Strategic Plan for Mental Health and Wellbeing

Isle of Man 2015 - 2020
Our mental health and wellbeing has a profound impact on our quality of life. It is just as important as our physical health and wellbeing, and yet people are far more reluctant to talk about and seek help for mental health problems.

This Plan aims to help change that. The first of its kind for the Isle of Man, the Plan takes a holistic approach to mental health and wellbeing and sets out the strategic vision for our Island’s vital mental health services. In doing so it supports one of the Government’s key priorities: protecting the vulnerable.

The Plan isn't about being reactive and how we provide care. It’s about being proactive and recognising that we need to put in place systems to help prevent mental ill-health wherever possible, in much the same way as we look to prevent heart disease and lung cancer.

Improving the mental health of the population isn’t just the responsibility of Government; everyone has a part to play. We must work in partnership and recognise that mental health and wellbeing is not just a health concern but a major social issue which requires a coordinated approach across all parts of the public, private and third sectors.

By working together I believe we can drive through change to provide effective services and, ultimately, enhance the health and wellbeing of the people of our Island.
I am delighted to introduce the Strategic Plan for Mental Health and Wellbeing 2015 – 2025. The Plan sets out the broad mental health and wellbeing needs for our Island and advocates a “whole person” approach to mental health and wellbeing. It also sets out the strategic vision for collective responsibility for mental health in the Isle of Man.

The Plan does not consider every issue in fine detail and is not purely about specialist provision, but aims to provide strategic direction, highlighting the challenges ahead and how they will be addressed within an integrated implementation plan.

The Plan is fundamental to unlocking the benefits of better mental health and wellbeing for all. This requires a collaborative approach recognising that improving mental health is everybody’s business.

We all recognise the importance of a healthy lifestyle but few of us take time to consider our mental health. A quarter of the population will experience mental health problems or illness at some point in their lives; this can have significant effect on numerous areas of a person’s life and those around them. Mental health issues need to be seen and valued alongside physical illness and the stigma prevalent in previous generations needs to be replaced with a culture of understanding, empathy and respect.

Social and health inequalities can be a cause of poor mental health. Evidence shows that deprived communities also have the poorest health and wellbeing. Good mental health and wellbeing is vital to a number of social and economic benefits such as physical health, relationships, education, work and productivity.

We have to address mental as well as physical health to improve public health; we can do this by working in partnership with the public, private and voluntary sectors to develop wide-ranging mental health provision on the Island. Improving mental health and wellbeing will support people to live healthy and fulfilling lives, supporting a healthier community where everyone is able to maximise their potential and be as independent as possible.
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This is the first broadly owned Mental Health and Wellbeing plan for the Isle of Man.

The Plan advocates a holistic approach to mental health and wellbeing and also sets out the strategic vision for the collective responsibility for mental health and wellbeing in the Isle of Man.

With a defined set of objectives that are all encompassing, flexible and purposeful, the Plan will balance particular pockets of need with addressing the overall mental health and wellbeing of the population.

**Definition of Mental Health**

‘Mental health is defined as a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her own community.’

**Definition of Wellbeing**

‘A positive state of mind and body, feeling safe and able to cope, with a sense of connection with people, communities and the wider environment.’
The main themes of the Strategic Plan for Mental Health and Wellbeing in the Isle of Man are:

• Recognising that improving mental health is everybody’s business.

• Promoting mental wellbeing and development for all and, where possible, preventing mental health problems developing.

• Raising the profile and awareness of mental health by:
  - Improving information on mental health and wellbeing.
  - Making mental health matters more widely known about in the community, in the workplace and in the home.
  - Increasing service user and carer involvement in decisions around their care.
  - Changing attitudes to mental health by tackling stigma and discrimination.

• Promoting joint working between statutory and non-statutory organisations, based on the recovery and enablement of service users, in order that they can live as fulfilled and independent a life as possible.

• Addressing the range of factors in people’s lives which can affect mental health and wellbeing

“*The Strategic Plan builds on the excellent work being done by many working in the field of mental health and wellbeing. The Plan is about building on and not demolishing the service, recognising the needs of the population and delivering interventions to meet those needs.*”

“*The Plan recognises the areas for development, such as the delivery of Step 1 and Step 2 services in the community and the requirement to focus resources into these new areas as a priority. Working in partnership with the Third Sector, especially community and voluntary groups is paramount in developing Step 1 and Step 2 mental health provision for the Island. These groups provide valuable services to our community and working in a collaborative setting will see them become a valid and mainstream part of the community mental health provision for the Isle of Man.*”
Strategic Plan for Mental Health and Wellbeing in the Isle of Man 2015 – 2025

**Strategic Themes**
- Recognising that improving mental health is everybody’s business.
- Promoting mental wellbeing and, where possible, preventing mental health problems developing.
- Promoting joint working with statutory and non-statutory organisations, based on the recovery and enablement of service users in order to live as fulfilled and independent a life as possible.
- Addressing the range of factors in people’s lives which can affect mental health and wellbeing.
- Raising the profile and awareness of mental health by:
  a. Improving information on mental health and wellbeing.
  b. Making mental health matters more widely known about in the community, in the workplace and in the home.
  c. Increasing service user and carer involvement in decisions around their care.
  d. Changing attitudes to mental health by tackling stigma and discrimination.

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**Partners**
- Isle of Man Government
- Private Organisations
- Third Sector including Voluntary, Community and Faith Groups

**Five Key Areas**
- a) Increasing the profile of mental health and wellbeing in existing and new policies and strategies across Government, private and third sectors
- b) Promoting better mental wellbeing and preventing mental ill health
- c) Establishing collaborative care and treatment across a ‘Stepped-Care Model’
- d) Commitment by all sectors to work together to improve mental health and wellbeing
- e) Ensuring that mental health and wellbeing information is recorded using recognised data standards and used appropriately
We want people in the Isle of Man to live healthy, fulfilling lives. We also want to support the development of a fairer community where everyone is able to make the most of themselves and be as independent as possible.

Improving mental health and mental wellbeing is part of this approach because it will contribute to:

- Addressing health and other inequalities
- Increasing levels of education, gaining qualifications and employment opportunities
- Tackling poverty, drug and alcohol misuse, and homelessness
- Reducing the number of people entering the Criminal Justice System

We also strive for parity by valuing mental health equally with physical health.

The overarching principle of the parity of movement is equality in access to care, improving the quality of care, and the way resources are allocated. If we stay true to the principle of treating each person with dignity and respect in our health care system, then we should make no distinction between illnesses of the mind and illnesses of other body systems.

**Definition of Parity**

Planning for integration – this requires movement away from mental health, physical health and social care ‘silos’; the consideration of mental health should be integral to all health and social care, at any point where someone with a mental or physical health problem comes into contact with a service.
2. What do we know about mental health and mental illness?

- Mental health issues are responsible for 22.8% of burden of disease; for comparison, the figure for cardiovascular disease is 16.2% and for cancer 15.9%. No other health condition matches mental ill health in the combined extent of prevalence, persistence and breadth of impact.

- A key reason for the size of impact is that mental health issues start early, with 50% of lifetime mental illness (excluding dementia) starting by age 14 and 75% starting by the mid-20s. Mental health issues start at an early age and can have lifetime consequences.

- Mental wellbeing is associated with a wide range of improved outcomes in health, education and employment, as well as reduced crime and anti-social behaviour.

- Improved mental wellbeing and reduced mental disorder are associated with better physical health and quality of life; longer life expectancy; reduced inequalities; healthier lifestyles and improved social functioning.

- Investment in the promotion of mental wellbeing, prevention of mental disorder and early treatment of mental disorder results in significant economic savings even in the short term (health, social care, criminal justice and other public sectors).

- 1 in 4 people will experience a mental health problem in any given year.

- 1 in 10 children between the ages of 5 and 16 have a mental health problem and many more have behavioural issues.

- Between 1 in 10 and 1 in 15 new mothers experience post-natal depression.

- 1 in 16 people over 65 and 1 in 6 over the age of 80 will be affected by dementia.

- 9 in 10 prisoners have a diagnosable mental health and/or substance misuse problem.

- People with severe mental illness are estimated to die an average 20 years earlier than the general population, largely due to physical health problems.
Facts and figures around UK mental health and mental illness include:

Wider Economic Costs of Mental Illness

In England, the wider economic cost of mental ill health has been estimated at £105 billion each year, of which £30 billion is work related. Assuming the same prevalence of mental illness in the Isle of Man to England, the pro-rata costs are shown in the table:

<table>
<thead>
<tr>
<th>Location</th>
<th>Population</th>
<th>Annual Cost £</th>
<th>Work Related Cost £</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>53,000,000</td>
<td>105,000,000,000.00</td>
<td>30,000,000,000.00</td>
</tr>
<tr>
<td>Isle of Man</td>
<td>84,500</td>
<td>167,405,660.38</td>
<td>47,830,188.68</td>
</tr>
</tbody>
</table>

This includes costs like:
- Health and social care
- Output losses because people are unable to work
- The impact on people’s lives.

Five Key Areas to Wellbeing

The Foresight Mental Capital and Wellbeing Project has drawn on research about how to improve mental wellbeing and recommends five simple actions that, if practised regularly, can improve mental wellbeing as shown in the diagram below:

An individual’s mental capital and mental wellbeing crucially affect their path through life. They are vitally important for the healthy functioning of families, communities and society. Together, they fundamentally affect behaviour, social cohesion, social inclusion and our prosperity. Mental capital is also closely linked to the social determinants of health.

Definition: Mental Capital

This encompasses a person's cognitive and emotional resources. It includes cognitive ability, how flexible and efficient they are at learning and 'emotional intelligence', such as social skills and resilience in the face of stress.
3. Where we are now?

The Isle of Man is facing tough economic times as a result of recession throughout the world and the changes in the VAT sharing agreement. The uncertain outlook may put people at an increased risk of mental health problems such as anxiety and depression. There is even more of an imperative to act, in order to build our collective resilience to manage through these tough times, so that we can emerge in a good or even better state.

We have a population of 85,000 and during a lifetime, every single person will experience either directly or indirectly, mental health issues. Some will manage without intervention, some will not. As previously mentioned 50% of lifetime mental health problems start by the age of 14 and between 25% to 50% of adult mental illness may be preventable through interventions in childhood and adolescence.

The general recording of mental health and wellbeing data in the Isle of Man is scarce and there is lots of anecdotal evidence we need to test. This is a priority area for action. However, waiting for relevant local data would impact on the momentum and focus we need in order to proceed with actions to improve mental health and wellbeing.

According to the Isle of Man Census 2011, the demographic profile of the population with regard to children, working age people and the retired are as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>Under 16 years</th>
<th>Working age</th>
<th>Retirement age and over</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>14,509</td>
<td>47,081</td>
<td>14,725</td>
</tr>
<tr>
<td>2006</td>
<td>14,571</td>
<td>49,485</td>
<td>16,002</td>
</tr>
<tr>
<td>2011</td>
<td>15,036</td>
<td>51,614</td>
<td>17,847</td>
</tr>
</tbody>
</table>

Percentage Change in Population by Census Date

- Under 16 years: +0.0% to +6.0%
- Working age: +2.0% to +14.0%
- Retirement age and over: +4.0% to +12.0%
All groups illustrated in the table show population growth compared to 2001 and 2006. However, the census report clearly shows there is an increase in the number of people who have reached retirement age compared to those who are under 16 years of age5. Planning future mental health and wellbeing service provision should reflect the needs of the changing demographic profile of the Isle of Man.

In Primary Care there is an increasing awareness of how frequently mental health issues have an important and often fundamental bearing on aspects of physical health. The liaison between physical health services and mental health needs to be better, more frequent and, with a mutual understanding of each other’s input. The Plan advocates the expansion of mental health provision in primary care and the community. A precursor to this is better working between the bodies already in place.
4. Drivers for change

Drivers for change:

• Increasing demand and expectation means the current service model is unsustainable.

• A significant amount of mental illness is largely preventable. Associated costs are set to double over the next 20 years unless action is taken, including:
  - Increasing the resilience of the population to prevent mental ill health and to prevent relapse.
  - Encourage personal, community and population responsibility to prevent and assist people with mental ill health.

• Despite significant advances in basic science related to mental health, fewer significant medical innovations in comparison to other medical specialities have emerged in the last 20 years, suggesting that changes in the focus and nature of service delivery offer the best chance of improving service capacity.

• There is already evidence that service reorganisation can help improve both outcomes and satisfaction for service users and carers.

• There is recognition of an increasing need for a more community-based therapeutic approach to the improvement of mental health; primarily through general practice, but also acknowledging the important contribution of social care organisations, families, churches and other charities, employers, educational carers and promoters of equality. Resources and innovation need increasingly to encompass all of these.

• As individuals, families and communities, there is a need to recognise responsibility for helping ourselves and each other. Mental health issues need to be seen and valued equally alongside physical illness. The stigma prevalent in previous generations and particularly in more traditional workplaces needs to be rejected and replaced with a culture of understanding and respect.

• There is increasing prevalence of clinical conditions such as eating disorders.

• Meeting the needs of the population with regard to drug (illegal, legal and prescribed) and alcohol misuse.

• Moving people on in recovery which requires a collaborative response to offer chances for change and challenge the attitudes about this patient group.

• Developing Step I and Step 2 services to target prevention and early intervention.

• Recognise the need for physical health screening within a pathway of care to improve physical and mental wellbeing.
5. Where do we want to be? – the next 10 years

Over the next 10 years we will move away from an approach which focuses predominantly on ‘diagnosis and treatment’ of mental illness and disorder, and develop a public mental health mode of provision. This will follow a ‘life-course’ approach; with emphasis on: parents/infants; children and young people; adults of working age and older people.

This model will involve:

i) Assessing the levels of mental ill health and wellbeing, risks and protective factors in the local population – including those in higher risk groups.

ii) Enabling delivery of the appropriate level of interventions to treat mental ill health early, prevent mental health issues and promote mental wellbeing.

iii) Ensuring that people at higher risk of mental health issues and poor mental wellbeing are appropriately prioritised in assessment and intervention delivery.

How are we going to get there?

To achieve these aims, this new public mental health way of working will require the engagement of Government, private and third sectors; with significant emphasis and importance placed on partnership and collaborative working.

A priority of this Plan is to modernise mental health provision for the Isle of Man by increasing the availability of primary and community based services. This involves a collaborative approach including the third sector. Increasing primary and community provision will support early intervention, community treatment, support and a reduction in the use of secondary care services.

Definition: Mental Disorder

This includes mental illness as well as personality disorder and alcohol and drug dependency.
Five Key Areas

The plan is focused around five key areas and supported by an Implementation Plan. This sets out the actions the Isle of Man Government and partner organisations will undertake to make the Plan’s vision a reality.

a) Increasing the profile of mental health and wellbeing in existing and new policies and strategies across Government, private and third sectors

b) Promoting better mental wellbeing and preventing mental ill health

c) Establishing collaborative care and treatment across a ‘Stepped-Care Model’ (see page 16).

d) Commitment by all sectors to work together to improve mental health and wellbeing

e) Ensuring that mental health and wellbeing information is recorded using recognised Data standards and used appropriately
Developing the five key areas

In developing the five key areas and outcomes we have used the following underlying principles:

The promotion of good mental health
• Improving mental wellbeing for the wider population and preventing mental health problems developing.
• Intervening early when people have mental health problems.
• Reducing the impact of mental illness and diagnoses such as dementia, severe personality disorder and co-existing conditions such as misuse of substances.

For all
• For children and young people, services will focus on the early detection of risk and the development of resilience and life skills.
• For people of working age and post retirement, services will focus on ensuring that they live as full and independent a life as possible.
• For older people, there is an emphasis on prevention and enablement, supporting people with dementia and their carers to live well in supportive communities and ensuring dignity in care.

A Focus on Recovery and Enablement
• Putting the individual, their families and carers at the centre of care and treatment and communicating hope.

The promotion of sustainable evidence-based approaches
• Driving up quality and safety based on national guidance, best practice and service improvement techniques.
• Measuring services from the perspective of the individual.

A Human Rights Approach
• Ensuring that equality and diversity issues are addressed.
• Tackling stigma and discrimination.

The Best use of Resources
• Promoting sustainable development and workforce development.

Parity
• No distinction between physical ill health and mental illness.

Five Key Areas to Wellbeing
• Improve mental wellbeing with five key actions - Connect, Be Active, Take Notice, Keep Learning and Give.
A key to the public mental health model is ensuring that all people have access to effective primary mental health care.

Whilst the Department of Health and Social Care has a significant leadership role to play in coordinating and enabling mental health and wellbeing provision for the Isle of Man, it also recognises the role and value of collaborative working. Established and new partnerships between Government, private and third sector organisations will generate commitment and resources to achieve the aims and strategic priorities of the Plan. Joint strategic needs assessment and commissioning will also be pivotal to success.

**Joint Strategic Needs Assessment**

The Joint Strategic Needs Assessment (JSNA) will provide a jointly shared and owned ‘picture’ of need on the Island. The JSNA will raise awareness of, and facilitate action in relation to mental health priorities across a wide range of local agencies. Ideally it will influence commissioning and help shape the resourcing of activities, projects and services to support and improve the mental health of the Island’s population.

**Commissioning**

Commissioning for population health and wellbeing means enabling local people to look after themselves, stay healthy and independent; to participate fully as active members of their community whilst emphasising interdependence; to choose and access easily the type of help they need, when they need it; to enjoy fulfilling relationships, family, friends and good social networks. Commissioning for population mental wellbeing will require:

i) Attention to the factors that build and strengthen individual and community resilience.

ii) Anticipation of the factors that make local communities and individuals stay healthy, independent and interdependent.

iii) Understanding local health inequalities, their social determinants and their implications and promoting social inclusion.

6. What needs to be done?
iv) Promoting public mental health through identifying opportunities across all services to actively promote holistic physical and mental wellbeing, coordinating the activities of different sectors including health and social care, education, housing, leisure, employers and the third sector.

v) Identifying actively, the groups or areas whose mental wellbeing may be at risk and, specifically giving them a voice to influence and access targeted interventions for physical and mental wellbeing.

vi) Enable universal access to information and low levels of community based support to enable people to manage the challenges of everyday living.

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**Stepped Care Model for Mental Health and Wellbeing**

The Stepped Care Model will be used to organise the provision of services and to help people with mental health problems, their families, carers and healthcare professionals to choose the most effective interventions. In stepped care, the least intensive intervention that is appropriate for a person is typically provided first, and people can step up or down the pathway according to changing needs and in response to treatment.

Commissioning Services using the stepped care model is likely to be more cost effective because people receive the least intensive intervention for their need. If a less intensive intervention is able to deliver the desired positive service-user outcome, this limits the burden of disease and costs associated with more intensive treatment.

Inspirational leadership and a well-trained, competent workforce in sufficient numbers across the stepped model of mental health and wellbeing are required. This will ensure a culture which is safe, therapeutic, respectful and empowering.
### Stepped Care for Mental Health and Well-being

Having the right support in the right place at the right time delivered by the right person

<table>
<thead>
<tr>
<th>Who is responsible for care?</th>
<th>What is the focus?</th>
<th>What do they do?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step 5</strong></td>
<td>Specialised In-patient care (e.g., Forensic, Eating Disorders)</td>
<td>Severe mental health problems presenting with complex high-risk need.</td>
</tr>
<tr>
<td><strong>Step 4</strong></td>
<td>In-patient care</td>
<td>Severe mental health problems / substance misuse, significant risk to self / others</td>
</tr>
<tr>
<td><strong>Step 3</strong></td>
<td>Community specialist mental health services, crisis teams and specialist drug and alcohol services.</td>
<td>Moderate to severe, enduring / recurrent mental health problems / substance misuse.</td>
</tr>
<tr>
<td><strong>Step 2</strong></td>
<td>Primary Care Team Targeted provision. Targeted provision from Third Sector.</td>
<td>Mild to moderate mental health problems / substance misuse.</td>
</tr>
<tr>
<td><strong>Step 1</strong></td>
<td>Universal Health Services including General Practitioner, Practice Nurse.</td>
<td>Recognition</td>
</tr>
<tr>
<td><strong>Step 0</strong></td>
<td>Individuals, family, local community, Public Health, Specialist in Mental Health Promotion.</td>
<td>Promotion of positive mental health and well-being / self-care.</td>
</tr>
</tbody>
</table>

Aim to step down as condition improves
a) Increasing the profile of mental health and wellbeing in existing and new polices and strategies across Government, private and third sectors.

<table>
<thead>
<tr>
<th>OUTCOMES</th>
<th>KEY ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>- A collective responsibility for the mental health of the population will be fostered.</td>
<td>- Generate political support for this strategy.</td>
</tr>
<tr>
<td>- There will be a raised awareness of mental health and wellbeing through better communication with all sectors.</td>
<td>- Agree a government-wide resourced plan to ensure new policies/strategies across government. Recognise and address mental wellbeing within them, where appropriate.</td>
</tr>
<tr>
<td>- Sustained improvement of the mental wellbeing of all sectors of the population.</td>
<td>- Agree a quality assurance framework to provide information on performance and to ensure the associated risks to delivery are being managed.</td>
</tr>
<tr>
<td>- Better informed sectors who communicate well with each other.</td>
<td>- Develop a framework for the delivery of publicity campaigns on mental health and wellbeing.</td>
</tr>
<tr>
<td>- A change of culture to reduce stigma and value recovery and maintenance of wellbeing.</td>
<td>- Identify all stakeholders and agencies with existing provision and potential for new and economically achievable resources.</td>
</tr>
<tr>
<td>- Emphasising to Government how fundamental this area is and how it impacts on other areas of the broader health economy.</td>
<td></td>
</tr>
</tbody>
</table>
b) Promoting better mental wellbeing and preventing mental ill health.

<table>
<thead>
<tr>
<th>OUTCOMES</th>
<th>KEY ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Physical and mental wellbeing of the Island’s population is improved, with people living longer and as independently as possible.</td>
<td>• Ensure that mental health and wellbeing is given equal priority with physical health in the development and delivery of policies, projects and services.</td>
</tr>
<tr>
<td>• Individuals, families and local communities have the information and support they need to maintain and improve their health and wellbeing.</td>
<td>• Promote mental health awareness.</td>
</tr>
<tr>
<td>• Individuals, families and local communities are more resilient and more able to cope with the stresses and pressures of everyday life.</td>
<td>• Improve the resilience of children, young people, adults, older adults and local communities.</td>
</tr>
<tr>
<td>• People with mental illness do not experience stigma or discrimination and achieve their potential.</td>
<td>• Reduce the levels of acute crisis including self-harm.</td>
</tr>
<tr>
<td></td>
<td>• Reduce the levels of suicide by developing a framework for suicide prevention.</td>
</tr>
<tr>
<td></td>
<td>• Ensure that there is planned and collaborative effort to sustainably reduce the stigma and discrimination experienced by people with mental illness.</td>
</tr>
</tbody>
</table>
c) Establishing collaborative care and treatment across a stepped-care model provision.

<table>
<thead>
<tr>
<th>OUTCOMES</th>
<th>KEY ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• People will feel more involved in decision making about their care and treatment and how it is delivered.</td>
<td>• Ensure service users feel listened to and are fully involved in decisions about their care and treatment.</td>
</tr>
<tr>
<td>• Families and carers will be actively involved in assessments for support in their caring roles.</td>
<td>• Develop independent mental health advocacy.</td>
</tr>
<tr>
<td>• The Island’s population will engage in the planning, delivery and maintaining mental health related service provision.</td>
<td>• Involve service users of all ages, plus their families and carers in service development.</td>
</tr>
<tr>
<td>• People of all ages will benefit from evidence based interventions, delivered as early as possible and improved access to psychological therapies.</td>
<td>• Ensure that at risk/vulnerable groups experience equitable access and are prioritised as appropriate.</td>
</tr>
<tr>
<td>• Service user experience will be improved, with safety, protection and dignity given high priority.</td>
<td>• Expand Primary and Community Care Mental Health Services.</td>
</tr>
<tr>
<td>• Quicker and reliable access to a range of support / therapy options.</td>
<td>• Improve access to, and provision of psychological therapies.</td>
</tr>
<tr>
<td>• Recognising and developing the work of, and links between the voluntary sectors, charities and Government.</td>
<td>• Ensure effective access for children and young people to mental health provision and ensure effective transition between adult and mental health services.</td>
</tr>
<tr>
<td>• Inspirational leadership and a well-trained, competent workforce in sufficient numbers across the stepped model of mental health and wellbeing will be available to ensure a culture which is safe, therapeutic, respectful and empowering.</td>
<td>• Ensure timely and appropriate interventions for people in the criminal justice system.</td>
</tr>
<tr>
<td>• Ensure that substance misuse co-occurring with mental health problems is managed effectively.</td>
<td></td>
</tr>
</tbody>
</table>
d) Commitment by all sectors to work together to improve mental health and wellbeing.

<table>
<thead>
<tr>
<th>OUTCOMES</th>
<th>KEY ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The population of the Island will experience sustained improvement to its mental health and wellbeing as a result of cross-government commitment to all sectors working collaboratively.</td>
<td>• Ensure that people with mental health problems have access to advice and support regarding, benefits, financial and housing matters.</td>
</tr>
<tr>
<td>• Staff across the wider government, third sector and private sector workforce will recognise and respond to signs and symptoms of mental illness.</td>
<td>• Consider the impact of mental health on housing policy.</td>
</tr>
<tr>
<td></td>
<td>• Reduce homelessness and help people with mental health problems gain and maintain tenancies.</td>
</tr>
<tr>
<td></td>
<td>• Meet the needs of people with mental health problems who have additional learning needs.</td>
</tr>
<tr>
<td></td>
<td>• Improve the physical health of people with mental illness and the mental health of people with physical illness.</td>
</tr>
<tr>
<td></td>
<td>• Working with employers to promote employment opportunities for people with mental health problems.</td>
</tr>
</tbody>
</table>
e) Ensure that mental health and wellbeing information is recorded using recognised data standards and used appropriately.

<table>
<thead>
<tr>
<th>OUTCOMES</th>
<th>KEY ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Evidence-based, high quality services will be delivered through appropriate, cost effective investment in mental health.</td>
<td>• Identify what data has been collected and what data is required to shape resource development and service provision.</td>
</tr>
<tr>
<td></td>
<td>• Develop resources and services to meet mental health and wellbeing data collection needs of the Isle of Man.</td>
</tr>
</tbody>
</table>
The Way Forward

Experience across a range of health settings suggests that for many people, early access to services results in better outcomes. Therefore, it should be a key aspiration to facilitate access to, and delivery of, early interventions as close as possible to people's homes, promoting recovery and enabling individuals to self-manage their conditions.

Working collaboratively with community and secondary care, social care and the third sector, will ensure an integrated approach to mental health and wellbeing provision for service users and their carers.

How will we deliver change and improvement?

We will deliver change and improvement by working collaboratively with agencies across government, private sector and third sector, faith groups, communities and community groups in order to meet the challenges and achieve the aims and objectives of the Plan.

The Plan will demonstrate:

i) Mechanisms for engaging and establishing formal links with stakeholders across all sectors.

ii) A system of governance linked to wider local targets, for example, within Government, private sector and third sector policies and strategies.

iii) Resources drawn from a wide range of areas to deliver a holistic mental health service.

There are five clear work streams detailed in this Plan, as shown below:

Key work streams:

a) Increasing the profile of mental health and wellbeing in existing and new polices and strategies across Government, private and third sectors.

b) Promoting better mental wellbeing and preventing mental ill health.

c) Establishing collaborative care and treatment across a stepped-care model provision.

d) Commitment by all sectors to work together to improve mental health and wellbeing.

e) Ensure that mental health and wellbeing information is recorded using recognised data standards and used appropriately.
9. Conclusion

An implementation plan will be developed and sub-groups established to work on the key workstreams. These workstreams will be based on a life span approach and the groups led by appropriate representatives from a variety of settings in the public, private and third sectors who have experience and expertise in these areas.

The Implementation Plan Steering Group will meet initially, once every two months to establish the work plan and then twice a year to monitor progress of the workstreams. Outcomes and performance indicators will be agreed by the steering group on an annual basis. Interim progress reports will be submitted by the sub-group leads on a quarterly basis detailing progress in achieving the outcomes, aims and objectives of the Plan. The content of the quarterly progress reports will form the basis of the annual report. The lead of the steering group will report to the DHSC Senior Leadership Team and the annual report made available to the Chief Officers Group, COMIN and stakeholders in the public, private and third sectors.

Funding will be required to set-up steps one and two of the Stepped Care Model providing mental health provision in primary and community based settings. In the longer-term, this provision will reduce referrals to services at steps three and four of the model. For example, providing interventions for patients who have minor mental illness such as anxiety in a community setting, which is more appropriate to their need, may see a reduction in demand for secondary care services.

Providing a holistic approach to mental health and wellbeing is the way forward to meeting the needs of the population and for us all to be more responsible for our own and others mental health and wellbeing.
Appendices

Appendix 1

Supporting Documents

There are several strategies and plans that can influence and support positive mental health and wellbeing and maximise access to universal services for people with mental health issues.

A Strategy for the Future of Health Services in the Isle of Man - January 2011: Department of Health
The purpose of this document is to set a strategic direction for the health services in the Isle of Man over the period of 2010 to 2020.

Physical Activity Strategy 2011 – 2016: Isle of Man Government
This Strategy has been developed to encourage the Isle of Man population to become more active with a view to improving health and wellbeing. Physical activity can help improve mental wellbeing by improving mood, reducing anxiety and enhancing self-perceptions.

Plan for Tackling Childhood Overweight and Obesity in the Isle of Man - January 2013: Department of Health
This Plan presents the key issues and actions needed at a local level over the next 10-15 years and seeks to bring about a comprehensive, well-coordinated and sustained response to the complex problem of childhood obesity among Isle of Man 0 to 18 year olds.

The National Cancer Plan for the Isle of Man 2012-2022: Department of Health
This Plan seeks to ensure the efficient and effective use of resources to provide a quality-assured Cancer Service for the Isle of Man; this includes the Psycho-Oncology Service, which assists in addressing the psychological and emotional needs of patients, their families and carers.
Strategy for Children and Young People 2014 – 2019
Department of Education and Children - pending release.

Adult Learning Disability Service Strategy - DHSC 2014-2019
Department of Health and Social Care

The second Five Year Strategy for adults with a learning disability, which builds on previous documents; setting out the Department’s view of how people with a learning disability should be included and supported in the community in which they live.
Recovery

The recovery model aims to help people with mental health problems to look beyond mere survival and existence. It encourages them to move forward, set new goals and do things and develop relationships that give their lives meaning.

The recovery process:
1. Provides a holistic view of mental illness that focuses on the person, not just their symptoms
2. Believes recovery from severe mental illness is possible
3. Is a journey rather than a destination
4. Does not necessarily mean getting back to where you were before
5. Happens in ‘fits and starts’ and, like life, has many ups and downs, calls for optimism and commitment from all concerned
6. Is profoundly influenced by people’s expectations and attitudes
7. Requires a well organised system of support from family, friends or professionals
8. Requires services to embrace new and innovative ways of working.

Enablement

Enablement principles allow opportunities for early intervention with people who could self-manage with support. The emphasis is on self and lifestyle management through health improvement and health promotion. This also means supporting people who can use community services including culture and leisure services, lifelong learning opportunities and voluntary agencies’ services as appropriate.

Definition: Recovery

There is no single definition of the concept of recovery for people with mental health problems, but the guiding principle is hope.

“The belief that it is possible for someone to regain a meaningful life, despite serious mental illness”.

Definition of Enablement

Health and social care staff supporting people through promoting self-help and health improvement and by encouraging them to be as independent as possible.
References


Other documents for reference

- M.Knapp, D. McDaid, M. Parsonage (editors) ‘Mental health promotion and mental illness prevention: the economic case’ Personal Social Services Research Unit, London School of Economics and Political Science.


- Closing the Gap: Priorities for essential change in mental health Department of Health 2014.
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- **Department of Health and Social Care**
  - Public Health Directorate
  - Mental Health Service
  - Community Health Services
  - GP Lead for Mental Health
  - Emergency Department, Noble’s Hospital
  - Adult Social Care

- **Department of Home Affairs**
  - Prison Governor and Head of Probation

- **Third Sector**
  - Service Users Network

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The information in this booklet can be provided in large print or in audio format on request.