

Mental Wellbeing Impact Assessment (MWIA)

Programme 2011



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Introduction and context for the programme

Wellbeing is at heart of what local government is about:

“...supporting a better life for people and helping to build resilient communities, now and over the longer term. It has long been recognised that local government is a key player in creating the conditions for material wellbeing. It does this through increasing employment opportunities, regenerating the physical environment and strengthening the local economy. But more recent evidence also highlights the importance of nurturing psycho-social wellbeing in local populations, so that all residents can reach their potential and live a good life.”

The role of local government in promoting wellbeing – on the local.gov.uk website

The Mental Wellbeing Impact Assessment (MWIA) Programme was commissioned by the former Local Government Group, now the Local Government Association (LGA). It was set up to help local authorities:

- enhance the impact on wellbeing of a specific service or policy area
- increase understanding of wellbeing

- build capacity to use MWIA as a strategic tool to help health and wellbeing boards improve the wellbeing of local communities.

The programme offered local authorities and partners:

- the opportunity to be part of a potentially high-profile pilot scheme that could showcase their commitment to mental wellbeing
- an introductory session to MWIA to generate local interest and commitment
- a lead MWIA specialist to work with them to undertake an MWIA on a service of their choosing
- an action learning training programme for staff and local partners with an interest in taking MWIA forward.

Participating authorities were expected to identify a lead officer to organise the local process including promoting the training programme, venues and refreshments.

The programme generated considerable interest from local government across England and Wales with 12 applications received. Five local authorities were selected and involved in completing an MWIA and training a team of people. In addition, one local authority was offered the opportunity to have an MWIA undertaken on their health and wellbeing strategy (without the capacity-building programme). This was explored with the local authority but as the strategy was not

fully developed the decision was made not to proceed. However, this will be progressed outside of this programme once the strategy has more detail.

This report describes how the programme was delivered, and presents case studies from the participating localities, outcomes and lessons learned. It offers suggestions for health and wellbeing boards and for the transition of public health into local government.

Delivery of the key aims and objectives of the MWIA programme

The aim of the programme was to support local authorities to enhance their impact on wellbeing.

Objectives

Identify and recruit five local authorities to undertake programme – those selected were:

- the London Borough of Bexley
- Bristol City Council
- North Norfolk District Council
- Merthyr Tydfil County Borough Council
- Sheffield City Council.

Run five awareness raising events which were attended by 38 people in total.

Run five training courses training 50 people in MWIA. In total 51 people were trained including:

- 47 per cent from councils
- 35 per cent from the NHS
- six per cent from arts organisations
- four per cent from the voluntary sector
- four per cent independent
- two per cent from registered social landlords
- two per cent from education.

Undertake five MWIA's as part of the training process as follows:

- Bexley – Health Needs Assessment of Carers
- Bristol – Landlord Transformation Programme
- North Norfolk - Arts service: Sheringham Little Theatre Youth Outreach
- Merthyr Tydfil – Adults Community Learning
- Sheffield- Sustainable Tenancies Programme.

Overview of the MWIA methodology used

The Mental Wellbeing Impact Assessment (MWIA) is a resource for identifying the mental wellbeing impact of policy, planning or specific programmes. It can be used as part of an assessment of proposed developments, such as a new shopping centre or closure of a local library, or a particular project like an arts outreach programme. It enables people and organisations to assess and improve a policy, programme, service or project to ensure it has a maximum equitable impact on people's mental wellbeing, and to identify ways to measure those impacts.

It was developed by a partnership bringing together mental health and wellbeing and Health Impact Assessment (HIA) knowledge and skills. There was a development process over seven years beginning in Lewisham and Lambeth and developed further in the northwest of England. It was latterly supported and funded by the former National Mental Health Development Unit (NMH DU). A national collaborative steering group oversees the development and implementation of MWIA, including capacity building and policy development.

MWIA is based on evidence of what influences and determines positive mental wellbeing. It uses health impact assessment methods to assess the likely impacts of a service on the mental wellbeing of a specific population. The MWIA assessment framework is built around key factors that the evidence suggests promote and protect mental wellbeing:

- enhancing control
- increasing resilience and community assets
- facilitating participation and inclusion.

MWIA also has a focus on the important role of equity, social justice and social relationships in population mental wellbeing. Therefore, the MWIA assessment framework also considers:

- the wider social determinants of mental wellbeing
- population factors and addressing health inequalities.

Mental Wellbeing Impact Assessment – on the website of the Association of Public Health Observatories

A Toolkit for Wellbeing – on the website of the new economics foundation

MWIA process in each local authority

- Awareness event or introductory meeting with key stakeholders.
- MWIA screening – a desktop assessment with key stakeholder using the MWIA framework to make an initial assessment of key positive and negative impacts of the service on mental wellbeing, and to identify impacts on different population groups and assess whether the service area was appropriate for an MWIA.
- Revised proposals – some areas adjusted the focus of their MWIA as a result of screening to make the process more effective.
- Scoping – agreeing the process and methods for the MWIA at a local level.
- A desktop review of published literature identifying the mental wellbeing impacts of the service area.
- A community profile of the target population.
- Stakeholder workshops using the MWIA methodology to engage participants in identifying shared understandings of mental wellbeing, priority impacts and actions for improvement.
- Compiling an appraisal of the evidence to formulate the complete assessment.
- Identification of positive and negative impacts of the service on mental wellbeing.
- Identification of indicators to measure priority impacts.
- Compilation of a report detailing the MWIA findings, appraisal, conclusions and recommendations.

Case studies

The following brief case studies present a summary of the topic, main findings and outcomes from four of the MWIAs in each local authority. A fifth MWIA has started and will complete late as discussed in the case study. The main lessons learned are brought together in a subsequent section.

Case study one: Bristol - Landlord Transformation Programme

This MWIA is being undertaken on a major transformation of landlord services – in an environment where the role of the council as a landlord is under debate and the nature of the population accessing council housing is changing. The MWIA was identified as a potentially helpful tool to inform the local debate and planning by exploring, identifying and evidencing the impact of landlord services on mental wellbeing and how future service design can maximise the mental wellbeing of tenants.

The LGA MWIA programme in Bristol was tailored to local needs and an MWIA working group was established with representatives from:

- public health
- local authority landlord services
- policy
- planning.

It included the service director for landlord services and the associate director of public health.

The screening process identified that landlord services have a major and long-term potential impact on the mental wellbeing of a significant proportion of the population of Bristol – in particular, on a population that is likely to have a higher risk of poor mental wellbeing. Therefore, the current process of transformation of landlord services could have a major impact on the wellbeing of individual tenants and communities.

A stakeholder workshop was held with staff from landlord services to raise awareness and understanding of the role of housing in mental wellbeing and to engage staff in the 'wellbeing agenda'. Further workshops will follow in the new year with tenants and then wider stakeholders. The process will continue beyond the LGA MWIA programme and will inform the design of the second phase of landlord transformation in Bristol.

Findings to date: impacts and issues identified

Population

- Significantly lower satisfaction among black and ethnic minority tenants – potential negative impact?
- Significant impact on the mental wellbeing of vulnerable children and families – key question is should there be a more strategic approach to supporting families to sustain tenancies?
- Socio-economic disadvantage is damaging to mental wellbeing – housing has a key role to play in tackling inequalities, but what role can and should landlord services play?
- The rise in tenants with more complex needs.
- There are significant pressures on the mental wellbeing of tenants, many of which are outside the control of staff in landlord services.

Wider social determinants of mental wellbeing

- Estate management has the potential to have a major impact on the wider determinants of mental wellbeing – especially the quality of housing, access to housing, the physical environment and tackling inequalities. There is currently a mixed picture, where some aspects of the service have a positive effect and others a negative effect.

Enhancing control

- Positive impact on resources for financial control through provision of debt and welfare advice – are there sufficient opportunities for tenants to express views and be heard?

Increasing resilience and community assets

- Having a secure home is likely to have a

positive impact on emotional wellbeing but this is not measured at present.

- Key impacts on community assets include provision of shared public spaces, enabling social networks, trust and safety.
- Emotional support – the need for support is increasing and staff need to be better trained to cope with problems.

Facilitating participation and inclusion

- Accessibility – some measures, like uniforms, have improved this while others may have created barriers for some groups, for example online access. Face-to-face contact is important.
- Tenant participation – there are established mechanisms and resources to enable tenants to participate in the service. However, it was widely recognised that there is a limited range of people who get involved and that new and creative participation methods need to be used to attract and engage more tenants.

Recommendations and next steps

- The results of the MWIA should inform the second phase of transformation of landlord services.
- Landlord services need to inform and engage their wider stakeholders in dialogue about the impact of their services on mental wellbeing, possibly using further MWIA workshops.
- MWIA workshops with tenants are a priority to make a more complete assessment of impact on mental wellbeing.

Indicators

Landlord services will use the findings of the MWIA to develop indicators of mental wellbeing to build outcomes on mental wellbeing into the business case for the second phase of transformation.

Case study two: Merthyr Tydfil

The Merthyr Tydfil Adult Community Learning partnership identified MWIA as a tool that enables them to standardise their approach:

- in measuring wellbeing impact across work streams in the current strategy
- to support other partnerships within the local authority area in its use.

To maximise the learning throughout the training process it was decided to pilot the tool on the 'Bridges into Work Project' – a practical project of the adult community learning strategy. The partnership now has the capacity to apply MWIA to other more complex aspects of the strategy as required.

The MWIA was conducted on the construction training qualifications of the Bridges into Work Project. This is a European-funded project working across six areas of South Wales including Merthyr Tydfil. Through a collaborative approach, Bridges into Work aims to engage, support and prepare the economically inactive – including those who are unemployed or on incapacity benefit – in the most deprived areas to acquire the appropriate skills to become job ready and to gain sustainable employment.

The screening process identified that construction training qualifications may have a long-term potential impact on the mental wellbeing of local adult men who are unemployed, and are likely to have a higher risk of poor mental wellbeing.

Furthermore, for many this will be the first time they have been in a classroom for a long time and for some, basic skills are an issue. These courses have the potential to

improve their self esteem and change their lives – and their families' lives – by enabling them to discover a pathway to employment.

A stakeholder workshop was held with learners on the current construction course, support staff and tutors. This raised awareness and understanding of mental wellbeing and assessed the wellbeing impacts of the construction training qualifications on learners.

The group trained felt that the words and terminology used in the assessment charts may not be understood by the learners and that the definitions of wellbeing may be too complex – especially for clients with essential skills needs. To resolve this, the language and definitions used were simplified by a small group and this worked well.

Findings to date: impacts and issues identified

Population

- Potential positive mental wellbeing impact for adult men – those impacted indirectly are their families.
- Few women attend the course.
- Need to review how to approach the over-50s target group and engage them in this training when “they don’t think they need another job”.

Wider social determinants of mental wellbeing

- Construction Qualifications has the potential to have a major impact on the wider determinants of mental wellbeing – especially if it establishes unemployed learners on a path to employment. This access to education could provide a future impact on many wider determinants through gaining employment and changing their personal financial situation.

Increasing resilience and community assets

- Trust and safety – feeling trust in the small group and with tutors is a main positive impact for learners.
- Emotional wellbeing – “Learning different skills is important to better yourself. Learning something you couldn’t do before.” Giving you the ability to learn “makes you feel good inside”, “gives you pride” and you can “hold your head up high”. It increases self confidence.
- Social networks and relationships – being unemployed meant being stuck in the house and “finding it difficult to talk to people”. Getting out and meeting people

is a very important first step towards eventually getting back to work.

Facilitating participation and inclusion

- Practical support – learners are offered practical support such as funding for childcare and transport if this is deemed necessary. The workshop highlighted that not all learners knew of this offer and so this was an area for improvement.
- Having a valued role – by participating in local community projects. Learners feel the community will value their role because they are making a contribution to the community.

Recommendations

- The induction and information packs will be reviewed for the five departments and a generic one will be developed for all including information on the support offered, for example, transport, childminding and basic skills.
- The role of the support worker and who can access this support needs to be explained to learners when they enrol, again in the induction and then reiterated in the information pack.

Indicators

Proposed indicators include:

- uptake of support including transport, childcare and personal support
- having a valued role and going on to further education, employment or volunteering.

Future work is going to explore integrating individual indicators of wellbeing into the evaluation of adult and community learning programmes across Merthyr.

Case study three: Bexley

Bexley Care Trust recognises that carers' health needs are not always recognised or addressed. To better understand these needs and ensure that the services they commission can better meet these needs, a Health Needs Assessment (HNA) was commissioned from RBE Consultancy in March 2011. Draft recommendations – including those for the health service – were produced in early August.

To ensure these recommendations maximise opportunities to promote mental wellbeing, Bexley Care Trust successfully applied to the Local Government Association Mental Wellbeing Impact Assessment (MWIA) programme.

The MWIA was led by the external specialists working alongside health, local authority and voluntary sector officers, carers' representatives and carers themselves. An initial screening exercise identified the HNA health service recommendations as an appropriate area of the service on which to focus the MWIA.

An additional challenge for this MWIA was that it was undertaken on proposed recommendations. So it was a 'prospective' MWIA, which is always harder to make tangible for people training in MWIA and for forming robust conclusions. In this instance the wealth of experience of carers and staff was brought into the evidence base as well as the comprehensive work that had taken place as part of the HNA itself.

Findings to date: impacts and issues identified

There were a number of findings, many endorsing the research as part of the HNA.

Population

- There is limited detailed information about the actual numbers and health needs and status of carers in Bexley.
- Most carers coming forward for support are in the older age groups, that is, 65-74 and a larger number who are over-75 years. There are a large number of carers who are not coming forward to services – they may not need support or else they are unaware of support available.

Wider social determinants of mental wellbeing

- Access to high-quality public services – lack of flexibility of access to health and social care services for example appointment times. Flexibility is needed when caring for someone.
- Transport – lack of flexibility for people with disabilities when using public transport.
- The rest of the findings have been summarised for two of the HNA recommendations.

Health checks

Carers did not see their own health as being a priority – although they supported the introduction of health checks as a suggestion – and placed the needs of the person they cared for as being of prime importance.

Accordingly, one of the main HNA health service recommendations is to introduce health checks. The benefits of this are not only to improve the physical health of carers. The literature suggests that improving

access to information and advice, along with emotional support is likely to have a positive impact on the mental wellbeing of the carer. If this is improved, their capacity and resilience is likely to be enhanced.

Dedicated primary care post

The literature and stakeholders' views suggest that improving access to, and providing flexibility of, primary care would enhance mental wellbeing by:

- **enhancing sense of control** by providing opportunities to influence decisions and opportunities for expressing views and being heard, and through providing information and advice
- **increasing resilience** by improving trust in the services and increasing access to emotional support.
- **facilitating carers' participation and feeling involved** in meeting their own needs which, in turn, would increase their resilience for coping with the demands of being a carer.

A cross-cutting finding was that carers wanted to be consulted and involved with planning and delivering care for the person they care for at every stage, as well as their own health needs being met. Providing information and advice was seen as being essential to promoting their own mental wellbeing. This was particularly supported by the literature.

Recommendations

It is recommended that if the health checks are to be a success, the promotion of these will need careful and creative consideration as they are not a high priority for carers. There needs to be:

- flexibility of provision and timing
- the ability for tailored needs to be identified and met
- respite care provided to enable carers to develop healthy lifestyles.

Wherever possible, carers should be involved in the design and care for the person they are caring for. This has largely been provided for in the HNA recommendations and the need for this has been strengthened by the MWIA.

Case study four: North Norfolk District Council, Arts Service: Sheringham Little Theatre Youth Outreach

North Norfolk District Council (NNDC) Arts Service has a service level agreement with Sheringham Little Theatre (SLT) which is committed to promoting theatre to young people both as audiences and participants.

In 2010/11 the theatre's outreach programme delivered over 5,000 opportunities for young people to engage in drama activities. This work is supported by the theatre's auditorium programme which provides opportunities for young people both to perform and see shows appropriate to their age. The outreach programme currently delivers drama workshops in Sheringham and North Walsham which are both former market towns in a rural and isolated area.

While officers are aware of the many potential benefits of arts on health and wellbeing, until now this has been largely anecdotal and not possible to robustly demonstrate. By applying to be a pilot authority on the Mental Wellbeing Impact Assessment (MWIA) programme, North Norfolk District Council (NNDC) aimed to effectively communicate the wider impact the service – or elements of it – has on the local community's health and wellbeing.

Led by an MWIA facilitator, local authority officers and health and arts professionals were brought together to undertake the MWIA. An initial screening exercise identified the SLT Youth Outreach Programme as an appropriate area of the service on which to focus the MWIA.

Findings to date: main impacts and issues identified

Population

- SLT is only funded to run the youth outreach in two of the seven market towns in North Norfolk – Sheringham and North Walsham. This leaves a number of areas where there are young people who could benefit but who are unable to access the service.
- There may be some minority groups who are not making full use of it due to lack of transport, lack of targeted publicity, invisibility (such as young carers), or the funding has not been specifically linked to recruiting them (such as those who may be on probation, children and young people with disabilities and those who are carers).

Wider determinants

- Transport – Sheringham Little Theatre serves a rural area with limited public transport across the area. This limits the ability of some families to access the youth programme although the outreach element has enabled some to access who would not otherwise benefit from the Sheringham Little Theatre .
- Employment – there was some evidence to suggest that engagement with the Sheringham Little Theatre youth programme provided an opportunity for routes into further education and employment.

Enhancing control

- Enabling skills development – participation is creating opportunities for individuals to develop skills in a wide range of areas from the performing arts to backstage and from project management to technical skills. Skill development builds an

individual's sense of control and resilience thus promoting self-esteem and belief in themselves.

Increasing resilience and community assets

- Building communication skills, confidence, self-esteem and emotional wellbeing helps young people become more resilient to bullying and builds their aspirations for future learning and development.
- Providing a safe and trusted environment – it was striking how much importance was placed on trust and safety particularly by the parents. Parents felt SLT performs well on this and are confident in the policies and procedures in place. This aspect had not previously been seen as a key direct impact of the programme.

Facilitating participation and inclusion

- Opportunities to volunteer enable the development of knowledge, experience and skills and are therefore likely to promote an individual's self-esteem and sense of participation as well as a reduction in social isolation. Volunteering is also a pathway into paid employment.
- Offering young people alternative activities provides them with positive activities in a rural area where there are potential problems of isolation and inactivity leading to negative behaviour.

Recommendations

- There are many significant, positive impacts on mental wellbeing that the SLT youth outreach programme is having both for young people and parents. Hence, the activities warrant continued funding as they reach young people in ways that other services do not, building their self confidence and communications skills.
- SLT should explore how the programme promotes their activities and support mechanisms to young people to find ways of overcoming practical and psychological barriers to participation identified.

Indicators

- Proposed indicators on volunteering, sense of belonging, goal setting and trust and safety.

Case study five: Sheffield – Sustainable Tenancies Project

Working with a partnership of Sheffield City Council's Director of Lifelong Learning Skills and others such as Police and Fire and Rescue, Sheffield Homes have been an integral partner in developing the 'whole household approach'. The Sustainable Tenancies project aims to join up the approach to identifying and responding to the needs of tenants prior to signing up for a tenancy, with other partners – health, police, job centres etc – to improve sustainment of tenancies.

It was identified that a more comprehensive and inclusive piece of work needed to be delivered to:

- develop a cohesive and focused whole household approach to increase sustainability in council tenancies
- identify where investment needed to be made, where costs could be saved and what indicators were needed to measure overall project success.

These outcomes are what the Sustainable Tenancies project will deliver. The project will also link to the council's wider vision for social housing, including links to worklessness and financial inclusion work.

An introductory meeting was held and an initial MWIA screening was undertaken with partners. The screening identified that though the Sustainable Tenancies project was at an early stage there was sufficient knowledge of the key issues and population groups around the table to justify going ahead with a more in-depth MWIA.

However, once a more in-depth MWIA commenced with other colleagues who were also being trained in MWIA it became apparent that there was insufficient data and knowledge about the interventions being proposed. So, a decision was taken to postpone the MWIA until early 2012 when more work will have been undertaken with the project.

A valuable lesson was learned in that it is technically possible to do a MWIA on a prospective policy or programme (proposal) if there is sufficient data and expertise in MWIA. However, to try to do MWIA on such a proposal as part of a training course is not practical.

Wider programme outcomes and learning

In this section the key wider outcomes and learning from the LGA MWIA programme are highlighted along with quotes from lead participants across the five local authorities.

Strengths of MWIA

The experience of participants on the programme has highlighted the strengths and added value of MWIA as a tool for integrating mental wellbeing into the design and delivery of local authority services and enhancing understanding of mental wellbeing in local services and partnerships.

Increased understanding of mental wellbeing and impact that programmes can make

The MWIA action learning training programme brought people together from different sectors and backgrounds. The programme enabled people to enhance their understanding of mental wellbeing and the evidence base on the determinants of mental wellbeing. Together they then applied this new knowledge to their local populations and a local service. This is a vital first step to officers being able to address mental wellbeing in local authority services.

“The MWIA has helped our Landlord Services get to grips with mental health and wellbeing.”

The MWIA programme has also enabled service providers to develop a more in depth understanding of how their services impact on mental wellbeing. For example, the MWIA stakeholder workshop in Bristol enabled staff to make a direct link between some of the service changes they had made to improve accessibility with mental wellbeing and also to place areas of work such as tenant participation into the context of mental wellbeing. This can help staff understand some of the wider implications of their service changes and day-to-day work, and perhaps value certain activities differently.

“A different way of looking at the impact our service has on people’s lives and how we can contribute to improving quality of life.”

“The MWIA helped us think about not just measuring what we do, but why we are doing it and improving things for the learner.”

MWIA was also valued for providing a framework within which to build evidence of the impact on mental wellbeing for services, some of which need to demonstrate their value to the community in the current financial climate.

“The outcome has been tremendous for our organisation as now we have some real evidence proving the impact of our drama work on young people’s mental wellbeing and indeed on their families’ mental wellbeing.”

Re-focusing services to a promoting wellbeing approach

One intention was to explore whether MWIA could be a helpful tool for identifying and improving the impact services have on mental wellbeing and to begin to measure this.

Following the MWIA process, the pilot sites have reported changes that are already being made to service design and delivery. For example, in Merthyr, the MWIA stakeholder workshop with learners confirmed that the course induction needed improvement and provided clear evidence and rationale for staff to implement changes.

“It has allowed us to consider the needs assessment more fully, and to integrate new findings before publication. It has allowed the specific brief of each agency to be considered collectively and see the impact behaviours and commissioning decisions have systemically.”

“Outcomes will inform key strategy development in landlord services.”

“Good quality information came through practical solutions.”

Measurement of impact on mental wellbeing

All the services involved have some form of monitoring arrangements usually for performance monitoring. In many cases these are not specifically designed to monitor mental wellbeing. One of the key outcomes arising from MWIA is a set of indicators that can be used to help monitor impact on mental wellbeing. This can sometimes be existing measures that are now understood to link to impact on mental wellbeing, such as employment, education outcomes or volunteering, and which can be highlighted and communicated as wellbeing impacts. Qualitative measures are encouraged to gain an insight into how services make people think and feel, for example, the impact on mental health.

Each of the MWIAs will identify tailor-made indicators that should yield longer term evidence of impact on mental wellbeing. For example in Bristol, landlord services will use the findings of the MWIA to develop indicators of mental wellbeing in order to build such outcomes into the business case for the second phase of transformation. In Norfolk, Sheringham Little Theatre has proposed building into their monitoring framework indicators on:

- volunteering
- sense of belonging
- goal setting
- trust and safety.

Local partnerships and networks strengthened

In previous evaluations of the MWIA process, one of the main outcomes has been the development and strengthening of local networks and partnerships. This was also the case with the LGA MWIA programme which enabled teams of local staff to go through an action learning process together and also brought together a wider range of local stakeholders for the MWIA workshop.

In most of the sites the MWIA programme brought together staff from public health with council officers and other relevant local agencies. This provided a useful opportunity in the current context of public health transition to enable joint working, develop an understanding of the agendas of different departments and the type of skills and knowledge that public health can bring to support council services. It also highlighted the major influence council services have on the health and wellbeing of the population.

“MWIA presented an opportunity to bring together local government, health and arts sector professionals together. The process enabled those working outside of the arts sector to gain far greater understanding of the benefits of the service and may influence the way they look to other sectors to help them deliver in the future.”

“It has given voice and credibility to all agencies involved, increased understanding of respective roles and function.”

MWIA as a way of engaging a range of stakeholders

Again, as in previous evaluations of MWIA, the participative element of the process usually in the form of a workshop was felt to be of added value, both affirming and identifying new impacts – both by the trainees but also by the stakeholders.

“The workshop was a particular high point which made us aware of how important it is to consult and we should undertake more regular consultation with stakeholders. The process taught us a new way of approaching consultation with stakeholders.”

Trainee

“The session was good and I hope it happens more often because we could let out our feelings, and to be listened to.”

Young person attending workshop

The MWIA methodology was also seen as complimenting other community engagement objectives and processes such as tenant participation and learner engagement.

“This process works so well with learner voice policy, so this is helping listen to the learners.”

Structured evidence based toolkit

A number of participants have said that they have valued the MWIA framework as it has provided a structured and evidence-based methodology within which to firstly understand and then assess the impact of their service on mental wellbeing. Some felt that using the MWIA framework would help them communicate more clearly and with greater weight the implications of potential service changes for mental wellbeing to colleagues, members and partner agencies.

“It is a really good response to taking something nebulous and turning it into something measurable.”

“Provides very structured approach to understanding where service impacts and guiding how we should respond.”

This links to a key challenge for the ‘wellbeing agenda’ in local government. The experience of the MWIA programme suggests that many areas of local government now recognise their role in wellbeing and want to expand their focus on this area. However what is needed is a deeper understanding of:

- the concept of mental wellbeing
- the evidence base
- practical tools to integrate the evidence and put it into service planning, design and delivery.

Areas for improvement for MWIA

Any methodology can always be improved. A number of participants have identified that potentially a briefer and less resource intensive version of MWIA may enable a much wider application of the tool in local government. However, there were a number of people who valued the screening toolkit section of the MWIA Toolkit and said they would be advocating its use within their areas.

“It does need to be a bit more flexible and slicker. This could be done.”

“The only thing I would say is that the process seemed quite ‘heavy’ and needed quite a lot of resource (people, time, venues etc). I wonder whether it would be possible to do a ‘lighter’ version, especially if you were thinking of using it reasonably frequently.”

“We intend to undertake further MWIA’s on other service areas within the council. We shall certainly use the initial screening process when planning new activities.”

Future application of MWIA

An intention of offering action learning training was to build local capacity to undertake MWIAs. Feedback from the pilot areas suggests they feel more confident about applying these tools and adapting them to be more flexible for their own use. All have reported they will be using MWIA in some form and promoting its wider use within their council and with partners. Participants from Merthyr are already working together on a second MWIA. Others are planning to use the screening toolkit as a regular part of programme planning.

“We intend to undertake further MWIA’s on other service areas within the council. We shall certainly use the initial screening process when planning new activities.”

Promoting MWIA as a tool to support the work of health and wellbeing boards, joint strategic needs assessments and the transition of public health to local government

This programme has enabled us to test the use of MWIA on a wide range of service areas in local government with many areas undergoing significant change or challenges. The services range from the major areas of local government delivery such as housing, to services with much smaller budgets and potentially reaching a smaller population, such as youth arts. In the current environment – where wellbeing is going up the agenda and budget pressures are also increasing – officers and politicians are trying

to make decisions about where best to invest for the wellbeing of their communities.

The experience of the LGA MWIA programme suggests that MWIA could play a role in enabling health and wellbeing boards to gain a more robust assessment of the wellbeing ‘value’ of certain services, and the impact of this in their local communities in order to inform future commissioning priorities and to understand the implications of cost savings. In addition, MWIA has been identified as helpful in the design or re-design of services for those who want to increase their impact on mental wellbeing through the commissioning process.

“It is being utilised as part of tendering processes for newly commissioned activities starting in sexual health, which is key in light of the new responsibilities the local authority will assume in this area.”

“The MWIA gives people like me working in health improvement and public health the opportunity to collect qualitative and some quantitative evidence from a variety of sources and collate it into something structured and robust enough to present as evidence for commissioners.”

Being part of the LGA programme

This section explores what the benefits were for the local authority sites of being part of a national programme where external specialist support was provided to lead the MWIA training and work alongside a local lead.

Value of being part of a national pilot programme

All the areas reported that their expectations of being involved in this programme had, on the whole, been met, with some changing their expectation as they became more familiar with MWIA.

“It was a catalyst. Being able to talk up being part of a prestigious national pilot was a great incentive in getting everyone involved, and of raising the profile. We can build on that.”

“I applied to the MWIA as until now I have been unable to provide any robust evidence to demonstrate wider benefits of my service. I saw the MWIA programme as an opportunity to do this and to identify ways in which I can better measure my service in the future.”

“We anticipated using the programme to serve two functions. Firstly to analyse the wellbeing aspects of a carer’s needs assessment, and secondly as a tool to test the transition of health activity into the local authority. In this regard the programme exceeded expectations, helping us frame the work as a borough response, rather than a single agency driven piece of work.”

Having external specialist MWIA facilitation

The MWIA Toolkit is designed to be downloaded and used without external support. However, the full application requires some prior knowledge of impact assessment and facilitation skills. Over the years of developing the MWIA Toolkit, experience has shown that people value having access to training and support to undertake their first full MWIA.

In addition, the LGA wanted to test out the value of MWIA in local authorities. So they commissioned external specialist MWIA expertise and an action learning training model for this programme. A lead specialist was allocated to each of the five areas whose role was to introduce MWIA, set up and deliver the programme and collate the MWIA findings within a final report.

It would appear that this role was valued by participants and has given them some confidence to continue to develop MWIA in their areas.

“It was extremely helpful and vital that the delivery team were experts in MWIA. I cannot imagine how the course could be run without this being the case.”

“Without being part of this programme I wouldn't have been able to undertake the MWIA on my small service. However, having been through the programme with two of my local authority colleagues and others in the health and arts sectors, we aim to be able to apply MWIA and elements of it to a range of local government services in the future.”

“The Learning gained from the trainers who have been involved in the delivery of MWIA process has been extremely useful. To get the best from sessions there needs to be a wider and deeper body of knowledge which the trainers displayed.”

Implications for health and wellbeing boards and public health transition

The programme has produced a number of lessons relevant for health and wellbeing boards and public health transition.

- MWIA is a useful tool for public health to offer and promote as part of the added value they can bring to local government.
- The MWIA process provides an opportunity for local services to make effective use of local public health skills and resources to support service improvement, using an evidence-based framework.
- MWIA could play a role in enabling health and wellbeing boards to gain a more robust assessment of the wellbeing 'value' of certain services, and the impact of this in their local communities to inform future commissioning priorities and to understand the implications of cost savings.
- Conducting MWIAs is a helpful process for building local partnership working and developing local knowledge and skills to support the wellbeing agenda.
- MWIA can be a useful tool for enabling the transition of strategies, services and programmes to have a wellbeing focus including the identification and development of localised indicators of wellbeing.
- More information and training around the measurement of individual and population wellbeing is needed.
- The profile needs to be raised nationally on the importance of wellbeing and what factors and activities contribute to positive wellbeing.
- Further implementation of MWIA requires 'external catalyst' work – as in this programme.

Conclusions and future directions

The following conclusions can be drawn from the programme.

- MWIA is a tool that can add value to the understanding and delivery of local authorities in delivering on wellbeing, provided those proposals are sufficiently developed and have enough data to assess.
- Further work could be undertaken to demonstrate the added value of MWIA to JSNAs and equality impact assessments.
- It would be worthwhile investing in the development of a more flexible MWIA to enable more widespread implementation.
- Further work should be undertaken to promote MWIA as a tool to public health and the emergent health and wellbeing boards.
- Local use of MWIA in an in-depth manner requires some form of specialist support to build confidence and best practice.

Appendix A - Selection criteria

Criteria for the selection of local authorities into the programme were agreed with the LGA and included:

- topic
- political and geographical spread
- mix of unitary and district authorities
- ability to influence commissioning
- commitment
- logistics.

As there was an aim to support the integration of mental wellbeing into the mainstream of local authority delivery, proposals with a specific mental health service focus were not prioritised. The applications were discussed and scored in conjunction with LGA to reach a final decision.



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