



## Wellbeing Board

<b>Date</b>	6 March 2023
<b>Report title</b>	Commonwealth Games Legacy Contingency Funds – Wellbeing Pillar Proposal
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<b>Report has been considered by</b>	Dr Julie Nugent, Executive Director of Economy, Skills and Communities, West Midlands Combined Authority <a href="mailto:Julie.Nugent@wmca.org.uk">Julie.Nugent@wmca.org.uk</a>

### Recommendation(s) for action or decision:

### Wellbeing Board is recommended to:

1. Note the overall process and funding allocations for each pillar in the Commonwealth Games Legacy Contingency Funding paper approved by the WMCA Board.
2. Advise and comment on the proposed process of business case approval as well as project proposals that will be funded through the Wellbeing portion of the Wellbeing and Sustainability pillar.
3. Approve the proposals that will be funded through the Wellbeing portion of the Wellbeing and Sustainability pillar.

## 1. Purpose

This paper provides proposals to be considered under the wellbeing pillar of the unspent contingency funding from the Birmingham 2022 Commonwealth Games (CWG) which DCMS has indicated will be allocated to WMCA to spend on a CWG Legacy Programme across 2023/24 and 2024/25.

## 2. Background

- 2.1 A paper was taken to the WMCA Board on 16 December 2022 which set out key decisions for the Board to take on the scoping of the Commonwealth Games (CWG) Legacy Fund – a £70m resource investment that WMCA will be granted by DCMS from 75% of the unallocated contingency funding in the CWG budget.
- 2.2 The paper proposed four thematic pillars that form the foundation of the CWG Legacy Fund Programme (and are based on the original B2022 Games Legacy Plan) along with proposed funding pools, which are:
  - Economy, trade, and tourism (£38.9m)
  - Culture and heritage (£4.07m)
  - Inclusive communities (£20.8m)
  - Wellbeing and sustainability (£4.07m)
- 2.3 At the WMCA Board meeting, Cllr Seccombe (Warwickshire) raised a point about a lack of proportionality in the proposed pillars and suggested allocated funding towards health and wellbeing outcomes. Members agreed that there was an expectation that all work streams will look to reduce health inequalities.
- 2.4 The WMCA's Health and Communities team is leading the Wellbeing portion of the Wellbeing and Sustainability pillar as well as working with the other workstrand SROs to embed work to address health inequalities.
- 2.5 £1.22m of the Wellbeing and Sustainability pillar is allocated towards Sustainability while the remaining £2.78m is for Wellbeing projects.
- 2.5 Sport England has agreed to consider match funding some of the workstreams above in line with the proposed long-term partnership Memorandum of Understanding with WMCA, which will have the potential to increase the Wellbeing portion as well influence other pillars. If they fully match fund the Wellbeing portion of this pillar, it could increase the funds available to £5.56m. We will return to the Wellbeing Board with a decision on allocation of the additional funds, using the same criteria as set out here.
- 2.6 This paper sets out the proposed areas of focus for the Wellbeing and Sustainability pillar and aspirations for other pillars, while also proposing the process for sign off on any decisions

## 3. Wellbeing (and Sustainability) Pillar

- 3.1 Given the relatively small funds available, we propose that the Wellbeing aspects of the Wellbeing and Sustainability pillar focus on high impact/low risk interventions that contribute to improving the public's health and wherever possible add value to local partner initiatives and seek match funding with partners to maximise the potential for impact and sustainability.

3.2 As such, the two broad WMCA bound themes proposed for this pillar are around Sport & Physical Activity, reflecting the legacy of the Commonwealth Games and Mental Health, implementing the recommendations of the Mental Health Commission:

### 3.2.1 Sport & Physical Activity (£1.5m)

Objective: To add value and capacity to local initiatives and improve public's health through tackling inequalities and physical inactivity levels, through:

- Extension of Commonwealth Active Communities (CAC): On the back of the most inclusive Commonwealth Games, we intend to invest in the WMCA, DCMS and Sport England co-designed 4 place-based CAC (see appendix A for more details) beyond their current 31 December 2023 Sport England funding. CAC's are working with communities to identify and address the barriers preventing people in targeted deprived areas to get active.
- Responsive to local need they will get more people active by implementing the WM Mental Health Commission sport & physical activity recommendations (to be finalised by Commission, but could include proposals for an ICS pilot of co-developing and systematically building physical activities into support for an agreed cohort of people waiting for MH treatment, etc.); getting more people walking as part of their behaviour change programme and delivering a co-ordinated Commonwealth Games annual celebration community sport events across WMCA region, embedding practice and longer-term sustainability.
- Working with Sport England, and given the extension of CACs, we will also extend the Sheffield Hallam University CAC evaluation contract (subject to findings from initial findings), which is designed to understand impact and behaviour change and increasing the volume of people, through stakeholder and community engagement.
- In response to evidence that more work is needed to build physical activity into the health care pathway; we will explore a pilot in partnership with our local ICS's on placing a Physical Activity champion within the primary care settings working alongside clinicians on a modified exercise referral scheme (ERS), this is based on evidence of success for [ERS](#), Social Prescribing and [All Our Health](#) principles. It will allow the connection of health and sport & physical activity systems by influencing practice.

### 3.2.2 Mental Health Commission Recommendations Implementation Programme (£1.12m)

Objective: To work with partners in delivering the recommendations of the WM Mental Health Commission

- The Mental Health Commission focused on six key thematic areas, which included amongst other things, children and young people, voluntary community sector and sport and physical activity, all in relation to mental health. While the Commission is meeting later this month to finalise recommendations and possible programme of work following the Commission, some potential projects have emerged for their consideration (see Appendix B). These include initiatives that reinforce the role of the VCFSE sector in supporting unmet mental health needs, initiatives that look to further address racial inequalities in mental health, initiatives which look to promote a mental health economic inclusion commitment with partners, among others under consideration.

- It is expected that the Commission will meet on 20<sup>th</sup> February to finalise its recommendations and propose a final programme of work to take forward for implementation of the recommendations. Most of the recommendations are linked to partner organisations in the West Midlands health and care system and the voluntary and community sector. We will work with those partners and accordingly allocate funds for the implementation of the work programme.

3.2.3 **Staffing & Admin Costs (£150k):** We will appoint programme support to be responsible for ensuring the local coordination, delivery and impact of these programmes. Most projects will be funded to 3<sup>rd</sup> parties in line with WMCA procurement requirements. Key roles will include managing risks, performance, impact and learning, not least ensuring spend by 31 March 2025. The administration costs will enable the Health and Communities team to draw on internal expertise such as communications, legal on relevant matters.

3.3 The above proposed allocation and projects are distributed based either on previously agreed allocation process (as the case with CACs, which are distributed across the 4 CAC sites within each of the 7 Local Authority areas of WMCA) or based on highest need of local populations (as is the plan with Mental Health Commission programmes). It is intended to achieve maximum devolution of funds to local partners and assets, spread across the WMCA region.

## 4 Other Pillars

This is also an opportunity to influence health outcomes through the other pillars to include initiatives that improve the health outcomes of our most vulnerable communities, either directly or indirectly:

4.2 **Sustainability** –to improve health and reducing inequalities by prioritising green grants that improve physical and mental wellbeing in areas of poor health e.g. sensory gardens, green gyms, walking routes. There is potential to negotiate some match funding from Sport England to activate the green grants.

4.3 **Economy, Trade and Tourism** – to provide a major sport events sport wellbeing legacy stream building on the Commonwealth Games, connecting trade and tourism with the sport and health system e.g. National Governing Bodies of Sport (NGB UK Athletics), Mental Health Trusts. Potential for match funding through NGBs e.g English Athletics (co-funded by Sport England).

4.4 **Inclusive Communities** - in line with the Race Equalities Taskforce and Health of the Region roundtable, prioritise inclusive and accessible projects which improve physical and mental wellbeing of vulnerable adults including those with long term health conditions, using wellbeing and sport for example as safe havens to address loneliness, bring communities together or improve mental wellbeing. Potential for some Sport England match funding.

4.5 **Culture and Heritage** - work with the Health and Communities team to embed policy and practice in improving mental and physical wellbeing through culture and heritage e.g. social prescribing arts and heritage. Invest in infrastructure projects in areas of poor health that evidence intended impact in reducing health inequalities.

## **5 Wellbeing Proposals Approval Process**

- 5.1 Early input into Wellbeing related proposal will be sought from the seven constituent Local Authority Directors of Public Health (DsPH) by February 15<sup>th</sup>, 2023.
- 5.2 Once we have DsPH input, the proposal is being presented to the WMCA Wellbeing Board (through this paper), to provide approval via email (to be submitted on February 15<sup>th</sup>, 2023).
- 5.3 The reason for email approval is the extraordinary circumstances in seeking approval before the next WMCA Board, where all pillars will be sent for final sign off. This meeting is being held on 17<sup>th</sup> of March, 2023. If we were to wait for sign off from the Wellbeing Board on the 6<sup>th</sup> of March, 2023 Board meeting, it would not leave enough time for it to be included in the papers for the WMCA Board. It was thus agreed with the Wellbeing Board Chair, Cllr Isobel Seccombe, that this paper be circulated via email for Board sign off.
- 5.4 Within the Wellbeing pillar, it is proposed that we seek approvals for the two programmes, Sport & Physical Activity and Mental Health, through the WMCA SAF Process. As such, business cases for each will be taken through this assurance process.
- 5.5 Once all approval has been received, we will develop project plans and all updates will be included in the regular deliverables update paper at each Wellbeing Board.

## **6. Financial Implications**

- 6.1 The Commonwealth Games Legacy Contingency Funding of c.£70m was approved for acceptance at WMCA Board in December 2022, with appropriate delegations and conditions on funding being secured.

This approval included the Wellbeing and sustainability funding of £4.07m, which has been split into the following interventions.

- Sport & Physical Activity (£1.5m)
- The Mental Health Commission (£1.12m)
- Staffing & Admin Costs (£0.15m)

There is a fourth intervention of Community Environment Fund (£1.2m), which is led by the Strategy, Integration and Net Zero, within WMCA.

## **7. Legal Implications**

- 7.1 No specific legal implications at this stage. Will review individual business cases when prepared and as they go through the internal CA governance and assurance process.

## **8. Equalities Implications**

- 8.1 Overall, the proposals highlighted within this report showcase a clear commitment to equality, with the potential to have a positive equality impact. The Wellbeing and Sustainability pillar of the CWG Legacy Fund Programme is underpinned by the aspiration to improve the lives of our residents. Emphasising the need to incorporate wellbeing and sustainability across the remaining three pillars also encourages further positive equality impact as wellbeing will be embedded across the Legacy Programme. The West Midlands is the most physically inactive region whilst simultaneously being the second most deprived

Combined Authority, indicating a correlation between them. Therefore, any workstreams that are linked to improving health outcomes will subsequently influence equality impact e.g. improved physical health will influence levels of obesity and obesity related disabilities which is likely to improve equitable outcomes. By being responsive to local need, there is an opportunity to target areas that are more likely to see a greater benefit from initiatives and thus reduce inequity.

The ambition to extend the lifetime of the CAC workstream as well as fund legacy projects on the MH Commission recommendations, will enable the ongoing positive work and outputs of these initiatives to continue, therefore influencing stronger commitment and behaviour change over the longer-term to embed lasting positive equality outcomes. It is difficult to understand the granular equality impact of these proposals at the current stage.

Any workstreams that are designed as a result of the funding obtained will be explored in-depth as part of a thorough Health and Equity Impact Assessment.

## **9. Inclusive Growth Implications**

- 9.1 The inclusive growth implications of this work are largely positive: The objectives support the creation of Inclusive Growth through a focus on creating a fairer, greener and healthier West Midlands co-designed with residents to understand the enablers and address the barriers to change. The fundamentals of inclusive growth are embodied by both of the main aspects of the proposals, around the Commonwealth Active Communities at place level and with the proposed areas of unmet need to be addressed by the recommendations of the Mental Health Commission. The most relevant fundamentals in this proposal are that of Equality (focusing on areas and population in most need and that have been underserved), Health and Wellbeing (focus on sport, physical activity and mental health), Connected Communities (place-level interventions that bring people together, reduce isolation and promote digital inclusion) as well as Power and Participation (co-developed solutions with community representatives that give greater voice to the seldom heard).

As the workstreams for the Pillars progress, application of the Inclusive Growth Framework is recommended to ensure that the outcomes included above are delivered through this work.

## **10. Geographical Area of Report's Implications**

- 10.1 The work of the Wellbeing Board applies to relevant activity across both Constituent and Non-constituent areas.

## **11. Other Implications**

None.

## **12. Schedule of Background Papers**

- 12.1 [Item 8 of WMCA Board Meeting held on 16 December, 2022 - Proposal for WMCA Acceptance of a Share of Unallocated Contingency Funding from Birmingham 2022 Commonwealth Games](#)

### **13. Appendices**

Appendix A – Overview of Commonwealth Active Communities

Appendix B – Emerging recommendations and potential projects WM Mental Health Commission

## Appendix A: Commonwealth Active Communities

1. In March 2021, the CWG Organising Committee launched the Games Legacy Plan setting out how the games will have a positive impact on jobs, skills, education, culture, physical activity and investment across the West Midlands. Physical activity is important as the WMCA geography continues to have the highest levels of physical inactivity in England (Sport England Active Lives Survey 2022)
2. The Plan included the CAC, a place based approach to harness the power of sport to support more inactive people to become active; reducing inequalities and improving physical, mental and community wellbeing. This is the cornerstone of the national sport and physical activity legacy.
3. The CAC's principles below has been informed by evidence based sport and physical activity place and community asset building approaches and were co-designed by Sport England, WMCA, OHID, Local Authorities and Sport England system partner, Active Partnerships.  
CAC principles:
  - a. Working in places with the largest health inequalities and areas of greatest levels of inactivity, where the impact can be greatest.
  - b. Ensuring an inclusive and accessible approach in the work it does.
  - c. Approaching the work in a collaborative style across sectors by co-producing methods and delivery with groups working through an asset-based community development model;
  - d. Having strong community engagement and being willing to distribute leadership within the community and create co-ownership.
  - e. Building approaches based on need, evidence, evaluation, and insight.
  - f. Building trusted partnerships.
  - g. Bringing partners that have a role to play in local wellbeing, working together to embed a sustainable approach to developing active communities.
  - h. Joining the work with their local strategic priorities complementing existing work and opportunities and bringing forward the chance for joint funding approaches.
  - i. Responding to the vision and the five key pillars of the CWG 2022.
4. As part of its CWG investment, Sport England has invested £3.1m into the CAC placed based work until 31 December 2023 based on local plans to reduce levels of inactivity and address inequalities through:
  - a. Physical spaces and spaces to be active in – from streets to open spaces, parks and waterways that connect communities.
  - b. Networks and organisations working together to support people to get active and environments where communities own what they want and need
  - c. People giving their time to support others.
  - d. Leaders across communities at all levels more closely working together.



- e. Policy and strategy changes to sustain approaches and enable further roll out in the future
5. Following assessment for which the WMCA was a member of a Peer Review Group; the following projects were awarded Sport England funded in Summer 2022:
- a. **Black Country Moving (BCM)** – a collaboration between the 4 Local Authorities and voluntary and community sector led by Active Black Country. This project builds on the community consultation and pilot funded by WMCA via its Sport England grant. The Sport England CAC funding has been used to fund 8 Community Connectors (two each LA) working with communities to understand and work towards reducing the barriers and finding the community solutions to get more people active, connecting people to activities and providing new. This includes an online activity finder. The Black Country Moving places are listed below:

<b>Dudley</b>	<b>Sandwell</b>	<b>Walsall</b>	<b>Wolverhampton</b>
Brierley Hill St Thomas  St James	Langley Soho & Victoria St Pauls	Birchills Leamore Walsall Town Centre  Willenhall South	Bilston East Bushbury S & Low Hill East Park

- b. **Coventry Moves**  
Managed by Coventry CC in partnership with its Physical Activity Network, Coventry Moves focuses on tackling inactivity in local communities by engaging underrepresented groups by delivering activity in local parks and green spaces; care homes and through street closures to get neighbourhoods together and be active.
  - c. **SAM! (Solihull Active Minds)**  
Led by Solihull MBC working with local partners, SAM is a community wellness programme using the CWG to help people be active and improve their mental wellbeing. It aims to improve knowledge on where to take part in physical activity; reducing physical inactivity in areas of deprivation; improved mental wellbeing; encouraging people to use places and spaces to get active developing pride in the local area.
  - d. **Birmingham**  
A partnership between Birmingham CC, The Active Wellbeing Society, Canals and Rivers Trust and Sport Birmingham who are the budget holders. Birmingham is targeting 5 areas Lozells, Sparkbrook, Balsall Heath East, Alum Rock, Castle Vale and Heartlands, creating a city wide “Active Birmingham” digital activity/way finder and getting more people active through social prescribing, creating active environments: volunteering and getting more children and young people active.
6. Sport England has contracted Sheffield Hallam University to lead the evaluation on the CAC impact and learning, with a strong focus on the transformational change and system maturity needed to create the conditions for long term sustainable Physical activity opportunities. Sport England and WMCA is also co-funding the work to bring partners

together to share practice and explore how by working together we can ensure there is a long-lasting legacy. WMCA is aiming to invest in extending this work through the contingency.

7. The proposed WMCA investment intends to build on local practice and need what's work extending the CACs beyond December 2023, exploring how the CACs respond to the WM Mental Health Commission recommendations, digital activation, encouraging behaviour change in getting more people walking as well as working together on a region wide CWG anniversary celebration weekend in August 2023 and onwards.

## Appendix B – Mental Health Commission Emerging Programme of Work (DRAFT)

### Implementation projects

There is a potential £1.2m from the Commonwealth Games Legacy Funds which is available to support implementation projects arising from the work of the MH Commission. Matters to be taken into account are:

- a) Implementation project details should be co-developed with key partners, including a lead local authority and people with lived experience / potential beneficiaries (and / or their representatives, e.g. in the VCS);
- b) Where procurement activity is required to mobilise a project, consideration will be given to utilising a progressive social value in procurement approach;
- c) Projects will be time-limited – to end by 31<sup>st</sup> March 2025;
- d) Consideration will be given as to how the respective implementation project would ‘add value’ - building on what already exists or helping to fill a key gap in addressing MH inequalities or improving MH;
- e) In the context of the MH system needing to continue to change and evolve, consideration will be given to how a respective implementation project might support a fresh and effective approach, e.g. supporting innovation or helping a more joined up or integrated / multi-sector approach?
- f) Consideration would be given on how a respective implementation might support prevention or early help in respect of mental ill health;
- g) Consideration will be given to the respective proposed scale of impact.
- h) Prospects for sustainability or a potential exit strategy will also need careful consideration;

There are 7 indicative areas of project focus that have been identified, arising from topic discussions. There would potentially be an opportunity for a met local authority to each lead on a respective project area.

All implementation projects would be subject to evaluation processes, which should be co-developed with ‘experts by experience’ and / or potential beneficiaries.

## MH Commission Implementation Project ideas

### 1. Further exemplify a whole school or college approach to MH

**Description:** Co-produce and pilot a holistic, tiered mentally healthy school and / or college approach, which builds on and supplements existing arrangements (Linked to Topic 1)

#### Potential project elements could include:

- a) Annual identification of MH needs of pupils / students and other key data;
- b) Co-develop meaningful approaches to building MH into school / college curricula;
- c) Make paid for counselling (and equally effective alternative MH support) available to all students, with supervision support for practitioners;
- d) Training multiple school / college senior leaders as MH 'champions', with trauma informed supervision, plus create a community of interest to share learning and good practice;
- e) Implement a workplace wellbeing framework for school / college staff (e.g. Thrive at Work) plus including embedded supervision, plus staff training & development on MH and child development;
- f) MH support and skills development for family members and others in the 'ecosystem' of the child / young person;
- g) Taking a 'zero exclusion' approach – acknowledging that exclusions can often result from unrecognised & unmet MH needs and developing a supportive inclusion system;
- h) Integrate existing school / college MH arrangements and external arrangements (e.g. Mental Health Support Teams);
- i) Evaluate & develop a 'road map' of what good looks like for mentally healthy colleges and make proposals for 'mainstream' commissioning changes;

#### Potential partners:

- A local school or college;
- WMCA (ESC dept);
- NHS MH Trust;
- Local authority
- NHS England & Improvement;
- Citizens UK

#### Outcome & output areas:

- Improved pupil MH and wellbeing;
- Improved school / college staff MH and wellbeing;
- MH training for 3 senior college / school leads as 'MH champions'
- Establish a community of practice to support learning and knowledge exchanges;
- Others tbc

## MH Commission Implementation Project ideas

**2. Further strengthen the contribution in the West Midlands of physical activities (including sport) to good MH & wellbeing**

**Description:** Locality pilots of a multi-faceted approach to strengthening the contribution of physical activities to positive MH and wellbeing

### Potential project elements:

- a) ICS pilots across the region of co-developing and systematically building physical activities into support for an agreed cohort of people waiting for MH treatment – to include a diverse range of social prescribing opportunities offered via a diverse range of social prescribers
- b) ICS pilots across the region of co-developing and systematically building physical activities into agreed MH treatment pathways as a meaningful option in / contribution to MH treatment;
- c) Locality pilot to build MH capacity, skills & confidence amongst grassroots / community providers of sports and physical activities - supporting identification of early signs, basic advice, signposting to MH & wider support, etc;
- d) Targeted, co-developed locality pilot focusing on achieving 30 mins of activity per day working with an agreed population cohort, who are furthest away from this target, to identify and reducing key barriers to achieving the target;
- e) Explore rolling out a 'green doctors' pilot
- f) Targeted locality focus to maximise targeted opportunities for active travel;
- g) Evaluation of the various strands and proposals for revised approaches to 'mainstream' commissioning;

### Potential partners:

- a) Sport England
- b) ICS / MH Trust
- c) WMCA
- d) VCS orgs
- e) Local authority

### Outcome & output areas

- No. of care pathways refreshed;
- Other outcomes & outputs tba

## MH Commission Implementation Project ideas

### 3. Reinforce the role of voluntary, community and faith sector in meeting diverse, unmet MH needs

**Description:** Piloting an approach which both further enhances and harnesses the contribution of the voluntary, community & faith sector to reducing in MH inequalities (in a locality or with a population cohort with a protected characteristic – women & girls, racialised communities);

#### Potential project elements:

- a) Enable commissioner investment in the VCFSE sector, particularly to further develop a workforce of ‘experiential practitioners’ / ‘experts by experience’ in a VCS alliance or network of organisations to work with an agreed population cohort (locality or population group) to deliver amplified, innovative preventative work and early help to meet diverse, unmet MH needs through planned community hubs or key community venues;
- b) ICSs to create further joint learning opportunities / knowledge and skills development opportunities between statutory and VCS partners;
- c) Utilise a small grants / micro grants programme to support community innovation by small grassroots organisations, with proportionate, culturally intelligent evaluation approaches;
- d) Co-develop a capacity building programme for VCS orgs, specifically in relation infrastructure & governance support (e.g. active advice from larger organisations as part of corporate social responsibility or exploring the potential for a regional mental health VCS infrastructure organisation);

#### Potential partners:

- ICS / MH Trust
- Local authority;
- WMCA (SINZ and ESC Directorates);
- VCS orgs

#### Outcome / outputs

tba

## MH Commission Implementation Project ideas

### 4. Develop an 'Equally Well' initiative to further address racial inequalities in MH

**Description:** To pilot a co-developed initiative which further contributes to a systematic tackling of racial inequalities in MH

#### Potential project elements:

- a) Undertake provider alliance / consortium development work specifically for VCS organisations led by people from racialised communities to strengthen opportunities to be commissioned to deliver MH support and to provide opportunities for shared learning and knowledge exchanges;
- b) Develop a targeted programme to train further cohorts of MH practitioners from racialised communities, linked to more inclusive training curricula and linked to clear career pathway progression opportunities;
- c) Co-develop a capacity building programme for VCS orgs from racialised communities, specifically in relation infrastructure & governance support, potentially through the development of a VCS infrastructure organisation);
- d) Co-develop community MH awareness campaigns to tackle stigma;
- e) Co-develop and pilot a community trauma response to racial inequalities, with an agreed population cohort, involving community-led orgs;
- f) Develop a regional 'support & challenge' forum involving ICSs, convened by the WMCA, to review progress in the impact of initiatives to address racial inequalities in MH and also to share good practice and learning.

#### Potential partners:

- ICS / MH Trust
- Local authority;
- WMCA (SINZ and ESC Directorates);
- Race Equality Taskforce
- VCS orgs

#### Outcome & outputs

tba

## MH Commission Implementation Project ideas

<b>5. A regional MH economic inclusion strategy and plan for people with mental ill health</b>	<b>Description:</b> Recognising the strong relationship between MH and financial welfare (incl poverty), develop and pilot a multi-faceted economic inclusion approach for people with mental ill health	
<b>Potential project elements:</b> a) Co-develop and pursue an amplified, regional strategy and plan to deliver a real living wage across the region, building on good practice locally and initially targeting larger public and private sector organisations as early implementers; b) Co-develop and implement an amplified regional strategy and plan to systematically deliver social value in procurement benefits to local people and local organisations, initially focusing on larger public and private sector organisations as early implementers.	<b>Potential partners:</b> <ul style="list-style-type: none"> <li>• Local authority;</li> <li>• WMCA (ESC, SINZ, Depts);</li> <li>• Living Wage Foundation</li> <li>• TUC / ACAS</li> <li>• Employers</li> <li>• ICS / MH Trust</li> </ul>	<b>Outcomes &amp; outputs:</b> tbc

## MH Commission Implementation Project ideas

<b>6. A regional adoption of a ‘mental health in all policies’ approach</b>	<b>Description:</b> Co-developing and implementing a ‘mental health in all policies’ approach that requires formal consideration of the mental health implications of key system decisions	
<b>Potential project elements:</b> a) Co-develop and implement a ‘mental health in all policies’ approach and framework for the formal consideration of the mental health implications of all key decisions;	<b>Potential partners:</b> <ul style="list-style-type: none"> <li>• WMCA (ESC, SINZ, Housing &amp; Regeneration Directorates);</li> <li>• ICSs</li> </ul>	<b>Outcomes &amp; outputs:</b> <ul style="list-style-type: none"> <li>• Approach developed;</li> <li>• No. of adoptees;</li> </ul>



## MH Commission Implementation Project ideas

### 7. Addressing MH inequalities for children & young people with SEND by improving EHCP processes

**Description:** Building on local work, co-develop and implement a streamlined process for education, health and care plans to help improve mental health outcomes for children and young people with SEND

#### Potential project elements:

- a) Co-develop a good practice approach to responding to MH needs within Education, Health and Care Plan processes;
- b) Pilot the 'good practice' approach;

#### Potential partners:

- Local authority;
- Experts by experience
- ICSs

#### Outputs & outcomes

- Improved timeliness of MH inputs;
- Improved experience;
- Others tbc