# Mental Health and Poverty

## What’s going on in Salford?

Delana Lawson from Healthwatch Salford, Simone Spray from 42nd Street and Bernadette Conlon from Start all gave an overview of what their organisations were doing and what they had to offer to the communities in Salford.

## The current challenges.

- Demand on services – GMP, Paramedics and A&E
- Who looks after safeguarding when people don’t meet thresholds (136 assessments may provide limited respite without longer term support)
- GMP being first on hand could exasperate the issues
- Healthcare provision in custody but gaps before then and greater need for links to specialist services
- Investment in building confidence in being able to support
- 80% of homelessness related to mental health – again issues regarding thresholds for specialist support. How do we support first responding agencies?
- Mental health is everyone’s responsibility especially in prevention. We need commitment to training, building capacity for people to feel able to do that
- Recognition of experiences that need to be supported
- Information regarding available support, sign posting options
- Collaborative
- Links of information flow between early intervention and crisis services. Communication between these services would help us to understand where the gaps are
- We need to go back to basics with community hubs so communities know how and where to access support. It doesn’t have to be face to face, digital links could be used
- Cross sector understanding of issues and provision
- Provision for more focussed 1-2-1 work. Group provision not always appropriate or accessible for reducing isolation
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<th><strong>What we can do collaboratively going forward to make an additional difference.</strong></th>
<th><strong>Key messages to feed back.</strong></th>
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| • Innovative collaboration when bid writing ‘out of the box’ partnerships  
• Genuine early interventions – how do we build community resilience? We need to collaborate to fill the gap between community support and threshold where crisis is still present |
| • Early intervention is essential, as well as collaboration between organisations  
• Communication between organisations to ensure that patients are getting early intervention  
• We need to go back to basics, we need a one stop shop, more hubs, everyone to take accountability  
• Specialised teams to deal with mental health  
• Social media can help agencies pull together  
• Some young people don’t want to be reached and join groups, doing 1:1 work with them, have visits, speak with families, direct to support agencies in Salford and Manchester  
• Organisations have the opportunity to work collaboratively on funding bids  
• Innovation to work in partnership with different organisations to close resource gap  
• We need to build resilience in communities with training and early interventions – not all needs are clinical |
• One stop whop – other services people can get help with – what is out there – need to be able to access information on where they can get help and what type of help is available
• Communication
• Digital platforms
• Lots we don’t know about but it is out there
• Front line services should have knowledge of what is out there
• Prevention – people being able to access services before they get to crisis level
• There is a resource webpage for 0-25 year olds: [www.partnersinsalford.org](http://www.partnersinsalford.org)