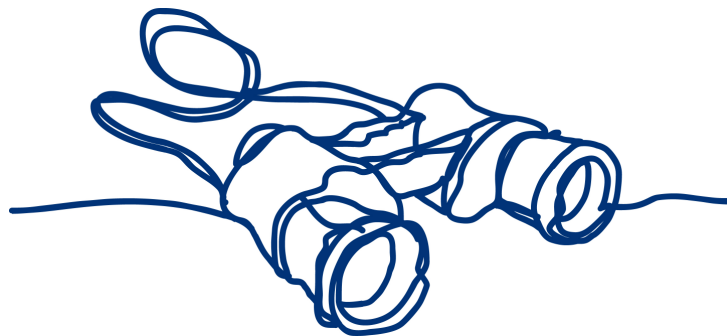


# Mind in Harrow's Strategy 2014-20



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Harrow

## **Our vision**

We won't give up until everyone experiencing a mental health problem gets both support and respect.

## **Our mission**

We provide information and support to empower anyone experiencing a mental health problem from all our local communities. We campaign together with people experiencing mental health problems to improve local services, raise awareness, and promote understanding.

## **How Mind in Harrow is unique**

We are here to make a long-term lasting difference through **hope**.

**holistic:** We see the whole person, not just their symptoms.

**outreach:** We innovate at the grassroots of our diverse local community.

**people:** We create change together with people, not for them.

**expertise:** We are a local charity with national mental health expertise.

## **Our values**

### **Open**

We reach out to anyone who needs us

### **Together**

We're stronger in partnership

### **Responsive**

We listen, we act

### **Independent**

We speak out fearlessly

### **Unstoppable**

We never give up

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# I. Our Ambition

Mind in Harrow wants to be unstoppable together, work smarter and become more sustainable.

We want to be **unstoppable together** by offering more **HOPE** through our unique approach.

- Holistic:** We will work more holistically with families and offer a wider range of services to achieve better outcomes.
- Outreach:** We will innovate at the grassroots to reach more disadvantaged groups and build greater community resilience.
- People:** We will improve how we engage people experiencing mental health problems and co-produce services with them.
- Expertise:** We will make better use of Mind's national mental health expertise for local campaigning & delivery of service excellence.

We want to **work smarter** by developing deeper strategic partnerships with other voluntary sector and public sector organisations to offer more integrated services. We also want to maximise the potential of Mind in London to offer better value for money through shared infrastructure.

We want to be **more sustainable** in an era of public sector austerity and funding cuts by radically diversifying our funding sources to generate more earned income in areas aligned with our mission.

We want to achieve our strategic service priorities and impact through a creative mix of delivering services, campaigning for change, better understanding local needs and building community capacity.

We want to expand our services to help people in new ways through two strategic priorities:

- **Strategic priority 1:** Promote mental well-being with young people, parents and families at risk owing to their life disadvantages.
- **Strategic priority 2:** Build a 'Suicide Safer Community' in Harrow to reduce suicide and self-harm and to support people experiencing mental health crisis.

We want to take a lead role locally with people experiencing mental health problems, influence regionally and be a model of best practice nationally.

We want Mind in Harrow's strategy to have a synergy with Mind's national strategy, so that our grassroots reach and Mind's national expertise combine to create 'One Mind'.

## **Mind's National Strategy 2013-16 'Unstoppable Together'**

A central theme through our Strategy is to maximise the value from being a member of the Mind network. Each local Mind is an independent charity in its own right and affiliated to Mind, forming a federated network. At a national level, Mind has developed its own Strategy 2012-16 'Unstoppable Together' describing a new approach called 'One Mind':

### **“Our Approach - working towards One Mind**

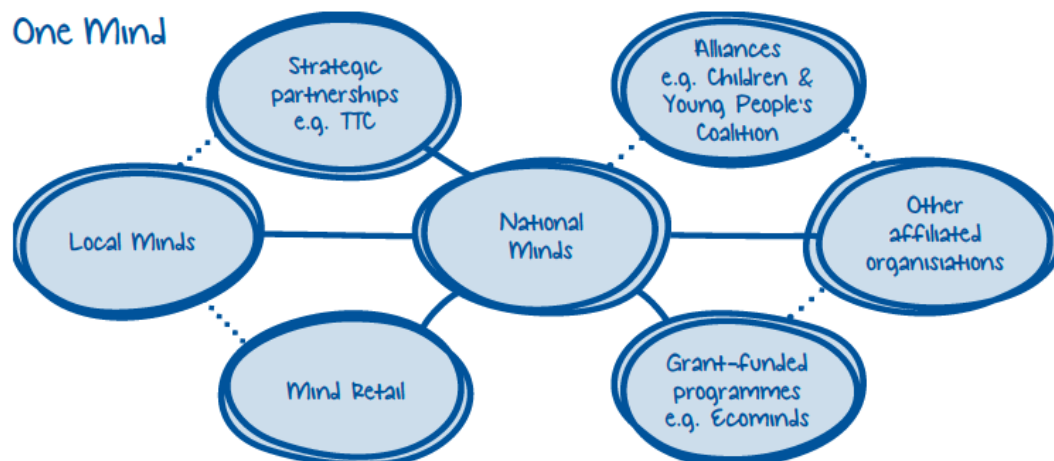
This strategy recognises the pivotal role played by local Minds and the Mind Retail network in delivering Mind's mission and vision.

The local Mind network has a presence in every region in England and Wales, now helping around 280,000 people every year. By far the largest network of services and support for people with mental health problems in the country, its strength lies in its unique ability to draw on the skills and experience of a trusted national network, matched with strong local relationships and the tailoring of services to local needs.

But we know that there are many people who are not able to get help and that the landscape in which we work locally is radically changing.

In this strategy, we want to build on the strengths of our federated structure to create a strong cohesive network that reaches more people with excellent services, founded on four key areas:

- Quality of service - we want to be providers of excellent services leading to positive outcomes for people and the communities we work with.
- Extending our coverage and reach - we want to have a presence across all of England and Wales, so that anybody anywhere can access what Mind has to offer.
- Offering a core service, and pioneering and developing other services - we will look to develop a simple core offer which is available in every local area. We also want to support excellence and innovation of local Minds by enabling the development and spread of high performing services locally and nationally.
- Community base - our network is unique in being rooted in local communities. We want to build on that local strength and commitment, including by working in partnership both as a network and with others who share our aims.”



## 2. Developing our Strategy 2014-20

### 2.1 What did we achieve through our last Strategy 2008-13?

We achieved 4 out of 5 of our service strategic priorities in our Strategy 2008-13, despite operating in a very challenging external environment with significant changes at in government policy and against a backdrop of a recession which has resulted in cuts to funding and services. We achieved the following priorities 2-5 but not **Priority 1**: Develop new Mind Centre:

- **Priority 2**: Offer new life opportunities for employment, training, education, sport and leisure, volunteering, social opportunities and cultural activities.
- **Priority 3**: Increase the availability and access to low cost or free counselling services.
- **Priority 4**: Create new routes and quicker access/signposting to mental health support.
- **Priority 5**: Continue development of the 'expert perspectives' accredited training and related creative user-led training activities: to promote mental health in the workplace and strengthen the user voice in the NHS.

During the five years of this previous strategy, we made huge strides forward in our two sustainability priorities, which you can read about in our annual report 2013-14:

- **Priority 6**: Develop new 'strategic alliances' within the Mind network and local NHS, Council and voluntary sector partners.
- **Priority 7**: Achieve Mind in Harrow's longer-term financial sustainability by investing in our marketing and entrepreneurial capacity to significantly expand and diversify our funding streams.

In addition, over the course of the last strategy we have dramatically improved the quality of our services and core operations by progressing from Level 2 Mind quality assurance award to the top Level 3 in 2014.

**We believe that this is an excellent foundation to launch our new Strategy.**

## 2.2 How we developed a new Strategy

Between November 2013-May 2014 we undertook our strategic planning process through four phases:

- Consulting & engaging stakeholders
- Deciding on our draft strategic priorities
- Seeking feedback on these draft priorities
- Finalising the Strategy

The process was overseen by a strategy stakeholder working group with representatives from service users, trustees, volunteers and staff.

### **Consulting & engaging stakeholders**

We held the following engagement activities

- Two half-day events with people experiencing mental health problems
- One half-day event with representatives from BMER (Black, Minority Ethnic & Refugee communities)
- One half-day event with carers of people experiencing mental health problems
- Two away days with Mind in Harrow trustees, staff and volunteers
- Telephone interviews with key external stakeholders such as local & national Mind, local charity leaders, Harrow Council & NHS Clinical Commissioning Group

**Thank you to all the people who contributed their time and ideas some generously to help develop our new Strategy.**

### **Deciding on our draft strategic priorities**

All the feedback from these engagement activities were written up into reports with key recommendations for the Strategy, which were considered by our strategy stakeholder working group. Our Board of Trustees approved the draft strategic priorities in March 2014.

### **Seeking feedback on these draft priorities**

Through a survey completed by our service users at a variety of our activities, all the five strategic service priorities were rated essential or desirable.

### **Finalising the Strategy**

The final draft of the Strategy 2014-20 was approved by our Board of Trustees in July 2014.

## 2.2 What could the future look?

From our SWOT (Strengths, Weaknesses, Opportunities, Threats) and STEEP (Social, Technological, Economic, Environmental, Political) analyses, we have distilled the following trends as key drivers of our plan for the next four years.

<b>Strengths/Assets</b>	<b>Weaknesses</b>
<ul style="list-style-type: none"> <li>• Mind nationally is a very strong brand</li> <li>• Mind values of user empowerment and diversity shape the future of services.</li> <li>• We have collaborations both regionally and nationally across the Mind network.</li> <li>• We are a respected local voluntary sector partner with NHS, Harrow Council and other voluntary organisations</li> <li>• We have improved our quality to achieve top Level 3 Mind Quality Mark in 2013-14.</li> <li>• We have structures embedded organisation-wide to enable both effectiveness and quality of services to be demonstrated to funders.</li> <li>• Good financial stewardship and resilience in face of funding challenges.</li> </ul>	<ul style="list-style-type: none"> <li>• In the current economic climate, charities of our size are most at risk.</li> <li>• We need to reduce dependency on public sector funding.</li> <li>• We need to improve our external communications to promote our USP and value for money to funders and potential new 'customers'.</li> <li>• We have limited experience in bidding for larger tenders.</li> <li>• No externally recognised quality marks in addition to Mind Quality Mark (MQM).</li> <li>• We have under-invested in some areas of ICT, hampering efficiency.</li> <li>• We have insufficient management capacity to manage organisational change/development.</li> </ul>
<b>Opportunities</b>	<b>Threats</b>
<ul style="list-style-type: none"> <li>• Social care personal budgets and personal health budgets</li> <li>• Integration of health &amp; social care could create new community-led models</li> <li>• 'Big Society' government funding sources for local community projects</li> <li>• Several opportunities to maximise value of Mind network for example: new 'national service products', Mind charity shop, training, joint infrastructure projects.</li> <li>• Mind's national strategy aims to increase peer support, information services and services for refugees</li> <li>• ICT investment could improve efficiency and improve customer experience</li> <li>• Track record of strong partnerships within the local voluntary sector</li> <li>• Further develop volunteering opportunities</li> </ul>	<ul style="list-style-type: none"> <li>• Continuing austerity measures leading to further reductions in NHS and Local Authority funding.</li> <li>• Despite successfully diversifying our fundraising, reached the limit</li> <li>• More competition for charitable funds owing to reductions in public funding</li> <li>• Changing trends in commissioning, include preference for larger generic service contracts</li> <li>• Market-based approach means more competition as new private, 3<sup>rd</sup> sector, and public providers</li> <li>• 'The more for less' funding culture: new contractual frameworks including competitive pricing, payment by results, bigger contracts, and new business models</li> <li>• Our historic pension liabilities impacting on available reserves</li> </ul>



<b>STEEP</b>	<b>Key Drivers</b>
<b>SOCIAL</b>	<ul style="list-style-type: none"> <li>• Significant gaps in mental health support services for specific groups</li> <li>• Harrow's population has become more diverse over the past 10 years (Census 2011).</li> <li>• The national welfare reform changes and austerity measures combined with the economic downturn will continue to have a severe impact on the most vulnerable in society.</li> <li>• Stigma towards people experiencing mental health problems is reducing but we are seeing hardening attitudes to poverty and welfare.</li> </ul>
<b>TECHNOLOGICAL</b>	<ul style="list-style-type: none"> <li>• Computing power, internet, tablet and mobile useage will continue to grow and be an important aspect of information and service access, including</li> <li>• Social networking media in different forms will continue to be important aspect of everyday life.</li> </ul>
<b>ECONOMIC</b>	<ul style="list-style-type: none"> <li>• We will see continuing austerity measures, with further cuts for Local Authorities and a fall in NHS funding. Voluntary sector income from Government is forecast to be £1.7bn a year lower by 2017/18 than in 2010/11.</li> <li>• At a national level, we know that mental ill health is responsible for significant and growing financial costs (loss of economic productivity and the cost of NHS provision) and innovation could help to find better and cheaper models of provision.</li> <li>• New private, 3rd sector and public providers are competing for local mental health markets.</li> <li>• New contractual arrangements and frameworks are being introduced: competitive pricing, payment by results, a shift to bigger contracts, and new business models involving consortia</li> </ul>
<b>ENVIRONMENT</b>	<ul style="list-style-type: none"> <li>• Harrow is among the worst 15% boroughs in England for social housing shortages and Harrow performs worse in this indicator than any other.</li> <li>• Deprivation is apparent across the borough with particularly deprived clusters in the centre and the north (social housing estates in South Harrow, Rayners Lane and borders of Hatch End and Stanmore).</li> </ul>
<b>POLITICAL</b>	<ul style="list-style-type: none"> <li>• Whichever party wins the general election in England in 2015, the austerity programme will continue. However, there could be significant changes in national policies affecting many areas of NHS or local government.</li> <li>• The new Care Bill and NHS Reforms will have a significant impact on access and configuration of local health &amp; social care services.</li> </ul>

## 2.3 Our strategic priorities

We aim to respond to the challenges and opportunities of the future through our strategic priorities, which have been developed in the context of Mind's National Strategy 'Unstoppable Together' and are referred through our Strategy.

### **Strategic priority 1: Promoting well-being**

Promote mental well-being with young people, parents and families at risk owing to their life disadvantages.

### **Strategic priority 2: Builder a safer community**

Build a 'Suicide Safer Community' in Harrow to reduce suicide and self-harm and to support people experiencing mental health crisis.

### **Strategic priority 3: Increasing support & opportunities**

Increase peer support and personal development opportunities across all our services and into mainstream community life.

### **Strategic priority 4: Improving early help**

Improve access to early help for people experiencing mental health problems and their families through a holistic range of services.

### **Strategic priority 5: Empowering action**

Improve equality of treatment by NHS and Social Care/Welfare services for people who experience both mental health and other forms of discrimination.

### **Strategic priority 6: Achieving sustainability**

Achieve both financial and operational sustainability in an era of austerity.

#### **Mind's National Strategy 2012-16**

**A) Staying well:** Support people likely to develop mental health problems, to stay well.

**B) Empowering choice:** Empower people who experience a mental health problem to make informed choices about how they live and recover

**C) Improving services and support:** Ensure people get the right services and support at the right time to help their recovery

**D) Enabling social participation:** Open the doors to people with experience of mental health problems participating fully in society.

**E) Organisational excellence:** Make the most of our assets by building a culture of excellence.

## 2.4 Our Approach to achieving our service priorities

### a) What we want achieve - Our overarching approach

#### **Engaging positively**

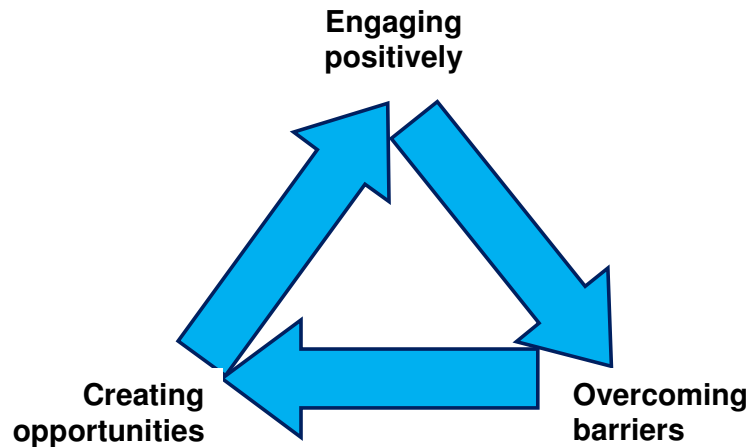
We want to reach out into the community, engaging with people in their own context and being more accessible to everyone in the area who needs our help.

#### **Overcoming barriers**

We want to overcome barriers for people recovering from mental health problems, for example stigma, lack of cultural awareness, language, poverty or social isolation.

#### **Creating opportunities**

We want to create opportunities for people experiencing mental health problems which are not possible in mainstream services or which offer stepping stones into mainstream life.



### b) How we want to achieve it – our good practice principles

#### **Personalisation**

‘Personalisation emphasizes greater individual control of the resources and supports needed to enable people to participate as equal citizens and pursue their own ambitions and aspirations rather than those determined for them by services and professionals ... The challenge for the mental health system is to enhance not deplete the ‘real wealth’ that provides the basis for individual recovery and a fairer society.’

#### **Respecting individual autonomy**

“At their core, both recovery and personalisation are rooted in self-determination and reclaiming the rights of full citizenship for people with a lived experience of mental health problems.... A lack of control makes it impossible for a person to fully realise their goals.”

*Implementing Recovery through Organisational Change: Recovery, Personalisation and Personal Budgets - Centre for Mental, Sept 2012*

## Co-production

'Co-production is not just a word, it is not just a concept, it is a meeting of minds coming together to find shared solutions. In practice, co-production involves people who use services being consulted, included and working together from the start to the end of any project that affects them. When co-production works best, people who use services and carers are valued by organisations as equal partners, can share power and have influence over decisions made.'

*National Co-production Advisory Group, 2013*

## Community-led capacity building

'Promoting social capital and building community capacity is a vital part of the equation because the relationships, exchanges, groups, amenities, services and wider communities that form part of everyday life are fundamental to health, wellbeing, and independence. For example, most of us need shops, private and public spaces, housing, transport, friends, work, money, interests and commitments for concepts of 'independence' or 'health' to be meaningful. Put simply, care services can only help us with part of our quality of life.'

*Think Local Act Personal, 2014*

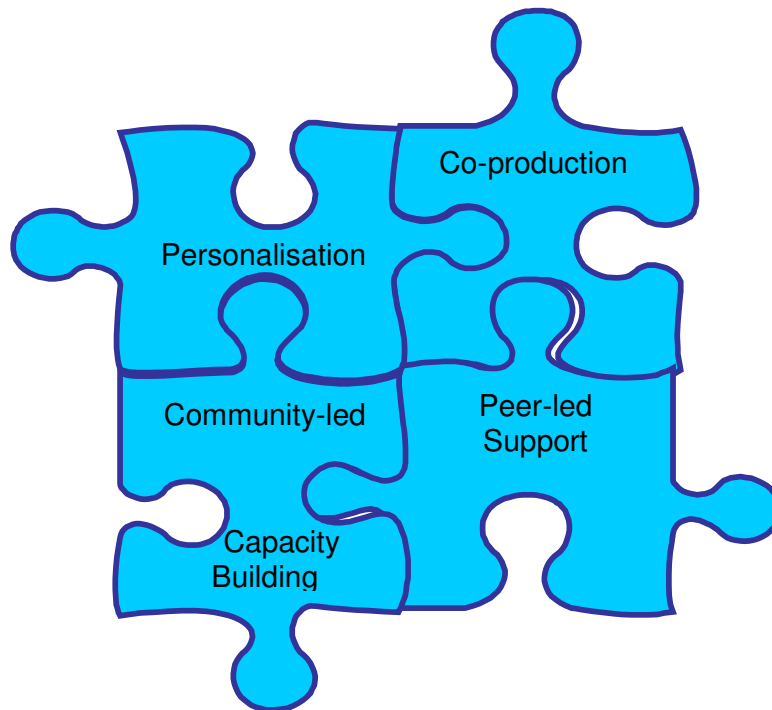


Source: 'Measuring social capital in Camden', Jude Cummins, OPM, 2006

## Peer-led support

'Peer support is a system of giving and receiving help founded on key principles of respect, shared responsibility, and mutual agreement of what is helpful. Peer support is not based on psychiatric models and diagnostic criteria. It is about understanding another's situation empathically through the shared experience of emotional and psychological pain.'

*Mental health peer support in England: Piecing together the jigsaw, Mind Sept 2013 (Referenced from Shery Mead, 2003)*



### **c) Why we want to achieve it – our main service aims**

#### **Promotion of well-being & resilience**

‘Resilience is the capacity of people to confront and cope with life’s challenges and to recover from, or adapt to, adversity. The Young Foundation describe resilience as ‘dynamic, taking into account the past and the future; a person can build resilience before they hit crisis and be more likely to cope with problems that may be around the corner... “The belief that when times are hard, no matter what happens, you can get through it in your own way.” Service User

*Building resilient communities, Mind & Mental Health Foundation, Aug 2013*

#### **Prevention & supporting recovery**

‘People seeking urgent help with mental health conditions, and friends and family close to them, will approach a range of different services – including their GP, helplines or voluntary sector groups, Emergency Departments, social services, schools, colleges, mental health trusts, and the police.

The complexity of crises may mean that individuals need support for several aspects of their crisis. This means having their mental health issues understood within the context of their family, cultural or community setting and other urgent needs, such as self-harm, alcohol or drug misuse, or pregnancy.’

*Mental Health Crisis Care Concordat -, Dept of Health with signatories including Mind, Feb 2014*

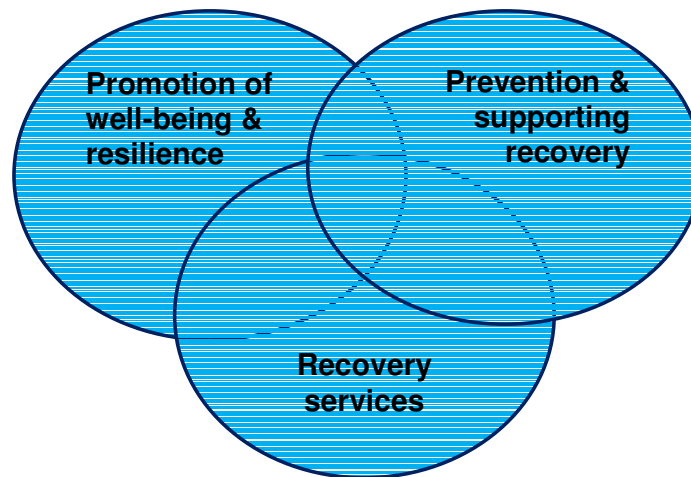
‘Wellbeing, resilience and the prevention of mental health problems are thus distinct but linked, and many of the successful interventions affect all three.’

*No Health without Mental Health, Dept of Health Strategy, Feb 2011*

## Recovery services

'But in a recovery-oriented system, professional expertise should be 'on tap', not 'on top'...It should be readily on hand and available when it is needed but it is up to individuals how they use that knowledge and the extent to which it is balanced by other approaches and priorities. The value of professional treatment and intervention lies in supporting self-care and the pursuit of individual ambitions.'

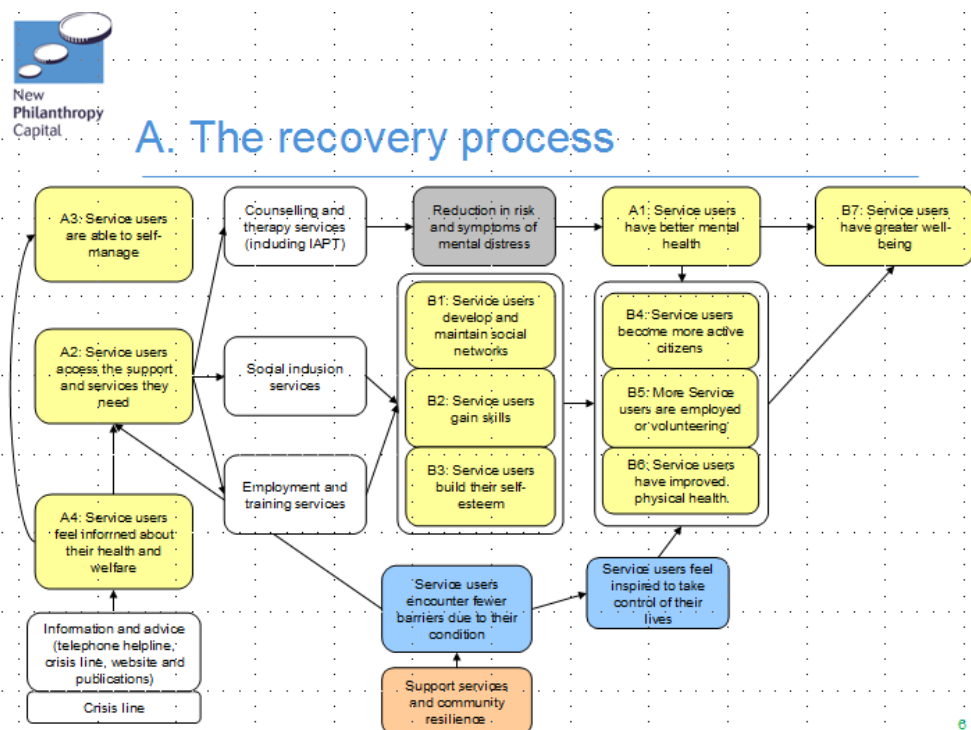
*Implementing Recovery through Organisational Change: Recovery, Personalisation and Personal Budgets - Centre for Mental Health, Sept 2012*



### d) Mind's Theory of Change

Mind's Theory of Change integrates our Approach into a coherent framework of outcomes describing how we aim to work with people to realise change in their lives for Promotion of well-being & resilience, Prevention and Recovery are embedded throughout this Strategy.

### Diagram example of the Theory of Change

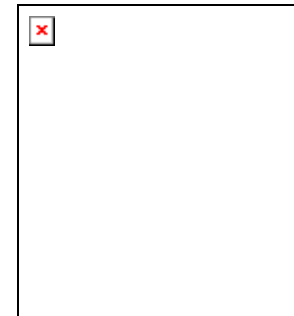
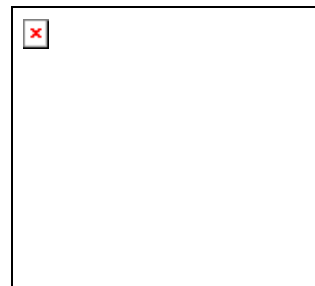


## 3. Making it Happen

### 3.1 Our Strategic Priorities & Goals

In this section we explain how we aim to achieve each of our Strategic Priorities 1-6 through:

- Our connection to Mind's National Strategy
- The implications for change
- Geographical scope & partnerships
- Strategic goals, which set out the specific activities we commit to make the strategic priorities happen.
- A summary of our approach to achieving the strategic goals with reference to Mind's Theory of Change and Outcomes Framework, which underpins all our service activities.
- Our baseline of where we are now to be able to measure our progress.



**Strategic priority 1: Promoting well-being**

Promote mental well-being with young people, parents and families at risk owing to their life disadvantages.

(For the purposes of this Strategy 'young people' means young adults 18-25 years old, which we will review towards the end of the Strategy period.

**Linked to Mind's National Strategy A) Staying well:** Support people likely to develop mental health problems, to stay well. *'500,000 people at risk of developing a mental health problem acquire greater mental resilience, the majority before they ever experience a problem. We will build on existing work with particular groups already being done by local Minds, such as young people.'*

**Implications for change:**

Achievement of this strategic priority will mean widening scope of our existing client group to a younger age range. Therefore, we would will need to explore broadening the scope of our constitution, widen service user engagement in the organisation, identify appropriate training for trustees, staff & volunteers, strengthen some policies and procedures, bring in new expertise and communicate this change to external partners.

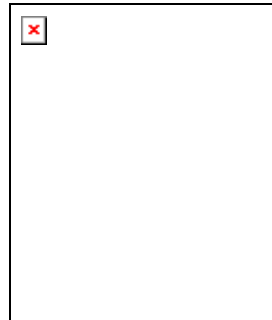
**Geographical scope & partnerships:**

Local delivery & influence in partnership with schools, colleges, BMER community groups, voluntary sector specialists, Mind network & public sector (CNWL NHS Foundation Trust, Harrow Council & Harrow CCG)

Strategic goals	Approach to achieving goal	Baseline quantitative/ qualitative 2014
a) Improve the well-being of young people from migrant communities experiencing inter-generational family conflict	Need: Community resilience (Outreach to vulnerable groups) Outcome: D-2 Attitudes towards people with experience of mental health problems improve Approach: Researching need, direct delivery, capacity building	We currently run 4 mental health promotion & empowerment migrant community projects, which could form the basis of achieving this strategic goal.
b) Improve the mental health & well-being of young people through peer mentoring	Need: Recovery process (Social exclusion) Outcome: D-1 People have improved knowledge of mental health and how to manage it Approach: Researching need, direct delivery	We currently run 3 peer-led refugee mental health promotion projects and have developed a peer-led social activities project. We have not run any projects specifically targeting young people in this way.



<p>c) Improve the emotional awareness of young people and their families through peer-led training workshops</p>	<p>Need: Community resilience (Training and awareness for the community)  Outcome: D-1 People have improved knowledge of mental health and how to manage it  Approach: Capacity building, direct delivery</p>	<p>We have run service user-led mental health awareness training workshops for 6 years and have secured three-years further funding from the Big Lottery Fund to continue this programme 2014-17, which could form the basis of achieving this target.</p>
<p>d) Increase the capacity of all Mind in Harrow services to support and empower young people</p>	<p>Need: Recovery, prevention, community resilience (cross-cutting)  Outcome: A-6 Inequalities in mental health between different groups reduce  Approach: Capacity building for our service delivery</p>	<p>We have increased some engagement with refugee communities through our 2 year REACH project 2011-13 and could apply this learning to this area of development.</p>



**Strategic priority 2: Builder a safer community**

Build a ‘Suicide Safer Community’ in Harrow to reduce suicide and self-harm and to support people experiencing mental health crisis.

**Mind’ National Strategy C) Improving services and support:** Ensure people get the right services and support at the right time to help their recovery

*‘We will campaign for the statutory sector to put the new all-ages Mental Health Strategy into practice, and commission and deliver excellent mental health services – in particular, to improve the capability of primary care to provide and refer to high quality services. We will help local Minds deliver excellent services and support for those in need.’*

**Implications for change:**

Achievement of this strategic priority will mean widening scope of our existing services or activities. Therefore, we will need to identify appropriate training for trustees, staff, volunteers, strengthen some policies and procedures, bring in new expertise and communicate this change to external partners.

**Geographical scope & partnership(s):**

Local delivery & capacity building in partnership with BMER community groups, voluntary sector specialists (Samaritans), Mind network & public sector (CNWL NHS Foundation Trust, Harrow Council & Harrow CCG)

Strategic goals	Approach to achieving goal	Baseline quantitative/ qualitative 2014
a) Increase local community capacity to support people in crisis through new Mental Health First Aid training programme (or similar), including a culturally tailored programme for BMER & faith communities	Need: Community resilience (Training and awareness) Outcome: D-4 Practitioners more confident and able to act when encountering mental distress Approach: Capacity building, service delivery	We have run service user-led mental health awareness training workshops for 6 years and have secured three-years further funding from the Big Lottery Fund to continue this programme 2014-17, which could form the basis of achieving this target.
b) Expand capacity of our Mental Health Information Service to offer a fast track crisis response for timely access to health & social care support or to meet basic living needs	Need: Services support recovery/prevention (Information, advice & Advocacy) Outcome: A-2 People access the support and services they need Approach: Service delivery	We have secured funding for our Mental Health Information Service 2013-16, which offers a timely response to helpline calls within available resources and has no dedicated crisis response capability.

c) Explore how to apply locally the evidence gathered & recommendations by the Mind network about mental health crisis services	Need: Recovery (User Voice) Outcome: C-3 People have a greater voice Approach: Campaigning	We facilitate the Harrow User Group, which is the voice of mental health service users in Harrow. We have limited coordination with the Mind nationally about campaigns.
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**Strategic priority 3: Increasing support & opportunities**

Increase peer support and personal development opportunities across all our services and into mainstream community life. (for example employment, training, education, sport, leisure, volunteering, social opportunities or cultural activities)

**Mind' National Strategy B) Empowering choice:** Empower people who experience a mental health problem to make informed choices about how they live and recover.

*'Everyone in England and Wales with mental health problems can access peer support.'*

**Mind' National Strategy D) Enabling social participation:** Open the doors to people with experience of mental health problems participating fully in society.

*'At least 11,000 additional people with experience of mental health problems benefit from access to leadership opportunities to enable them to become positive role models for others and to society as a whole. At least 160,000 additional people with mental health problems take an active part in the life of their communities and have the financial resources to do so.'*

**Implications for change:** Achievement of this strategic priority will mean developing a comprehensive peer support model across the organisation. This will require developing a model for Mind in Harrow and training trustees, staff and volunteer as well as promoting this model to service users.

**Geographical scope & partnership(s):** Local delivery & influence with public sector (CNWL NHS Foundation Trust, Harrow Council & Harrow CCG, Jobcentre Plus), voluntary sector, private sector & colleges. Regional partnerships with Mind in London and nationally with Mind.

Strategic goals	Approach to achieving goal	Baseline quantitative/ qualitative
a) Expand peer-led and mentoring/coaching capacity across all services through core peer support development programme learning from Mind network national peer research/projects	Need: Recovery, prevention, community resilience (cross-cutting). Our capacity building for service delivery Outcome: B4 Service users become more active citizens Approach: Capacity building, service delivery	We have two peer led advocacy projects one of which has been in operation for several years. We are also currently working closely with Mind to develop a Peer Led national product for LMA's.

<p>b) Sustain and expand our education, training &amp; vocational opportunities to tackle mental health stigma in society and to enable participation in mainstream community life (e.g. Stepping Stones Project, Head for Work, Performing Arts &amp; Heritage Lottery projects)</p>	<p>Need: Recovery process (Employment and training, social inclusion)  Outcome: B5 More service users are employed or volunteering  Approach: service delivery</p>	<p>We have delivered a variety of projects in this area for 15 years. We were awarded 3yr funding from the Big Lottery in 2014.</p>
<p>c) Sustain our campaigning from a service user-led perspective, encouraging service users to be their own experts, to influence better integration between health &amp; social care services and wider policy (eg promotion of mental health 'social prescribing' approach for GPs)</p>	<p>Need: Services support recovery (User Voice)  Outcome: C3 Service users have a voice  Approach: Campaigning, capacity building</p>	<p>We have an existing User Led project which has been working for over 15 years and has strengthened its engagement with new commissioning bodies and partners e.g. CCG and Health watch</p>
<p>d) Increase peer-led social, vocational and self-help group opportunities for people experiencing mental health problems</p>	<p>Need: Recovery process  Outcome: B2 Service user gain skills  Approach: service delivery</p>	<p>We delivered a peer-led social pilot project in 2012-13 and have funding via the Mutual Support Network in 2014 to continue some of this work.</p>
<p>e) Sustain Stepping Stones Groups &amp; Befriending funded through personal budgets &amp; explore diversification to offer Personal Assistants and Coaching services, including peer delivered</p>	<p>Need: Recovery process  Outcome: B1 Service users develop and maintain social networks  Approach: service delivery</p>	<p>We have been transitioning 2 key projects to personal budgets since 2012 and have established good working relationships with CNWL in this area, which we will continue to develop.</p>

**Strategic priority 4: Improving early help**

Improve access to early help for people experiencing mental health problems and their families through a holistic range of services.

**Mind' National Strategy B) Empowering choice:** Empower people who experience a mental health problem to make informed choices about how they live and recover.

*'There is a 50% increase in the number of people with mental health problems who are able to access timely and individual support to make their own choices via the One Mind network'*

**Mind' National Strategy C) Improving services and support:** Ensure people get the right services and support at the right time to help their recovery

*'Mind mental health services and at least 10% more other mental health services provide person-centred, recovery orientated, holistic treatment and the opportunity to be involved in decision about their care and the design and delivery of services.'*

**Implications for change:** Achievement of this strategic priority will mean developing new partnerships and exploring funding opportunities to promote the use and access of early help via a holistic range of services.

**Geographical scope & partnership(s):** Local delivery & influence with public sector (CNWL NHS Foundation Trust, Harrow Council & Harrow CCG, Jobcentre Plus), private sector & and voluntary sector. Regional partnerships with Mind in London and nationally with Mind.

<b>Strategic goals</b>	<b>Approach to achieving goal</b>	<b>Baseline quantitative/ qualitative 2014</b>
a) Explore potential to deliver new local preventative service(s) designed by Mind national service development programme	Need: Recovery, prevention, community resilience (cross-cutting) Our capacity building for service delivery Outcome: B3 Service users have a greater well being Approach: capacity building, service delivery	New are to Mind in Harrow, as currently not involved in this work being developed by Mind.

<p>b) Sustain our contribution to Harrow IAPT Service to achieve national targets for population reach and recovery through community engagement and campaign for wider choice of choice of talking therapies</p>	<p>Need: Community resilience &amp; prevention (Preventative, community well-being)  Outcome: A3 Service users have better mental health  Approach: service delivery</p>	<p>We have been delivering the Step 2 element of the Harrow IAPT service in partnership with CNWL for 3-4 years and have been commissioned to continue for 14/15.</p>
<p>c) Sustain Mental Health Information Service for timely access to health &amp; social care support and increase information for people affected by financial pressures and welfare cuts</p>	<p>Need: Services support recovery/prevention (Information, Advice &amp; Advocacy)  Outcome: C4 Service users are empowered to demand their rights  Approach: service delivery</p>	<p>Our current Mental Health Information Service ahs been expanded over the past 15 years to employ a part time worker via Council funding. Funding via NHS Harrow has been secured for a further year and the potential for new funding arrangements will be reviewed this year.</p>
<p>d) Increase availability and access to low cost or free complementary therapies, physical health &amp; mindfulness courses</p>	<p>Need: Community resilience and prevention (Preventative, community well-being and health activities)  Outcome: B6 Service users have improved physical health  Approach: campaigning, service delivery</p>	<p>This is an area which is new to Mind in Harrow, but we are committed to developing it as service users have highlighted as a priority.</p>
<p>e) Sustain Carers Respite family support service adapting service model to funding constraints</p>	<p>Need: Services support recovery/prevention (Carers support)  Outcome: C5 Carers get respite and feel supported  Approach: service delivery</p>	<p>Carers Respite has been offered successfully at Mind in Harrow for a number of years however the funding from the council has been significantly cut so we have to review the model which we have started in 2013/14.</p>

**Strategic priority 5: Empowering action**

Improve equality of treatment by NHS and Social Care/Welfare services for people who experience both mental health and other forms of discrimination.

**Mind' National Strategy: E) Removing inequality of opportunity:** Gain equality of treatment for people who experience both mental health and other forms of discrimination.

*'At least 10% more mental health service users from groups which experience multiple forms of discrimination report services which are culturally appropriate and easily accessible.*

*At least 20% of mental health service commissioners commit to changes in their services to better meet the needs of vulnerable migrants (subject to available funding).'*

**Implications for change:**

Achievement of this strategic priority will mean building on our progress to date collaborating with refugee communities and widening the reach of our existing services. Therefore, we will need to identify appropriate training for trustees, staff, volunteers, try out new ways to engage excluded groups, bring in new expertise and communicate this change to external partners.

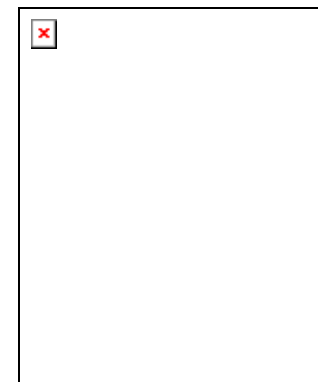
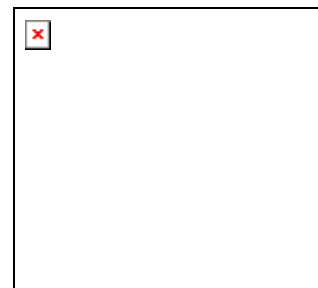
**Geographical scope & partnership(s):**

Local delivery & capacity building in partnership with BMER community groups, police, Healthwatch Harrow & public sector (CNWL NHS Foundation Trust, Harrow Council & Harrow CCG). Regional coordination with LGBT community group(s) and Mind network.

<b>Strategic goals</b>	<b>Approach to achieving goal</b>	<b>Baseline quantitative/ qualitative 2014</b>
a) Increase the capacity of all Mind in Harrow services to support and empower refugees and LGBT community members	Need: Recovery, prevention, community resilience (cross-cutting) Outcome: A-6 Inequalities in mental health between different groups reduce Approach: Our capacity building for service delivery	We have increased some engagement with refugee communities through our 2 year REACH project 2011-13 and could apply this learning to this area of development and members of a working group with CNWL NHS Foundation Trust to improve access for LGBT service users 2012-13.



<p>b) Expand 1:1 brokerage advocacy for migrant communities to tackle inequalities in access to NHS and Social Care/Welfare services &amp; influence commissioners to recognise the distinct needs of these communities.</p>	<p>Need: Services which support recovery (Advocacy &amp; User Voice)  Outcome: A-6 Inequalities in mental health between different groups reduce  Approach: Direct service delivery</p>	<p>We currently offer 1:1 brokerage advocacy for the Somali community and a peer-led empowerment project with Afghan women.</p>
<p>c) Sustain Bridging Cultures faith &amp; mental awareness project building on established partnerships</p>	<p>Need: Community resilience and prevention (Training and aware raising for community/practitioners)  Outcome: D-2 Attitudes towards people with experience of mental health problems improve  Approach: Capacity building</p>	<p>Our Bridging Cultures project is funded 2012-15. We have the opportunity to apply to the same funder to continue the long-term task of building trust with faith communities.</p>
<p>d) Sustain our BMER peer-led mental health awareness &amp; empowerment projects to tackle inequalities in treatment by public services and mental health stigma</p>	<p>Need: Community resilience and prevention (Training and aware raising for community/practitioners)  Outcome: A-6 Inequalities in mental health between different groups reduce  Approach: Capacity building</p>	<p>We currently run 4 mental health promotion &amp; empowerment migrant community projects, which could form the basis of achieving this strategic goal.</p>



**Strategic priority 6: Achieving sustainability**

Achieve both financial and operational sustainability in an era of austerity through strategic partnerships, organisational excellence, service innovation, enhanced communications and radically diversified income sources.

**E) Organisational excellence:** Make the most of our assets by building a culture of excellence.

*'We will achieve maximum impact across One Mind. We will work effectively together optimising our resources and united by shared goals and a culture of excellence which values involvement and diversity.'*

**Implications for change:**

Achievement of this strategic priority will mean widening scope of our existing range of income sources and deepening partners. Therefore, we would will need to identify appropriate training for trustees & staff, enhance ICT & financial systems, conduct due diligence on more formal integration of our operations, bring in new expertise and communicate this change to external partners.

**Geographical scope & partnership(s):**

Local capacity building and service development in partnership with voluntary sector organisations & public sector (CNWL NHS Foundation Trust, Harrow Council & Harrow CCG). Capacity building regionally with Mind in London and nationally with Mind and Mind Retail.

Strategic goals	Approach to achieving goal	Baseline quantitative/ qualitative 2014
a) Develop deeper strategic partnerships across the voluntary, statutory and private sectors to offer more integrated services in co-production with service users	Explore through both formal consortia and informal partnership structures	We are currently a key partner in a local voluntary sector consortium and a member of 3 other informal voluntary sector consortia. We are in partnership with CNWL NHS Foundation Trust to deliver psychological services.
b) Increase sharing of infrastructure services with other local Minds in London and explore more formal integration	Progress through the Mind in London business development structure	We have been a lead local Mind on a Mind in London working group to procure a database system and are involved on a working group to procure an ICT support provider.

<p>c) Radically diversify our income sources through Mind charity shops joint venture and purchase of studio flats for rental</p>	<p>Negotiate clear partnership arrangements and profit sharing agreement with Mind Retail for charity shops. Apply for capital funding to purchase studio flats with assistance from a specialist fundraising consultancy and ensuring a coordinated approach with local commissioners and housing support providers.</p>	<p>We have started the process of negotiation with Mind Retail for a charity shop joint venture. We have collaborated with Harrow Council Commissioning Team on changes to housing support provision. We experience of submitting a capital funding bid for a property purchase in 2012.</p>
<p>d) Expand our training offer through partnership with Mind's national training programme and explore potential to sell licensed package(s) of user-led training courses</p>	<p>Become a local Mind delivery partner for Mind's national training programme and apply for funding to develop licensed package(s) of user-led training courses building on the experience of delivery our Head for Work training project.</p>	<p>We have discussed becoming a local Mind delivery partner with Mind from 2012. We commissioned a consultancy in 2012-13 to assess the viability of selling an accredited training package to other local Minds, which recommended that we proceed.</p>
<p>e) Improve the quality &amp; impact our external communications to promote Mind in Harrow's Unique Selling Proposition (USP) &amp; vision</p>	<p>Develop a new statement of our USP and the vision of this Strategy to promote in mix of professionally designed promotional media</p>	<p>We have implemented Mind's national branding guidelines to our marketing materials and have received some feedback from external stakeholders that our communications could be improved.</p>
<p>f) Sustain achievement of Mind Quality Mark (MQM) top level award through our annual quality improvement planning</p>	<p>Align our annual quality improvement planning with Mind's latest revision of MQM</p>	<p>We achieved the top Level 3 MQM in 2013-14, improving on our Level 2 award 3 years previously. Mind has committed to simplify MQM in 2014 and introduce an new annual quality review online tool.</p>

### 3.2 Critical success factors - Infrastructure goals

In this section we explain what we believe to be the make or break infrastructure resources which we must have in place to make our Strategy happen. The section is structured in the same 12 areas as Mind's national quality assurance framework 'Mind Quality Mark' to align these goals with our annual quality improvement plans.

#### Critical Success Factors 1-3: Leadership, planning and partnerships

<b>Infrastructure goal 1: Leadership</b>		
It is critical for the success of our Strategy that every goal has clearly defined leadership responsibilities, capacity and accountability.		
<b>Lead Staff:</b>		
Chief Executive with Board of Trustees		
<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Enhance core staffing capacity to deliver service and sustainability strategic priorities	Underpins all strategic priorities 1-6	The current core staffing structure is over-stretched and could not achieve our Strategy without additional capacity.
b) Build core management succession planning into staff structure and all operations	Underpins all strategic priorities 1-6	There is over-reliance on the Chief Executive post for both internal & outward-facing leadership.
c) Enhance Board of Trustees capacity & skills for effective governance of new service strategic priorities (eg young people representation, earned income and retail experience)	Underpins all strategic priorities 1-6	We have an excellent, highly committed Board of Trustees with service users & diverse skills and backgrounds represented, which could be strengthened further.
d) Recruit service users as champions to increase the capacity of all Mind in Harrow services to support and empower refugees, young people and LGBT community members	Strategic priority 1: Young people Strategic priority 5: Inequalities in access	Refugees, young people and LGBT community members are under-represented in access to our services & in our service user engagement activities. We introduced improved equalities monitoring in 2012. CNWL NHS Foundation Trust's Diversity Lead is a Mind in Harrow co-opted Board member.

**Infrastructure goal 2 : Planning, monitoring and review**  
 It is critical for the success of our Strategy that we develop an annual action plan and monitor progress in co-production with our key internal stakeholders.

**Lead Staff:** Chief Executive with senior management team

Infrastructure goals	Relevant strategic priorities	Baseline quantitative/qualitative 2014
a) Re-align our planning, monitoring & review structures (Board of Trustees, staff roles, management teams & working groups) with our new strategy	Underpins all strategic priorities 1-6	We have been operating with some structures unchanged for a number of years to deliver our previous strategy and our management structure was revised in 2013.
b) Implement a new annual planning framework to measure progress against our strategic priority and infrastructure goals	Underpins all strategic priorities 1-6	We have been operating the same annual planning framework unchanged for a number of years to deliver our previous strategy.

**Infrastructure goal 3: Partnership and influencing**  
 It is critical for the success of our Strategy that we develop deeper local partnerships to influence local commissioning bodies together with deeper regional & national partnerships with the Mind network.

**Lead Staff:** Chief Executive with senior management team

Infrastructure goals	Relevant strategic priorities	Baseline quantitative/qualitative 2014
a) Define governance, management & staff roles in relation to partnership working to achieve our new strategic priorities	Underpins all strategic priorities 1-6	We have been operating with some structures unchanged for a number of years to deliver our previous strategy and our management structure was revised in 2013.
b) Pursue influence locally with NHS Harrow and Harrow Council at a senior level with voluntary sector partners	Strategic priority 6: Achieving sustainability	We achieved some influence with Harrow Council & Harrow CCG at a senior level in recent years, but with limited coordination with voluntary sector partners.
c) Enhance Board of Trustees & management team skills and knowledge about more formal service and organisation integration	Strategic priority 6: Achieving sustainability	We are lead partners in a local voluntary sector consortium and run an integrated psychology service with NHS, but we have limited in-house knowledge about more formal integration.

## Critical Success Factors 4-6: Use of resources

<b>Infrastructure goal 4: Financial management</b> It is critical for the success of our Strategy that we have appropriate financial systems & skills to respond to radical diversification of our income sources.		
<b>Lead Staff:</b> Finance & Operations Manager		
Infrastructure goals	Relevant strategic priorities	Baseline quantitative/qualitative 2014
a) Upgrade financial systems to manage increased demands of personalisation/earned income and improve staff access to timely financial management information	Underpins all strategic priorities 1-6	Current single-user Sage Line50 accounting system is limited in its reporting capabilities.
b) Enhance Board of Trustees & management team skills and knowledge about financial risks and rewards of new earned income enterprises	Underpins all strategic priorities 1-6	Our income is currently wholly grant-based. Organisational experience of retail, property management & training/consultancy sales is limited.
c) Improve longer-term financial planning & modelling to achieve our 5 year sustainability strategy goals	Strategic priority 6: Achieving sustainability	Annual budgeting cycle & reporting to Board with ad-hoc top-line longer-term projections for sustainability planning.

<b>Infrastructure goal 5: People management</b> It is critical for the success of our Strategy that our people are well-motivated and appropriately skilled to achieve high quality outcomes, particularly for the new strategic priorities.		
<b>Lead Staff:</b> Service Manager		
Infrastructure goals	Relevant strategic priorities	Baseline quantitative/qualitative 2014
a) Introduce a new staff well-being and CPD programme based on staff & volunteer feedback, including best practice support for staff & volunteers experiencing mental health problems.	Underpins all strategic priorities 1-6	Since 2012/13 we started conducting annual staff and volunteer surveys. A staff well-being working group was set up in 2014 to address the findings from the staff survey. We have an established CPD system in place which includes individual staff training budget allocations.

b) Increase our capacity to achieve new service strategic priorities through a programme of staff & volunteer training and recruit in new expertise, as needed.	Underpins strategic priorities 1-3	We have a volunteer management and staff Training programme in place which covers all mandatory training. The volunteer training programme has been streamlined in the last two years.
c) Co-produce guidance with service users about our approach to mental health promotion, prevention and recovery to train staff & volunteers for consistent high quality practice	Underpins all strategic priorities 1-6	In 2012 we started mandatory Service User Engagement Training to improve the practice across the workforce in methods to engage service users within their role.

<b>Infrastructure goal 6: General resources management</b>		
It is critical for the success of our Strategy that we have modern & reliable upgraded ICT and improved communications through new investment.		
<b>Lead Staff:</b> Finance & Operations Manager with senior management team		
<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Upgrade ICT systems to increase efficiency and improve access for staff & volunteers in collaboration with Mind in London procurement	Underpins all strategic priorities 1-6	Current server and PC operating systems are old and no longer supported by Microsoft. Hardware is old and unreliable
b) Continue to enhance the functionality of the Views cloud database system in collaboration with Mind network to improve efficiency, communications and reporting	Underpins all strategic priorities 1-6	New Views system currently still developing to capitalise on its increased functionality for analysing, reporting, communicating and remote collection of data
c) Improve our marketing & communications capacity to achieve our strategic goals	Underpins all strategic priorities 1-6	Currently given low priority within existing staff team to external communications and to developing public profile

**Critical Success Factors 7-9: Our values in action**

**Infrastructure goal 7: Engagement and participation**  
 It is most critical for the success of our Strategy that we truly co-produce all aspects of how we run with people experiencing mental health problems.

**Lead Staff:**  
 Service Manager with senior management team  
 Chief Executive with Board of Trustees

<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Develop an organisation-wide peer volunteering programme based on our existing volunteer systems and Mind's national peer support research	Strategic priority 3: Peer support/opportunities	In the last two years we have developed a streamlined volunteer training programme which has an organisational wide approach.
b) Strengthen service user engagement & co-production across the organisation through a more structured recruitment, personal development and support programme	Strategic priority 3: Peer support/opportunities And underpins service priorities 1-4	Our User Involvement Project has been in operation for 15 years which recruits and supports service users in coproduction and service user engagement.
c) Increase our satisfaction rating for service user engagement	Underpins all strategic priorities 1-5	We collate an annual service user satisfaction survey, which benchmarks the current position in relation to this area as of 2013.

**Infrastructure goal 8: Working together as One Mind**  
 It is critical for the success of our Strategy that we maximise the potential of the Mind network to achieve both service and sustainability strategic priorities.

**Lead Staff:**  
 Chief Executive with senior management team

<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Continue to pursue a lead role within Mind in London regionally and actively increase our profile to achieve our strategic priorities	Underpins all strategic priorities 1-6	Mind in Harrow Chief Executive is vice-chair of Mind in London group. We have led the development of the Mind in London Views database joint procurement and are connected to other local Mind working groups.



b) Actively increase our profile with Mind nationally to achieve our strategic priorities	Underpins all strategic priorities 1-6	In the past 3 years, we have delivered a Somali peer support project with Mind nationally, have been commissioned to deliver refugee needs and personalisation projects. Feedback through our stakeholder survey that we could be better at promoting our expertise to Mind nationally.
c) Assess our core management competencies & resources to market & delivery Mind's nationally branded new 'service products' and aim to pilot one 'service product' aligned with our strategic goals	Underpins service strategic priorities 1-5	Mind will be meeting Mind in London in 2014 to explain how the first 'service product' be implemented and we could opt to be an 'early adopter' site.

<b>Infrastructure goal 9: Equality and diversity in services</b>		
It is critical for the success of our Strategy that increase access and engagement from under-represented communities.		
<b>Lead Staff:</b> Service Manager with SMT Chief Executive with Board of Trustees		
<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Increase the accessibility of Mind in Harrow to refugee communities, LGBT communities & young people through a programme of training, image change & active external engagement	Strategic priority 5: empowering action	Our REACH project successfully increased refugee engagement using an organisation-wide approach which including training. We increased refugee engagement across the organisation by 15%.
b) Conduct an annual equality & diversity accessibility review against our baseline position and benchmarked against local demographic data	Strategic priority 5: empowering action	Conducted this review in 2013 fully for the first time to establish a baseline.
Increase our satisfaction rating for awareness and understanding of the cultural needs of our service users	Underpins service strategic priorities 1-5	We collated an annual service user satisfaction survey in 2013, which established an organisation-wide baseline for the first time.

c) Improve access to our office premises for people with physical disabilities or offer comparable alternative access to Mind in Harrow's activities	Underpins all strategic priorities 1-6	We have identified areas which require improvement when the team moved to the office in 2012.
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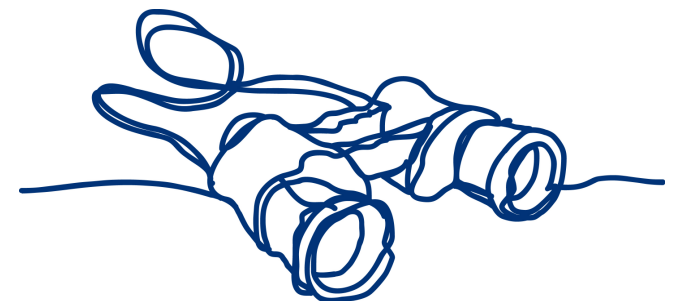
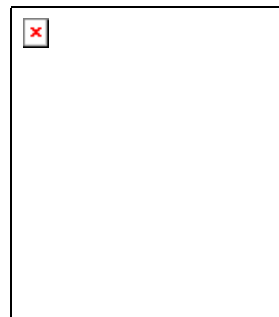
### Critical Success Factors 10-12: Service excellence

<b>Infrastructure goal 10: Quality of services</b>		
It is critical for the success of our Strategy that we continue to improve our quality through internal annual action plans and external recognition.		
<b>Lead Staff:</b> Service Manager with senior management team		
<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Sustain achievement of Mind Quality Mark (MQM) top level award through an annual quality improvement programme	Underpins all strategic priorities 1-6	Achieved level 2 in 2010 and achieved level 3 in 2013/2014 assessment process.
b) Improve coordination & consistency of quality practices across our services through a review of our structure and introduction of a person-centred Single Point of Referral (SPOR) process and guidelines	Underpins all strategic priorities 1-6	We currently use a draft version of the SPOR and started the process of creating guidance in 2014.
c) Explore practical & meaningful ways to benchmark our services against those regarded as the best in the field	Underpins all strategic priorities 1-6	We have benchmarked the Befriending service and IAPT service in terms of pricing, offer and performance from 2012-14.
d) Assess the value of external service or organisational quality marks in addition to MQM and if appropriate identify resources to achieve priority quality marks	Underpins all strategic priorities 1-6	We currently have no external service or organisational quality marks.

<b>Infrastructure goal 11: Safety of services</b>		
It is critical for the success of our Strategy that we sustain our reputation for offering safe, well-managed services.		
<b>Lead Staff:</b> Chief Executive with senior management team		
<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Sustain our contribution & engagement with Harrow Multi-Agency Safeguarding Board	Underpins service strategic priorities 1-5	Mind in Harrow Chief Executive is an active member of the Board and we regularly collaborate with Safeguarding Team.
b) Introduce an annual quality audit of the safety of our services (eg case file reviews for risk assessments, complaints & incidents) to be reported to our Board of Trustees with recommended improvements	Underpins service strategic priorities 1-5	We have conducted elements of this annual quality audit each year but inconsistently and not systematically.
c) Ensure that we continue to meet public sector commissioning external quality assurance requirements	Underpins service strategic priorities 1-5	We have introduced many new policies and procedures over the period of our last strategy to meet new commissioning requirements and conduct a timetabled policy review programme.

<b>Infrastructure goal 12: Impact and outcomes of services</b>		
It is critical for the success of our Strategy that we underpin all our services with an outcome-focus, which we evaluate in a user-friendly meaningful way and communicate externally.		
<b>Lead Staff:</b> Chief Executive with senior management team		
<b>Infrastructure goals</b>	<b>Relevant strategic priorities</b>	<b>Baseline quantitative/qualitative 2014</b>
a) Improve our evaluation experience for service users through simpler, more creative recovery journey tools and better use of technology	Underpins service strategic priorities 1-5	We have implemented Mind's Outcome Evaluation toolkit for all our services, but have received feedback from service users that our approach could be made more user-friendly.

b) Embed a cycle of learning from outcomes evaluation results to introduce quality improvements to our services & share externally	Underpins service strategic priorities 1-5	We have introduced a consistent outcome evaluation approach across all our services but do not consistently learn from or share results.
c) Develop new tools to collect external stakeholders feedback on the quality & impact of our services	Underpins all strategic priorities 1-6	We conducted telephone interviews with a limited number external stakeholders to give feedback for our Strategy and in 2014 will be piloting a new partner feedback survey for User Involvement Project.
d) Embed Mind's Outcome Evaluation Framework and Theory of Change into all our service operations	Underpins service strategic priorities 1-5	Over the past 3 years, we have embedded Mind's Outcome Evaluation Framework into all our services and have not yet connected this approach to an underpinning theory.



## 4. Resourcing the Strategy

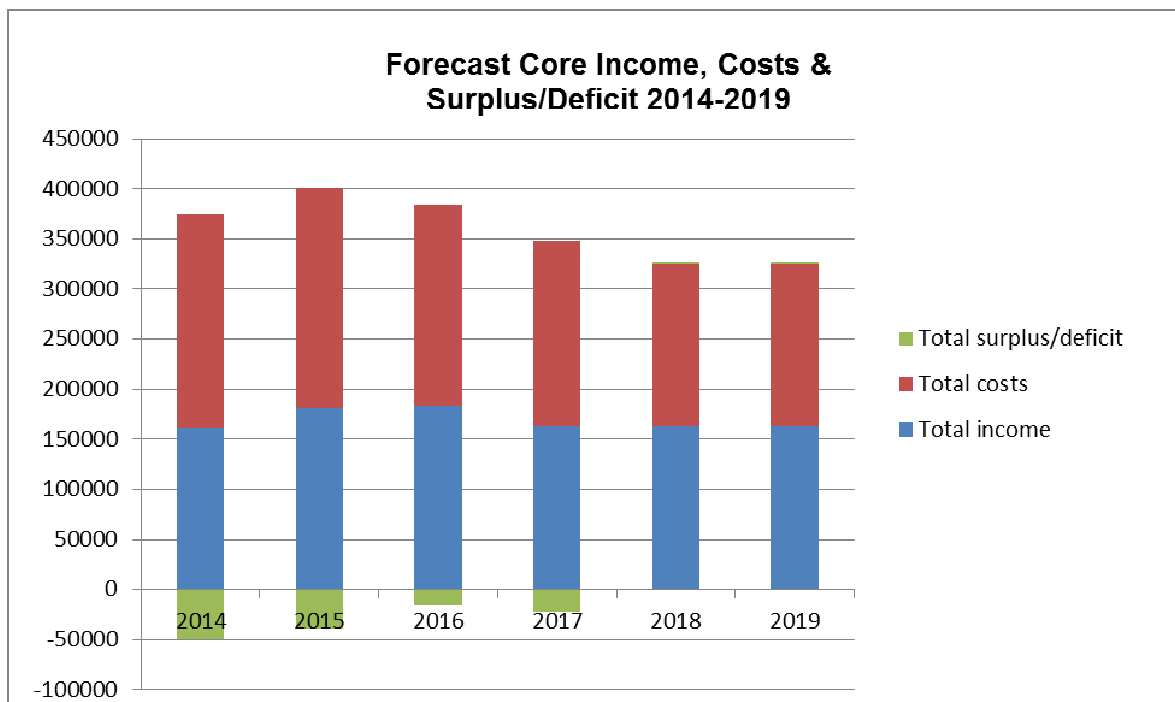
### 4.1 Strategic Priority 6: Achieving financial & operational sustainability

*Achieve both financial and operational sustainability in an era of austerity through strategic partnerships, organisational excellence, service innovation, enhanced communications and radically diversified income sources.*

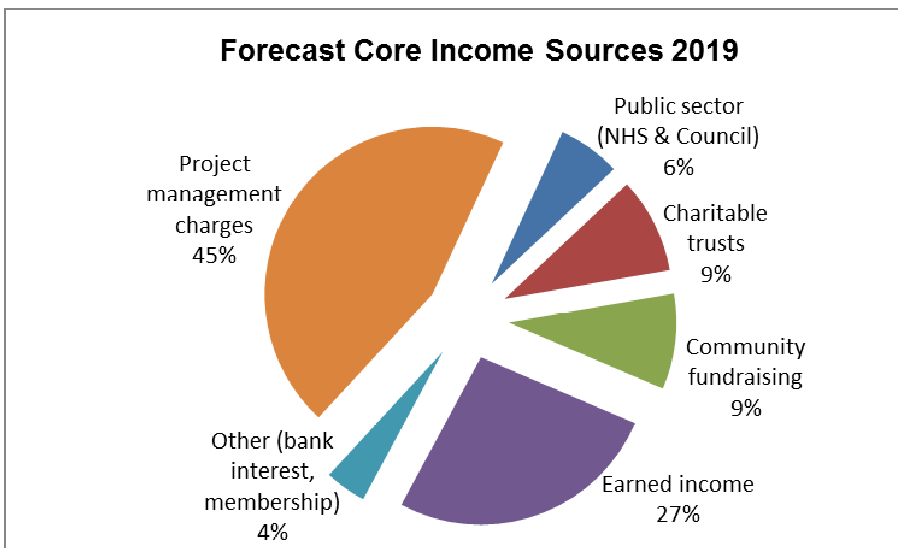
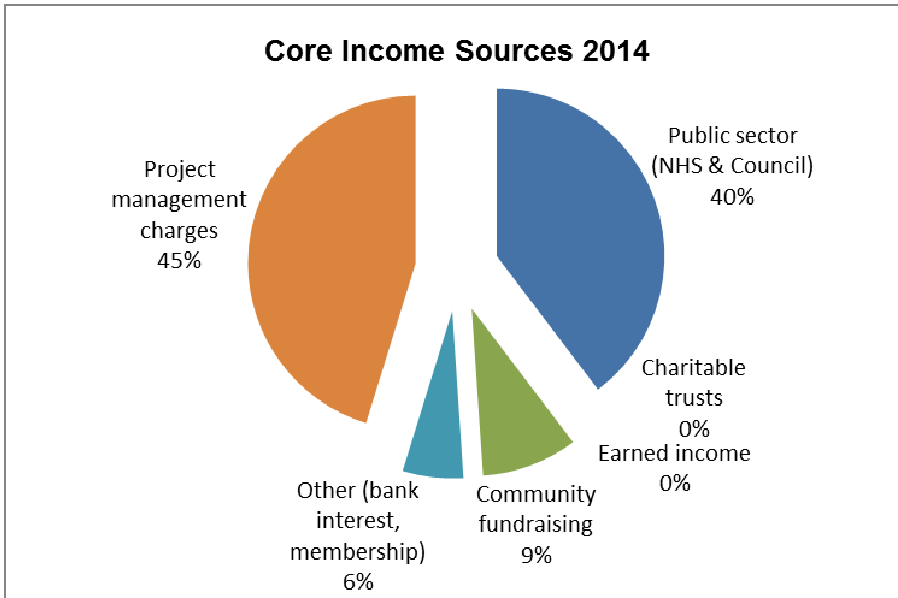
In summary, we aim to achieve financial sustainability and budget breakeven through the following actions:

- **Radically diversify our income sources** through new earned (for example charity shops, rental of studio flats, expanding our training services)
- **Invest in core staffing** capacity to enable Mind in Harrow to develop these diversified income sources.
- **Increase sharing of infrastructure** services with other local Minds in London and explore more formal integration.
- **Develop deeper strategic partnerships** across the voluntary, statutory and private sectors to offer more integrated services in co-production with service users
- **Fund these developments from our designated reserves** and not allowing our 'free reserves' to drop below £150,000, equivalent to around 25% of our running costs.

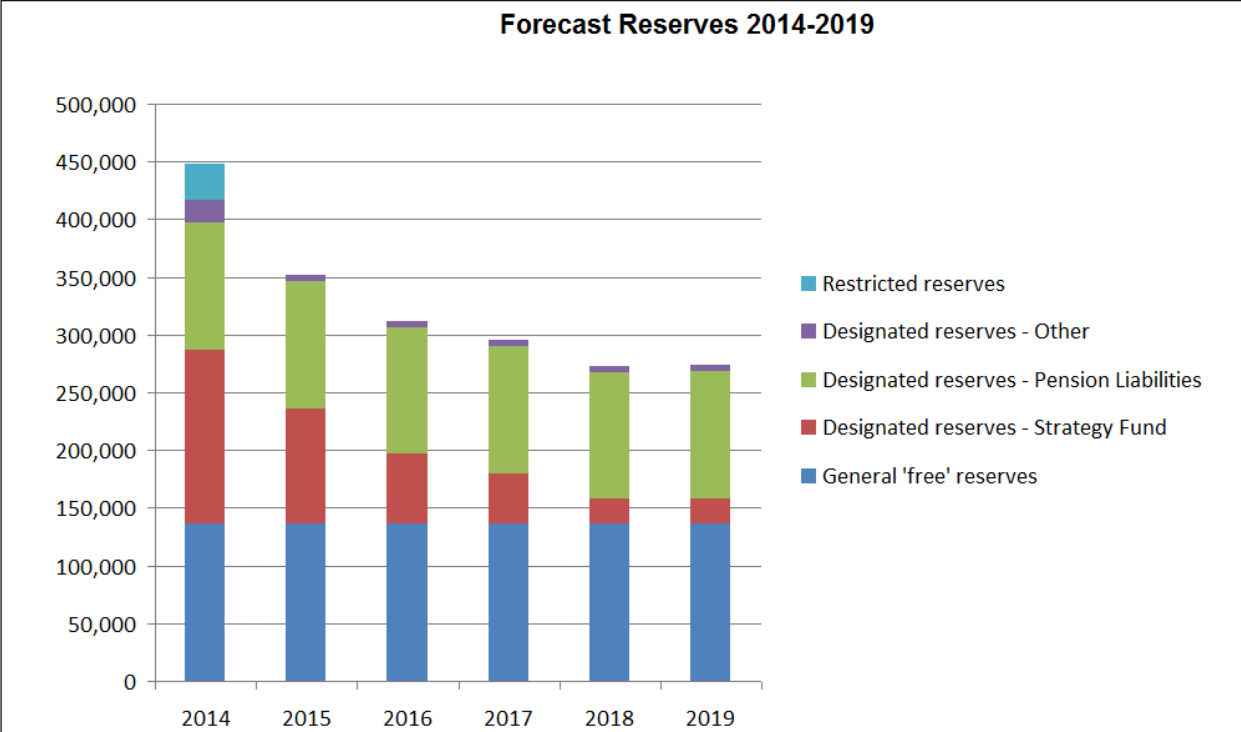
#### a) How we aim to achieve a breakeven Core Services budget



**b) How we aim for our Core Services income sources to change**



d) How we expect our reserves to change



## 4.2 Strategic Priorities 1-6: Funding our service priorities & achieving sustainability

In our ambition for the future, we want Mind in Harrow to be unstoppable together, work smarter and become more sustainable.

In terms of income generation, we want to be **unstoppable together** by increasing funding through partnerships.

We want to **work smarter** by increasing funding for capacity building within the organisation and externally in the community.

We want to be **more sustainable** by diversifying our core income sources to generate more earned income and overall to sustain our project funding at a similar level over the period of the Strategy 2014-20. For example, where 'new' income is referred to in the table below, in some areas this will replace existing funding which will come to an end.

Strategic priorities	Income generation strategy	Type of funding	Potential sources of income	Partnership opportunities
<p><b>Strategic priority 1:</b> Promote mental well-being with young people, parents and families at risk owing to their life disadvantages.</p>	<p>To achieve this strategic priority, we would need to raise £50-100K new grant income per year from new charitable trust or government sources for new projects or initiatives.</p>	<p>Revenue funding for staffing and project running costs</p>	<p>Grants from local, regional or national charitable trusts or Big Lottery programme(s), contract funding from local or national government programmes targeting young people</p>	<p>Local partnership application with charities specialising in support to young people possible or regional partnership application with local Minds in London</p>
<p><b>Strategic priority 2:</b> Build a 'Suicide Safer Community' in Harrow to reduce suicide and self-harm and to support people experiencing mental health crisis.</p>	<p>To achieve this strategic priority, we would need to raise £30-£50K new income per year from charitable trust, government sources or from earned income for enhanced capacity within existing projects or initiatives.</p>	<p>Revenue funding for staffing and project running costs</p>	<p>Grants from local, regional or national charitable trusts or Big Lottery programme(s), contract funding from local or national government programmes and earned income from Mental Health First Aid (or similar) training delivery</p>	<p>Partnership with Mind for nationally designed suicide prevention service possible and local partnership with other information/support charities, including Samaritans, for rapid response service.</p>



<p><b>Strategic priority 3:</b> Increase peer support and personal development opportunities across all our services and into mainstream community life.</p>	<p>To achieve this strategic priority, we would need to raise £30-£50K new income per year from charitable trust or government sources for enhanced capacity within existing projects or initiatives. We would also need to sustain and increase our income from personal budgets from around £50K-80K.</p>	<p>Revenue funding for staffing and project running costs</p>	<p>Grants from local, regional or national charitable trusts or Big Lottery programme(s), contract funding from local or national government programmes. Personal budget funding via CNWL NHS Foundation Trust with possibility of regional expansion and via introduction of health budgets by NHS.</p>	<p>Partnership within national or regional Mind network possible for peer support development as a national strategic priority for Mind. Local partnerships with other social care charities or mainstream organisations for vocational or educational projects.</p>
<p><b>Strategic priority 4:</b> Improve access to early help for people experiencing mental health problems and their families through a holistic range of services.</p>	<p>To achieve this strategic priority, we would need to raise £30-£50K new income per year from charitable trust or government sources for new projects or initiatives. Possible personal budget or health budget funding sources for new projects.</p>	<p>Revenue funding for staffing and project running costs</p>	<p>Grants from local, regional or national charitable trusts or Big Lottery programme(s), contract funding from local or national government programmes. Personal budget funding via CNWL NHS Foundation Trust with possibility of regional expansion and via introduction of health budgets by NHS.</p>	<p>Partnership with Mind for nationally designed primary care prevention service possible and local partnerships with other social care charities or mainstream organisations for holistic preventative services.</p>

<p><b>Strategic priority 5:</b> Improve equality of treatment by NHS and Social Care/Welfare services for people who experience both mental health and other forms of discrimination.</p>	<p>To achieve this strategic priority, we would need to raise £30-£50K new income per year from charitable trust or government sources for enhanced capacity within existing projects or initiatives and new projects.</p>	<p>Revenue funding for staffing and project running costs</p>	<p>Grants from local, regional or national charitable trusts or Big Lottery programme(s), contract funding from local or national government programmes.</p>	<p>Partnership within national or regional Mind network possible as improving equality of treatment is a national strategic priority for Mind and partnerships with local or regional BMER &amp; LGBT charities possible.</p>
<p><b>Strategic priority 6:</b> Achieve both financial and operational sustainability in an era of austerity.</p>	<p>To achieve this strategic priority, we would need to raise a minimum of £50K new additional core income per year by diversifying our sources into earned income from charity shop(s), rental of flats and delivery of training. We would need to raise between £350-500K capital funding to buy 2 flats to achieve our income diversification strategy.</p>	<p>Revenue income, partly generated as a result capital funding raised and invested</p>	<p>Earned income from charity shop sales, flats rental via housing benefit claimants, training delivery to companies and selling a licensed Mind in Harrow training package to other local Minds. Capital funding for flats purchase from national government programmes.</p>	<p>Partnership with Mind Retail for a profit share agreement for 1-2 new charity shops in Harrow. Partnerships with Harrow Council for flat rental to housing benefit claimants possible and with Mind network for new training initiatives.</p>

## 5. Evaluating our Strategy & Impact

### 5.1 What we commit to evaluate

We will aim to evaluate whether we are achieving our Strategy across a 'balanced scorecard' of four areas, which will keep our focus on what is important.

- Our service users (Strategic service priorities 1-5)
- Our financial sustainability (Strategic sustainability priority 6)
- Our people (Strategy infrastructure goal: Leadership & People Management)
- Our reputation (Strategy infrastructure goals: Quality & Evaluating Impact )

### 5.2 How we will evaluate our progress & impact

The table below outlines how we will evaluate our progress & impact. We provide more detail here on some key aspects of our approach to evaluation.

#### ***a) Measuring progress:***

We will develop an annual action plan with SMART goals for each our strategic priorities. We will evaluate our progress to achieve goals through a 'traffic light' system (green achieved, amber part-achieved, red not started and pink exceeded). We will review and report progress to our stakeholder sub-group, comprising representatives from service users, carers, staff, volunteers and our Board of Trustees.

Our threshold for measuring achievement of the strategic service priorities will be 75% achievement of the individual service goals.

#### ***b) Measuring service outcomes***

Our service evaluation is underpinned by Mind's 'Theory of Change', which is a coherent framework of outcomes describing how we aim to work with people to realise change in their lives for Promotion of well-being & resilience, Prevention and Recovery. We have implemented Mind's Outcomes Evaluation Toolkit across all our services so that our service users self-evaluate their progress to better mental health through a consistent approach.

A partnership project with local Mind's in London in 2013 jointly procured a new data management tool called Views. We will be using this new system to improve our service outcomes reporting. <http://www.views.coop/>

In this Strategy, we have committed to strengthen our approach to outcomes evaluation further through our **Infrastructure goal 12: Impact and outcomes of services.**

c) **Summary of what and how we will evaluate**

<b>Strategic Priorities</b>	<b>What we will evaluate Key Performance Indicators (KPIs)</b>	<b>How we will measure</b>
<p><b>Our Service users</b></p> <p>(Strategic service priorities 1-5)</p>	<p><b>KPI1:</b> Service users improved satisfaction with engagement/co-production opportunities within Mind in Harrow and how services have responded to their individual cultural needs</p> <p><b>KPI2:</b> Service user outcomes achieved through our strategic priorities</p> <p><b>KPI3:</b> 75% service goals achieved to fulfil strategic priorities</p>	<p><b>KPI1:</b> Annual satisfaction survey and analysis of results, including some comparative demographic analysis</p> <p><b>KPI1:</b> Equalities monitoring for improved access for cultural communities</p> <p><b>KPI2:</b> Mind's Outcomes Evaluation Toolkit</p> <p><b>KPI3:</b> Annual action plan service goals evaluated quarterly via traffic light system</p>
<p><b>Our financial sustainability</b></p> <p>(Strategic sustainability priority 6)</p>	<p><b>KPI4:</b> % income diversified compared to strategy target and budget break even target achieved</p> <p><b>KPI5:</b> Strategic sustainability goals &amp; infrastructure goals achieved</p>	<p><b>KPI4:</b> Annual budgeting and audit</p> <p><b>KPI5:</b> Annual action plan service goals evaluated quarterly via traffic light system</p>
<p><b>Our people (trustees, volunteers &amp; staff)</b></p> <p>(Strategy infrastructure goals: Leadership &amp; People Management)</p>	<p><b>KPI6:</b> Staff well-being at work improved</p> <p><b>KPI7:</b> Trustee &amp; volunteer satisfaction rating improved</p>	<p><b>KPI6:</b> Annual Staff well-being survey</p> <p><b>KPI7:</b> Annual trustees &amp; volunteers satisfaction survey</p>
<p><b>Our reputation</b></p> <p>(Strategy infrastructure goal: Quality &amp; Evaluating Impact)</p>	<p><b>KPI8:</b> Stakeholder feedback &amp; rating of Mind in Harrow improved</p>	<p><b>KPI8:</b> New annual external stakeholder survey</p> <p><b>KPI8:</b> MQM quality improvement plan reviewed quarterly and sustain top level MQM award</p>

## Appendix A: Table Local Mind outcomes

Local Mind outcomes
A. People have better mental health
A-1 People have better mental health A-2 People access the support and services they need A-3 People are able to self-manage A-4 People feel more informed about their health and welfare A-5 People have reduced admissions to acute wards A-6 Inequalities in mental health between different groups reduce
B. People live fuller lives
B-1 People develop and maintain social networks B-2 People develop their skills B-3 People build their self-esteem B-4 People become more active citizens B-5 More People are employed or volunteering B-6 People have improved physical health B-7 People have greater well-being B-8 People are supported to stay in employment
C. People are supported and empowered
C-1 People are supported to live as independently as possible C-2 People are better able to manage their finances C-3 People have a greater voice C-4 People are empowered to demand their rights C-5 Carers get respite and feel supported C-6 Carers have greater well-being
D. People have greater awareness of mental health
D-1 People have improved knowledge of mental health and how to manage it D-2 Attitudes towards people with experience of mental health problems improve D-3 Behaviour towards people with experience of mental health problems improves D-4 Practitioners more confident and able to act when encountering mental distress D-5 Workplaces are more mentally healthy