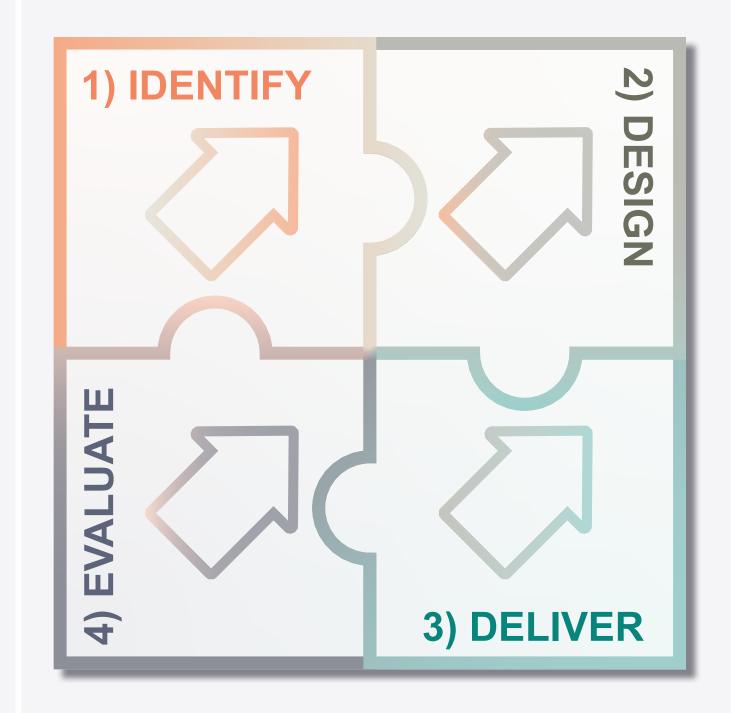
NATIONAL COLLABORATING CENTRE FOR MENTAL HEALTH

The Advancing Mental Health Equality (AMHE) Resource

A summary of the four steps



# 1) IDENTIFY



### 1A. Use existing data and resources

Use existing data, statistics and resources to answer questions about the local population, use of mental health services, available services in the community and to understand experiences and outcomes:

- population data and statistics
- 'mapping' of community assets or local directories
- data on service use
- experience measures
- outcome measures

Break data down by demographics and protected (and other) characteristics



#### 1B. Work with communities

Work with communities to gain a more indepth understanding of inequalities from those affected, including: the community, people with lived experience, carers and the workforce.

- Run focus groups
- Distribute surveys
- Enable input from community groups
- Enable input from other services that work with people who are at risk of experiencing mental health inequalities
- Make involvement accessible, easy and fair



## Challenges in identifying inequality issues

- Demographic data is not always captured, and where it is captured, can be inaccurate or unclear (e.g. 'White – Other')
- Data from different sources is not always combined, which can make it hard to use
- Distrust in services can mean people are not willing to share experiences or raise issues
- Cultural and language barriers
- Service information is not always accessible to all
- Data can 'hide' certain populations such as refugees, asylum seekers and people who are homeless, which can perpetuate their isolation
- Data may not always be accurate
- Co-occurring conditions, such as substance use problems, may obscure mental health needs

See pages **24 - 27** of the See pages **12 - 27** of the resource for more details more details



#### 2A. Research

Carry out research to better understand what could be done to solve the issues identified in the previous steps:

- Ask the community
  - See STEP 1B
- Identify positive practice
  - What action was taken? How this was set up and delivered? What positive impact did it have?
  - Services, areas or localities that have taken positive action to tackle inequalities should be used as exemplars
- Refer to the existing evidence base
  - Assess the effectiveness of interventions and methods for addressing mental health inequalities in the local area

Understand the existing initiatives of local authorities or other areas of health and social care to avoid unnecessary duplication and to enhance joined-up working.

See pages 29 - 32 of the resource for more details



2B. Formulate plans

Formulate plans for taking action. Use reliable methods and involve people with lived experience in the process, for example:

- nominal group technique
- · quality improvement approaches (theory of change, driver mapping)

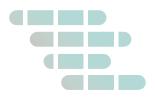
See pages **32 - 35** of the resource for more details



Set out key priorities; start small if needed. Ask people with lived experience for their views and opinions to identify:

- the immediate priorities in your local area
- what small changes can be made
- the short-, medium- and long-term solutions

See pages 36 of the resource for more details







### 3A. Create a strategy

Create a strategy guided by **S**pecific, **M**easurable, **A**chievable, **R**ealistic and **T**imely (SMART) goals. Be sure to consider:

- resourcing (staff and facilities required)
- · timeframes and scheduling
- impact ensure equality impact assessments (EIAs) are completed

### 3B. Implement the strategy

Implement the strategy for change. The interventions chosen will depend on the needs of the local population and the steps already taken to identify inequalities and generate ideas for change.

- Maximise accessibility and affordability by locating services where people live
- Provide choice in care, offering a range of treatment delivery options such as outreach, home-based care, street clinics and help over the phone
- Ensure staff are adequately trained to provide culturally appropriate alternatives to mainstream care
- Offer services or activities online, offering flexibility in time and place, low effort and (sometimes) anonymity
- Take a collaborative agency approach, integrating different services to support specific communities

3C. Governance and accountability

Build additional governance structures into plans to ensure all actions taken are justifiable and effective.

See pages **39 - 42**of the resource for more details

See pages **42 - 43** of the resource for more details

See pages **38 - 39** of the resource for more details







## 4A Collect data and measures

Continuously collect the qualitative and quantitative data needed to meaningfully assess, review and evaluate the service. Data should measure the impact of the service or initiative on inequalities. Important tools and resources include:

- patient-reported experience measures (PREMs)
- patient-reported outcome measures (PROMs)
- self-assessment tools (such as those developed by the College Centre for Quality Improvement at the Royal College of Psychiatrists)
- data on access (broken down by demographics)
- NHS England STP Progress Dashboard
- benchmarking performance to measure the impact of change.

See pages 45 - 46 of the resource for more details



4B Provide opportunities for feedback

Provide appropriate opportunities for feedback from people who use services, families and carers, community members and the workforce. Collate qualitative and quantitative data to paint a richer picture.

Ensure that opportunities for feedback are equal, accessible and fair. See STEP 1B.

Collect staff views, feedback and opinions through:

- accessible platforms for staff to provide feedback; these can be in-person sessions or online forums
- staff-identified training needs collected as part of the appraisal process (this can be anonymised, as appropriate)
- Staff satisfaction surveys

4C Review data and feedback

See page 46 of the resource for more details

Review data and feedback; involve people with lived experience in this process.

Evaluation and review should be used to influence further commissioning and service provision decisions. It should help commissioners and providers understand what is or isn't working, identify any gaps or needs and plan to tackle these in the future.

See page 47 of the resource for more details