



**HEALTH AND WELLBEING BOARD:**

**4<sup>TH</sup> DECEMBER 2025**

**REPORT OF THE DIRECTOR OF PUBLIC HEALTH**  
**MENTAL HEALTH PLACE-BASED SUB-GROUP PROGRESS**  
**UPDATE**

**Purpose of report**

1. The purpose of this report is to enable the Mental Health Place-based subgroup to update the Health and Wellbeing Board on progress in delivering against the Joint Local Health and Wellbeing Strategy (JLHWS) priorities.

**Recommendation**

2. The Board is asked to note the progress that has been made over the past 12 months.
3. The Board is asked to support the work of the group including helping to overcome barriers to data sharing, to help facilitate progress in some areas of work.

**Policy Framework and Previous Decision**

4. The Leicestershire HWB Mental Health Place-based group was established in February 2023. As well as being a HWB sub-group, the group also acts as the place-based group for the Leicester, Leicestershire and Rutland (LLR) Mental Health Collaborative.
5. The Mental Health Place-based group is now well established, with representation from a range of partners including Leicestershire County Council, NHS Leicestershire Partnership Trust (LPT), Integrated Care Board (ICB), the voluntary and community sector, and the district and borough councils.

## **Background**

6. Good mental health and wellbeing is an important part of our overall health, and the impacts of poor mental health and wellbeing are wide reaching. Mental health impacts on our emotional, psychological, and social well-being, and affects how people think, feel, and act. It also helps determine how individuals handle stress, relate to others, and make choices.
7. The priority areas of the Mental Health Place-based group are largely driven by the JLHWS commitments, along with the Mental Health Joint Strategic Needs Assessments (JSNAs) for both Children and Young People (CYP), and adults.
8. A delivery plan has been developed around the priorities for the group based on a life course approach. Key elements of the plan include:
  - Development of an all-age **Mental Health Promotion plan** around prevention. This work, led by public health, is underway with a programme of work, including a campaign around the 'Five Ways to Wellbeing' due to be delivered through 2026.
  - **Children and Young People (CYP)** – Supporting and enhancing the CYP offer around mental health and wellbeing including the transition from child to adult services. This work is ongoing with partners working together to help understand and promote access and awareness of the different levels of support available for CYP.
  - **Health Inequalities - Serious Mental Illness (SMI)** – improving health check uptake and follow up support for people with SMI. This work is led by the ICB, with partners contributing to elements of this including breast cancer uptake screening; and smoking cessation uptake programmes of work (as outlined below). The proportion of county patients, on GP SMI registers, receiving all six health checks is around 67%, this is statistically significantly better than the national average (60%).
  - **Health Inequalities - Serious Mental Illness (SMI)** – Improving breast cancer screening uptake in people with SMI. Initiated as a priority in county, this has now been adopted as a health inequalities priority across LLR by the Mental Health Collaborative. A system wide programme of work based on the use of the Health Equity Audit tool is underway (further details below).
  - **Suicide Prevention** – supporting the work of the LLR Suicide Audit and Prevention Group (SAPG) and strategy re-fresh. The suicide prevention strategy re-fresh is now complete, and implementation is now underway.

An example of action related to suicide prevention is detailed below in MHFP and clubs.

- **Dementia** – raising awareness of modifiable risk factors and role of lifestyle in relation to Dementia, prevention, and improving dementia diagnosis rates. Implementation of a local plan around Dementia is underway in line with the LLR Dementia strategy, led by local authority Adult & Communities colleagues. Dementia diagnosis rates for the county remain a challenge despite ongoing efforts to address this – though rates are not significantly different to the England average.

A campaign to raise awareness of modifiable risk factors for Dementia is planned for 2026, led by public health.

Further detail related to progress in relation to dementia priorities is included in a separate report to the Board for this meeting.

- **Wider Determinants** - addressing the impacts of the wider determinants on mental health and wellbeing; which include employment, housing and gambling harms. District council colleagues are leading on a piece of work, to explore opportunities that will improve the availability of mental health support for those who are affected by homelessness. This also includes those living in temporary accommodation as part of the wider work to target efforts around those with Severe and Multiple Disadvantage (SMD).

### **Progress made in the last 12 months**

9. There has been considerable activity over the last 12 months that has contributed to the delivery of the MH Place-based priorities. Below are a few key highlights of the areas where significant progress has been made:

#### **Supporting People with SMI: Stop Smoking Service**

10. Highlighted in both the Leicestershire County Council Adults MH and Health Inequalities JSNA, it is well evidenced that people with Serious Mental Illness (SMI) often die prematurely compared to those who do not have SMI.
11. Smoking prevalence remains disproportionately high among people with SMI, contributing to poor health outcomes and a 15–20-year shorter life expectancy compared to the general population. Locally, referrals into the QuitReady stop smoking service were historically low, with fragmented engagement from mental health professionals and inconsistent pathways into support.
12. To address this inequality a programme of work has been implemented to develop a more visible, appropriate and accessible stop smoking offer for people with SMI across Leicestershire.

13. Key to planning and implementing change to the service has been utilising improved service-level data capture to monitor referrals, engagement, and quit outcomes specifically for people with SMI. The latter has included integrating SMI indicators into QuitReady's data systems to enable better tracking of uptake and outcomes.
14. This has resulted in the following:
  - Strengthening referral pathways through direct engagement with Leicestershire Partnership NHS Trust (LPT) and community providers.
  - Developing a clear process for referrals during SMI Health Checks, supported by secure sharing of patient data.
  - Upskilling QuitReady advisors through training in trauma-informed care and mental health awareness.
  - Improving awareness and confidence of Community Mental Health Facilitators and other frontline staff through Brief Intervention training and information-sharing sessions.
  - Embedding standardised, psychologically informed care planning for SMI clients, including collaborative working with Community Psychiatric Nurses (CPNs).
  - Improving communications to challenge myths, reduce stigma, and make Quit Ready's offer more accessible and inclusive.
  - As a result of this approach, early indications are that service uptake amongst people with SMI is already improving.

### **Supporting People with SMI: Breast Cancer Screening**

15. This is now an LLR system-wide piece of work that was agreed as a priority via the LLR mental health collaborative. A Health Equity Audit is underway using the Health Equity Assessment Tool (HEAT), this process has enabled the identification of key barriers to breast cancer screening among individuals with SMI. This has highlighted four thematic areas for action these are: people-related, system issues, service-related, and wider environmental factors. A targeted plan has been developed to address these barriers and promote effective facilitators for breast screening.
16. Recent achievements include increased awareness of SMI across the integrated care system, enhanced promotion of reasonable adjustments such as the Equality Access Clinic (EAC) and an improved understanding of the local breast screening pathway. The Leicestershire Partnership NHS Trust's mental health directorate has updated its Standard Operating Procedure to include an addendum that will ensure a minimum offer for individuals with SMI to participate in the screening programme. Additionally, engagement with lived experience and peer support has been strengthened, resulting in meaningful improvements in service delivery and accessibility.

## **Suicide Prevention**

17. The completed refresh of the LLR Suicide Prevention strategy identified five priority areas including:
  - i) Suicide Bereavement
  - ii) High Risk Groups/Locations
  - iii) Children and Young People
  - iv) Self-harm
  - v) Leadership
18. Under the umbrella of the LLR Suicide Audit Prevention Group, actions are now being developed, agreed and implemented in line with priority areas.

## **Mental Health Friendly Places/Clubs Programme**

19. The Mental Health Friendly Places (MHFP) initiative is a partnership project that is led by Leicestershire County Council and Leicester City Council. A MHFP is a public facing organisation that has received training resources and support to confidently navigate conversations around low-level mental health and wellbeing. Upon completing the free training and becoming a MHFP, each organisation will be able to recognise signs and symptoms of poor mental health; ask appropriate questions, listen effectively and signpost to local mental health services to ultimately prevent people from reaching crisis point. Launched in May 2024, it forms part of the wider suicide prevention work. The aim of the MHFP is to support and deliver community-based prevention work throughout LLR. To date there are 77 MHFPs in the County.
20. Due to the success of the MHFP, a pilot project was developed with the Leicestershire and Rutland County FA aimed at supporting men's mental health by delivering football sessions, branded "My Space, My Game". A total of 5 local football clubs signed up to take part in the pilot, to encourage local men in the community to use football to support their wellbeing. Each club received free mental health and suicide awareness training.
21. The feedback received through the "My Space, My Game" pilot highlighted the positive impact the initiative was having on local men. As a result, the Mental Health Friendly Clubs (MHFC) programme was developed. Unlike the "My Space, My Game" project, which focussed specifically on men and football clubs, the MHFC is designed to include other sporting clubs such as cricket, rugby, bowls etc. It is hoped, in the future, to expand this out to non-sporting clubs. To date there are 43 MHFC across the County.

## **Conclusion**

22. Much work has taken place over the last year to progress the priorities in this important area. The group continues to work well and develop as a partnership, despite organisations experiencing challenges in relation to recent and ongoing organisational change. Data sharing within and across organisations is vital to enable some joint projects to progress, and this remains an ongoing challenge at times impacting on our ability to deliver some priorities in an effective and efficient way.

## **Officer to contact**

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## **Relevant Impact Assessments**

### **Equality Implications**

23. There are no equality implications arising from the recommendations in this report.

### **Human Rights Implications**

24. There are no human rights implications arising from the recommendations in this report.