Consultation response form: - *Together for Mental Health* Delivery Plan (2016-19)

Overview	Proposed <i>Together for Mental Health</i> Delivery Plan 2016-19
How to respond	Responses should be submitted by 4 April 2016 to: <u>mentalhealthandvulnerablegroups@wales.gsi.gov.uk</u> Alternatively you can send the form to:
	Mental Health and Vulnerable Groups Health and Social Services 4 th Floor, North Welsh Government Cathays Park Cardiff CF10 3NQ
Further information and related documents	Large print, Braille and alternative language versions of this document are available on request.

Contact details	If you have any queries on this consultation, please email:
	mentalhealthandvulnerablegroups@wales.gsi.gov.uk

Data protection How the views and information you give us will be used

Any response you send us will be seen in full by Welsh Government staff dealing with the issues which this consultation is about. It may also be seen by other Welsh Government staff to help them plan future consultations.

The Welsh Government intends to publish a summary of the responses to this document. We may also publish responses in full. Normally, the name and address (or part of the address) of the person or organisation who sent the response are published with the response. This helps to show that the consultation was carried out properly. If you do not want your name or address published, please tell us this in writing when you send your response. We will then blank them out.

Names or addresses we blank out might still get published later, though we do not think this would happen very often. The Freedom of Information Act 2000 and the Environmental Information Regulations 2004 allow the public to ask to see information held by many public bodies, including the Welsh Government. This includes information which has not been published. However, the law also allows us to withhold information in some circumstances. If anyone asks to see information we have withheld, we will have to decide whether to release it or not. If someone has asked for their name and address not to be published, that is an important fact we would take into account. However, there might sometimes be important reasons why we would have to reveal someone's name and address, even though they have asked for them not to be published. We would get in touch with the person and ask their views before we finally decided to reveal the information.

Responses to consultations may be made public – on the internet or in a report.

If you would prefer your response to be kept confidential, please tick here:

1. Contact Details

Your name:	Annie Muyang (this name to be used for queries only, please ascribe authorship to the organisation)
Organisation (if applicable):	Royal College of Nursing Wales
Email	Anne.Muyang@rcn.org.uk
Contact telephone number	02920 680 754
Your address	Royal College of Nursing Wales King George V Drive East Cardiff CF14 4XZ

2. Are you responding as an individual or on behalf of an organisation?

Please tick box.

On behalf of an organisation (please tell us which organisation)

Royal College of Nursing Wales

3. Structure of delivery plan

Together for Mental Health, the Welsh Government's 10 year strategy to improve mental health and wellbeing was published in 2012 following significant engagement and consultation with key partner agencies, stakeholders, services users and carers It is a cross-government strategy and covers all ages, ranging from a whole population approach in improving the mental well-being of all residents in Wales, through to the support needed for those with a severe and enduring mental illness. The strategy consists of five chapters and is underpinned by 18 outcomes. These were subject to detailed formal consultation in 2012 and remain unchanged for the lifetime of this delivery plan. These outcomes have been mapped to the Goals contained within the Wellbeing of Future Generation (Wales) Act 2015.

Following feedback from stakeholders we have laid out the priority areas, by subject, detailing links back to the relevant chapter areas where required for ease of reading

Question 1

Do you feel that there are any priority areas missing from the delivery plan? Please tick appropriate box

		Partly
The overarching priority areas identified when Together for Mental Health		
was first drafted remain pertinent, and provide the basis for continuous and		
sustained improvements in mental healthcare in Wales during the lifetime of		
the strategy.		

The Royal College of Nursing calls for a clear workforce development and education strategy for mental health nursing in Wales that will meet the future mental health needs of children or adults. There needs to be sustainable funding for post registration education. Specialist education is needed in fields such as eating disorders, alcohol and substance misuse, cognitive behavioural therapy, family work, and personality disorder.

Question 2

Within each priority area we have identified a number of goals and key actions. Do you feel these are the right ones? Please tick appropriate box

		Partly	
The Royal College of Nursing is overall supportive of the priority areas, goals			
and key actions that have been identified in this consultation document -			
however, there are several priorities which could be explored further.			

The goals and key actions seem proportionate and deliverable. It is pleasing that there are goals and key actions that relate to mental healthcare for all key services (i.e. CAMHs, Adult and Older Adults – and dementia services).

We welcome priority 11.3, to ensure a competent and sustainable workforce that helps people improved health as well as treat sickness. We hope this is reflected and evidenced through the health boards IMTP and we expect to see a planned increased in a the number of mental health nurses, in particular those with advanced skills.

Priority 2.3 fails to mention care leavers (not mentioned) when discussing paying particular attention to children in vulnerable groups such as children with sensory impairments, Learning Disabilities, young offenders, those looked after and young carers.

In regards to priority 3.1(iii), residential and inpatient services also need investment. The pressure on a limited number of places can mean that children and young people are inappropriately placed either in adult areas or sometimes out of Wales all together. Living areas are sometimes inappropriately mixed gender resulting in strategies for dealing with sexual harassment or assault being flawed or unable to be implemented. Further to this, the issue is likely to be staffing numbers and ensuring staff have the knowledge, skills and competence.

Priority 5.5, which refers to ensuring that people in crisis and in contact with police are managed appropriately with dignity and respect – unscheduled care services (such as drop-in centres, or A&E departments) should all be designed to have the facilities and expertise to engage with people in a mental health crisis. All local health boards should have well developed multi agency crisis plans and protocols to enable people to access services outside of "office hours".

In regards to priority 7.2, the people of Wales require access to high quality psychological services (such as cognitive behavioural therapy or mindfulness) for mild to moderate anxiety or depression. These should be available in primary care without an excessive waiting list. These services have a proven evidence base and can help people return and maintain an active life. Psychological interventions should also be available to those with serious mental illnesses as stated in NICE guidelines.

For priority 10.1, the 2015 spot check on older people's mental health wards highlighted areas that required national improvement.

- Ensuring older people have access to daily activities on wards;
- Staff need to feel they can raise concerns easily; have effective training and understand the necessary legal safeguards

- The need for improvements to ward environments, in particular ensuring simple maintenance tasks and repairs are undertaken promptly

Question 3

Do you think we have the correct balance between improving the mental health and resilience of the whole population and the care and treatment for those individuals with mental health problems?

Yes

There seems to be a fair balance between these strategic priorities throughout the plan. It is imperative that services to those with enduring and serious mental illnesses (often serving a very vulnerable and "silent" client group) do not suffer in order to fund emerging services and "whole population" initiatives.

We are pleased to see cross departmental inclusion in the delivery plan i.e. across health, education and social care.

Question 4

The introduction to the delivery plan provides information on the prudent health and care agenda. Do you think we should include any other actions in the delivery plan around the prudent agenda and how this is rolled out across Wales in terms of best practice?

No

Where you have ticked 'Yes' please explain what else you feel could be done?

We are supportive of the prudent healthcare approach. It will ensure that the very challenging agenda facing mental healthcare planners and service providers is tackled appropriately, fairly and in an evidence-informed way. The emphasis in prudent healthcare on co-production is entirely congruent with the best traditions of mental health service development in Wales.

Question 5

Do you think the actions will provide a positive impact of the proposals for people with the following protected characteristics:-

- Disability
- Race
- Gender and gender reassignment
- Age
- Religion and belief and non-belief

- Human Rights
- Children and young people

Yes

The Royal College of Nursing Wales is pleased to see that children and young people have been included within the priority areas, and that there are timelines built into performance measures to determine progress. Further to this, it is good to see early intervention in maternal mental health, resilience and positive attachment in light of clear evidence about the first 1001 days.

RCN Wales believes that the pre-16 education curriculum should include the teaching of strategies to develop emotional resilience.

We are also pleased also to note that finance around mental health is to be protected so as to ensure continued investment. However is this against a backdrop of reduction in third sector funding which may deliver some of the Tier 1 and Tier 2 interventions, which brings into question whether or not this is sufficient.

In respect of up skilling the health, education and social care staff in respect of children and young people's mental health, there are many resources that could be utilised. MindEd is a free education resource on children and young people's mental health in which the Royal College of Nursing has been a partner in developing (<u>https://www.minded.org.uk/</u>) and there are also RCN resources for nurses who are not mental health specialists (i.e. aimed at health visitors, school nurses, and children's nurses)/

We are also pleased to see inclusion of 'young carers', of which the RCN has learning resources for school nurses and community children's nurses available.

Question 6

Do you think the actions will provide a positive impact on the opportunities for use of the Welsh language?				
Yes				
We are very pleased to see the inclusion of the More than just words strategy and providing resources to staff to provide the 'active offer', and we would like to see the opportunity for the use of the Welsh language when dealing with vulnerable individuals who are accessing treatment such as counselling etc.				
Further to this, workforce p		,		

Further to this, workforce plans in mental health should provide opportunity to educate nurses in the medium of Welsh. When creating job descriptions for positions within mental health teams, these job descriptions should reflect the linguistic skills required for that particular area, such as the Welsh language.

7. Additional Comments

We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use the space below to comment.

On the basis of feedback from our members (and despite the assurance work previously undertaken by the Welsh Government), we remain unconvinced that the mental health funding ring-fence is "intact" across Wales. It is imperative that the Welsh Government r keeps this issue under rigorous review and scrutiny.

The success of the new delivery plan will be dependent on robust oversight of its delivery by Welsh Government (including objective validation approaches). The RCN in Wales would be happy to support the Welsh Government with this. We are pleased that mental healthcare has remained real priority for the current Welsh Government (and the mental health agenda benefits from genuine cross-party co-operation and support). We remain hopeful that this remains the case when the new National Assembly for Wales is elected in May 2016.

Royal College of Nursing Wales

The RCN is the world's largest professional union of nurses, representing over 430,000 nurses, midwives, health visitors and nursing students, including over 25,000 members in Wales. The majority of RCN members work in the NHS with around a quarter working in the independent sector. The RCN works locally, nationally and internationally to promote standards of care and the interests of patients and nurses, and of nursing as a profession. The RCN is a UK-wide organisation, with its own National Boards for Wales, Scotland and Northern Ireland. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing.

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.