and diverse communities to be involved in strategy and service development, implementation and evaluation Involvement of residents living in most deprived neighbourhoods in community-centred approaches to health and wellbeing including participatory budgeting and co-creation of activities at a neighbourhood level (Communities Keeping Well) 	 Leigh Bell, People Participation Lead for Tower Hamlets, East London NHS Foundation Trust (ELFT) Mimi Coultas, Public Health Programme Manager, LBTH Jon Williams, Engagement and Community Communications Lead, NHS North East London Alison Robert, TH CVS 	2024-2026

Domain 3. Leadership and accountability

Set out your plans to ensure that a wide range of organisations are involved in better mental health and are held to account for jointly agreed actions, with clear leadership and direction.

Prompts for action	Proposed actions over the next 18 months	Lead	Timeframe
planning:			
 Briefly describe how senior leaders will ensure clear leadership/vision for prevention of poor mental health and promotion of good mental health across 	Senior leader members of the Partnership Executive Group will strengthen and align their organisational approaches and plans for preventing poor mental health and promoting good mental health and wellbeing	Abidah Kamali, Senior Strategy and Policy Officer, LBTH	2024-2026
 the partnership e.g. through Board papers, strategies, plans etc. Describe local governance and reporting arrangements for the Concordat 	Report on mental health prevention and promotion via and the Partnership Executive Group, Health and Wellbeing Board and DHSC	Angela Burns, Public Health Programme Manager, LBTH	December 2024
 commitment. List any senior mental health and wellbeing champions 	Recruit and provide training/tools/support for Mental Health Champions among senior leaders across Tower Hamlets Partnership Executive Group member organisations	Abidah Kamali, Senior Strategy & Policy Officer, LBTH	May-July 2024

Domain 4(a): Translate need into deliverable commitments

Set out your plans to ensure that high-level strategic aims to promote better mental health are translated into actions and integrated into operational plans across a range of organisations and across the life course.

Prompts for action planning:	Proposed actions over the next 18 months	Lead	Timeframe
Plan universal interventions (population wide) Target interventions (to those at greater risk including those with existing mental health problems) Take action across the lifecourse and in key settings eg: schools and workplaces	 Workforce development Provide learning and development opportunities for people working in all Tower Hamlets Partnership organisations (training, knowledge exchange) about mental health prevention and promotion topics (e.g., trauma-informed approaches, suicide prevention. mental health first aid and awareness) Organisations will enable participation in L&D opportunities through offering staff protected time and ensuring senior leader/management support 	Ekramul Hoque, Training Hub Lead, Tower Hamlets CEPN	2024-2026
Secure resources for planned interventions	Administer Mayor's community grants programme and small grants programme funded projects that address building blocks of mental health and wellbeing	Craig Morbey, Strategy and Policy Lead, Chief Executive Office, LBTH	2024-2027
	Administer community grant programme with a focus on promoting wellbeing, biodiversity, skills, and education	Emma Warden and Sophie Goddard, Canary Wharf Group	2024-2026
	Provide training, resources and activities to support improvements to prevention of poor mental health / workplace related stress according to Health and Safety Executive guidelines and the Mayor of London's Good Work Standard.	Viknesh Akilan, Public Health Programme Officer, LBTH Public Health	2024-2025
	Establish and maintain support offers for frontline staff across Tower Hamlets Partnership Executive Group member organisations	Tower Hamlets Partnership Executive Group representatives	2024-2026
	Establish and support a network of up to 60 Health and wellbeing champions to communicate with their wider communities about key messages, including taking care of mental health and wellbeing.	Agnes Gautier, Senior Policy Officer, Public Health, LBTH	2024-2026
	Develop and disseminate communications content about taking care of mental health and wellbeing including local services and wellbeing activities, with involvement from diverse people across the borough.	 Angela Burns, Public Health Programme Manager, LBTH Jessica Prakash, Recovery College Manager, ELFT 	2024-2025

Coordination and delivery of Tower Hamlets suicide prevention action plan via the borough steering group	Angela Burns, Public Health Programme Manager, LBTH Public Health	2024-2026
Deliver mental health promotion and support in schools (Mental Health Support Teams, Healthy Lives resources and lessons)	 Public Health Programme Manager (CYP Mental Health), LBTH Sultana Begum, Healthy Lives, LBTH Dee Bleach, Owen Oregan, Danny Lye - Full Headteacher Consultative 	
 Increase access to preventative interventions and peer support for perinatal mental health and parent-infant relationships by capacity building and funding the VCS as delivery partner. Targeted engagement and support for those least likely to access perinatal mental health/parent-infant relationship support such as fathers/partners and marginalised groups such as refugee and asylum seeking families. Trauma-informed practice - Workforce development in children's social care, children and family centres and health visiting. 	Georgia Ramirez, Public Health Programme Lead (Maternity and Early Years), LBTH Public Health	2024-2025
Tackle loneliness and social isolation through communications, training, and delivery tailored and accessible activities that promote social connection	Agnes Gautier, Senior Policy Officer, Public Health, LBTH	
 Promote resources, services and activities to students in higher education Deliver University Mental Health Charter framework to foster whole university approach to mental health Deliver tailored support for students regarding mental health and wellbeing, including responding to global events 	 Niall Morrissey, Queen Mary University London Viknesh Akilan, Public Health Officer, LBTH 	
Address mental health and wellbeing needs arising among staff and members of the public encountered in emergency services through provision of Mental Health First Aiders and awareness raising about trauma and stigma	Richard Tapp, Fire Borough Commander, London Fire Brigade	
Increase access to and quality of local community assets in the built environment that promote good mental health and wellbeing (parks and green spaces, leisure centres, play spaces and other outdoor spaces)	Katy Scammell, Associate Director of Public Health (Healthy Environments), LBTH	

Domain 4(b): Tackle inequalities

Set out your plans to ensure that tackling mental health inequalities is incorporated in all actions. This should include discrimination, racism and stigma, vulnerable groups and those at greater risk, with a focus on socio-economic disadvantages faced by local communities.

Prompts for action	Proposed actions over the next 18 months	Lead	Timeframe
planning:			
Take action on the social determinants of mental health to address health inequalities including mental health in all policy (eg: employment, education, housing/homelessness, poverty, debt)	Address inequalities in access and outcomes of mental health services experienced by ethnic groups, including programmes and services delivered by VCS Alliance members	 Phil Warburton, Rethink Mental Illness Brenda Scotland, Public Health Programme Manager, LBTH Public Health Day Njovana, Borough Director, ELFT 	2024-2026
 Identify what steps you are taking to address discrimination, racism and exclusion faced by particular local communities. Address mental health stigma 	Engagement with and via different faith communities about mental health and wellbeing and how to get support Build capacity among local professionals about how to prevent and	 Jaber Khan, Corporate Strategy, LBTH Sufia Alam, Tower Hamlets Interfaith Forum, East London Mosque Ekramul Hoque, Tower Hamlets 	2024-2026
	address different forms of discrimination including and racism, ableism, homophobia, transphobia	 CEPN Claire McComb, elop Cyril Eshareturi, Public Health Programme Lead, LBTH 	
	Develop the Homelessness and Rough Sleeping Strategy and Action Plan to prevent and reduce homelessness and ensure people have access to support services including mental health	 Rafiqul Housing, Head of Housing Options, LBTH Andrea Baker, Tower Hamlets Housing Forum 	2024-2025
	Deliver tackling poverty and income maximisation interventions including benefits advice and personal health budgets	 Jo Ellis, Tower Hamlets Community Advice Network Laura Austin-Croft, ELFT 	2024-2025
	Deliver tailored and trauma-informed employment support options, including for people living with and/or at risk of mental illness	 Juli Browne, LBTH Supported Employment Umme Begum, DWP Job Centre Plus 	2024-2026

Build capacity for mental health services, to improve access and quality of delivery for disabled people	Sue Denning, Public Health Programme Manager, LBTH	2024-2025
Deliver community engagement activities targeting people living with long- term health conditions and older people to increase access to support with common mental illnesses	Khudaija Ismail, Senior Community Engagement Worker, Tower Hamlets Talking Therapies, ELFT	2024-2025
 Develop capacity and provision of trauma-informed support for people in touch with the criminal justice system, including victims of violence Implement activities to prevent and mitigate the impact of experience of violence 	 Michael Lewis, Metropolitan Police Service Menara Ahmed, Senior VAWG and Hate Crime Manager, LBTH 	2024-2026

Domain 5. Defining success outcomes

Set out your plans to measure outcomes for preventing mental ill-health and promoting good mental health, selecting those measures which would be most relevant to local communities.

Prompts for action	Proposed actions over the next 18 months	Lead	Timeframe
planning:			
 Understand the impacts you are looking to measure List your agreed outcomes and how you will measure and monitor them – ensure they are SMART (specific, measurable, achievable, realistic, timed Ensure regular reporting 	Develop and apply a shared outcomes framework for mental health prevention and promotion activities in collaboration with by members of the Tower Hamlets Partnership Executive Group and the Mental Health Partnership Board (as part of the Adult Mental Health Strategy), taking into account the full life course and diverse cultural perspectives of mental health and wellbeing	Angela Burns, Public Health Programme Manager, LBTH	December 2024
 Consider using a logic model or theory of change to link activity to outcomes Consider use of wellbeing 	Provide tools, resources and support for measuring mental health and wellbeing outcomes for organisations delivering mental health prevention and promotion interventions	Angela Burns, Public Health Programme Manager, LBTH	2024-2025
metrics. Commission independent evaluation if possible and where evidence is weak.	Establish and disseminate annual reporting by Tower Hamlets Partnership Executive Group members re: mental health prevention and promotion outcomes	Abidah Kamali, Senior Strategy & Policy Officer, LBTH	April 2024- March 2026

Section 5 - Senior leadership/CEO sign off

Please let us know if you would like to be contacted to provide short statements on your progress to use in communication pieces, such as bulletins, social media, and case studies etc.

Is your organisation/ partnership happy to provide key impact headlines or quotes when contacted related to your Prevention Concordat Commitment?		
Yes □ No □		
The purpose of this informa share good practice.	tion is from promotion purposes, to support us to inspire others and	
Upload Senior leader/CEO signature and organisation logo.		
If you are signing up on behalf of a partnership, please include signatures and logos from all the organisations		

Prior to submitting your final application, please review and complete the checklist in Appendix C.

Appendix A: Prevention Concordat Consensus Statement

Prevention Concordat Statement

"Strengthening protective factors and reducing risk factors sit at the heart of our commitment to promoting good mental health. COVID-19 has highlighted long-standing social and economic inequalities. There is evidence that protective and risk factors for mental health are unequally distributed across the country, in our communities and for those with existing mental health conditions.

We are committed to reducing mental health inequalities by taking action to address the following factors:

Protective factors - maternal and infant mental health, early years support, family and parenting support, connecting with others and forming good relationships, good education, stable, secure good quality and affordable housing, good quality work, a healthy standard of living, accessible safe and green outdoor space, arts and cultural activities, community cohesion.

Risk factors - poverty, socio-economic inequalities, child neglect and abuse, unemployment, poor quality work, debt, drug and alcohol misuse, loneliness, homelessness, violence, discrimination.

This is an opportunity to build back better to create a fairer society, working with our voluntary and community partners, the health and social care sector, emergency services, local and national stakeholders. Signing the Concordat means becoming part of a community of practice committed to taking evidence based preventive and promotional action to support the mental health of the whole population, those at greater risk of poor mental health, and those receiving treatment. Keeping people mentally well is as important as providing early help, and many interventions will also result in social and economic benefits, even in the short term.

As signatories, we will work as a whole system and across organisational boundaries. We commit to supporting place-based population mental health through co-ordination of partnerships at Integrated Care System, local authority and neighbourhood levels. We will do this using needs assessment in partnership with local stakeholders, communities, people with lived experience and carers, all of whom know what matters most. As system leaders, we will also use employment and procurement levers to improve population mental health and wellbeing.

We believe that the transformation of mental health services set out in the NHS Long Term Plan will be supported through strong prevention and early intervention, as we know that evidence-based prevention and promotion interventions reduce demand on the mental health system and support recovery. The inter-relationship between good mental and physical health should also inform the delivery of physical health improvement. We will encourage local and national stakeholders to invest in promoting mental wellbeing, preventing mental health conditions and preventing suicide. This will reduce demand for services and create savings not just for the NHS and social care, but also for employers, education providers, emergency services and justice systems.

We will lead by example, taking action based on the best evidence. Where there is promising evidence, we are committed to building on this and to evaluating its efficacy. We will share our good practice and promote learning. We will regularly review and refresh our prevention approach and our action plan, giving an annual account of progress.

Appendix B: Action plan prompts and resources to support your application

Domain	Requirements – your action plan should show how you:	Relevant resources
1: Effective use of data and intelligence. Having a clear understanding of the key mental health issues affecting local communities, and which interventions should be prioritised to best meet local needs.	Have already undertaken or are planning a mental health needs assessment covering prevention and promotion Collect and analyse quantitative as well as qualitative data Map assets which can protect and promote mental health and wellbeing Take into account the disproportionate impact of Covid-19 on different groups	 Mental Wellbeing Joint Strategic Needs Assessment Toolkit Public Health England Meeting the need – what makes a good JSNA for mental health or dementia? Public Health England and Centre for Mental Health The Children and Young People's Mental Health and Wellbeing Fingertips tool, Child and Maternal Health Fingertips and Perinatal Mental Health fingertips profile No child left behind: understanding and quantifying vulnerability Conceptual framework for public mental health – National Institute for Health Research (NIHR) study identifying risk and protective factors PHE Mental Health and Wellbeing surveillance report (COVID-19) routinely updated. Key findings and Spotlight reports focusing on a range of population characteristics Health Equity Assessment Tool Public Health England English Indices of Multiple Deprivation 2019
	Set out priority groups, gaps in provision and the scale of need	
2: Partnership and alignment. Local organisations and populations working together across sectors to	Collaborate on needs assessment and planning with external organisations and leverage resources of the partnership (e.g. local employers, voluntary sector, NHS, local authorities, emergency services, universities)	 Community-centred public health: Taking a whole-system approach Community engagement: improving health and wellbeing and reducing health inequalities, NICE

Domain	Requirements – your action plan should show how you:	Relevant resources
align plans and undertake joint or complementary programmes of work.	Collaborate internally with relevant departments/directorates working on the determinants of mental health Involve and co-produce with diverse communities (e.g. Black Asian and minority ethnic groups, LGBT+, those with long-term health conditions or disability), including those lived experience of mental ill-health Discuss and agree your approach and the	Building resilience: how local partnerships are supporting children and young people's mental health and emotional wellbeing Local Government Association
	prioritisation of 'at risk' groups with partners to avoid widening inequalities	
3. (a) Translate need into deliverable commitments Ensuring that high-level strategic aims to promote better mental health are translated into actions and integrated into operational plans across a range of organisations and across the life course.	Plan on delivering both universal interventions (population wide) and targeted interventions (to those at greater risk including those with existing mental health problems) Take action across the life-course (e.g. children and young people, working age adults, older people)	 Better Mental Health for All Faculty of Public Health, Mental Health Foundation Commissioning Cost-Effective Services for Promotion of Mental Health and Wellbeing and Prevention of Mental Health London School of Economics Public mental health: Evidence, practice and
	Promote and protect good mental wellbeing in settings such as schools and workplaces, including your own staff's wellbeing Secure resources for planned interventions	 <u>commissioning</u> Royal Society of Public Health <u>Community interventions for improving adult mental</u> <u>health – mapping policy and practice in England</u> NIHR school of public mental health What Good Looks Like for Public Mental Health
	Secure resources for planned litter ventions	 Universal approaches to improving children and young people's mental health and wellbeing: a report of the findings of a special interest group No child left behind: understanding and quantifying vulnerability Local suicide prevention planning: a practical resource, Public Health England, 2020 Behavioural Science and Public Health Network - Real

Domain	Requirements – your action plan should show how you:	Relevant resources
		<u>World Public Mental Health</u> Podcast series identifying key interventions and evidence base relevant to COVID-19
3 (b) Tackle inequalities Ensuring that tackling mental health inequalities is incorporated in all actions. This should include discrimination, racism and stigma, vulnerable groups and those at greater risk, with a focus on socio-economic disadvantages faced by local communities.	Take action on the social determinants of mental health including mental health in all policy to address health inequalities (eg: employment, education, housing/homelessness, poverty, debt)	 Mental health for all? Centre for Mental Health report on tackling inequalities in mental health outcomes Tools to support 'Place-based approaches for reducing health inequalities' Public Health England Build Back Fairer the COVID-19 Marmot Review Institute of Health Equity Tackling social inequalities to reduce mental health problems Mental Health Foundation
	Identify what steps you are taking to address discrimination, racism and exclusion faced by particular local communities	Community-centred interventions for improving public mental health among adults from ethnic minority populations in the UK: a scoping review
	Address mental health stigma	<u>Time to Change – impact report</u> evaluation of the anti- stigma campaign
4. Defining success outcomes Having a clear understanding of how to measure outcomes in preventing mental ill-health and promoting good mental health, and which would be most relevant to local communities.	List your agreed outcomes and how you will measure and monitor them; consider using a logic model or theory of change. Put effective monitoring and evaluation plans in place with regular reporting – commission independent evaluation if possible.	Wellbeing measures and data What Works Centre for Wellbeing Introduction to wellbeing evaluation What Works Centre for Wellbeing

Domain	Requirements – your action plan should show how you:	Relevant resources
5. Leadership and accountability Ensuring that the wide range of organisations are involved in better mental health and are held to account for jointly agreed actions, with clear leadership and direction.	Describe how senior leaders will ensure clear leadership and direction for prevention of poor mental health and promotion of good mental health across the partnership e.g. through Board papers, strategies, plans etc.	 Our place: Local authorities and the public's mental health Centre for Mental Health Mental Health: How do you know your council is doing all it can to improve mental health? Local Government Association A public health model for mentally healthier Integrated Care Systems Centre for Mental Health
	Describe local governance and accountability arrangements for the Concordat commitment. Identify a local Mental Health and wellbeing	A councillor's workbook on supporting mentally healthier
	Champion	 <u>communities</u> Local Government Association <u>Mental health champions network</u> Centre for Mental Health

Appendix C: Prevention Concordat checklist

Prevention Concordat Application Checklist

Please use the checklist below to ensure you have completed the relevant steps before submitting your Prevention Concordat Commitment action plan to the OHID Public Mental Health national team on PublicMentalHealth@dhsc.gov.uk Please also copy the regional lead into the email so that they are aware that the application has been submitted.

Organisation Name: Action Comments **Action plan content** Have you provided information against each prompt in the action plan template? Is your action plan in a SMART format (specific, measurable, achievable, relevant, time-bound)? Does each action on your plan have a relevant named lead? Have you included links or attachments to all relevant documents referenced as part of your action plan e.g. needs assessment reports? Feedback and collaboration Have you discussed and received feedback on your action plan from your OHID Public Mental Health regional lead? Have you discussed and received feedback on your action plan from your relevant local partners? **Final steps** Is your OHID Public Mental Health regional lead satisfied with your final action plan? Are all relevant local partners satisfied with the final action plan?