

CYPE(5)-24-19 - Paper to note 1

Vaughan Gething AC/AM
Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref: MA-C-VG-0072-19

Lynne Neagle AM
Chair, Children, Young People and Education
Committee

Dai Lloyd AM
Chair, Health, Social Care and Sport Committee

National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

12 July 2019

Dear Lynne and Dai,

In our meeting on 2 April, I agreed to share with you the draft Together for Mental Health Delivery Plan 2019-22, prior to formal consultation (attached).

As we discussed, the draft delivery plan aims to prioritise and refocus the current range of commitments and recommendations into a coherent and deliverable work plan for both Welsh Government and delivery partners. This includes commitments made in *Prosperity for All*, *A Healthier Wales* and the significant number of related Assembly Committee reports published during the last 18 months. In particular, the priority themes included in the plan have been shaped by the recommendations in the *Mind over Matter*; *Everybody's Business*; *Perinatal Mental Health* and *Use of Anti-psychotic Medication in Care Homes* Committee reports.

For ease, I've included a summary of the priority areas included in the draft plan below:

- 1. Preventing poor mental health and maintaining mental well-being** – *through targeted work on prevention and cross-Government action on the wider determinants of mental health and well-being.*
- 2. Improving access to support for the emotional and mental health well-being of children and young people** - *improving access and ensuring sustainable improvements to timeliness of interventions, as well as supporting the new curriculum and whole school approach. Extending the reach of NHS services into schools and filling gaps in services within both primary and secondary care through Child and Adolescent Mental Health Services (CAMHS).*
- 3. Crisis and Out of Hours provision for children and adults** – *moving to a common, multi agency offer across Wales.*

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Gohebiaeth.Vaughan.Gething@llyw.cymru
Correspondence.Vaughan.Gething@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

4. **Improving the access, quality and range of psychological therapies across all ages** - *to deliver a significant reduction in waiting times by the end of this Government, increase the range of therapies offered and support the workforce to provide these interventions to improve service user experience.*
5. **Improving access and quality of perinatal mental health services** – *further development of perinatal mental health services including in relation to quality standards and care pathways and the provision of in-patient provision.*
6. **Improving quality and access to services whilst developing recovery orientated services** – *including responding to Healthcare Inspectorate Wales/Care Inspectorate Wales thematic reviews and reviews by NHS Delivery Unit.*
7. **Supporting vulnerable groups** – *with a focus on improvements to services for eating disorders, offenders (including prison health and the Youth and Female Offender Blueprints) and co-occurring mental health and substance misuse issues.*

These priority areas and the improvements we want to see are dependent on a number of overarching work streams which will also need to be prioritised but will continue beyond the life of the delivery plan. These include improving outcome data, developing the workforce, strengthening third sector and service user engagement and improving access to services in the Welsh language.

The draft delivery plan, which has been informed by the views of service users and a range of partners, has been agreed by Cabinet and a public consultation is planned to commence this month.

Yours sincerely,

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, flowing style.

Vaughan Gething AC/AM

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services



Welsh Government
Consultation Document

Together for Mental Health Delivery Plan 2019-2022

Date of issue: 18 July 2019

Action required: Responses by 30 August 2019

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

Overview	This consultation seeks your views on the Together for Mental Health Delivery Plan 2019-2022.
How to respond	This consultation will close on 30 August 2019. You can respond online, by e-mail or by post. Online Please complete the consultation response form on the consultation pages of the Welsh Government website. E-mail Please complete the consultation response form and send it to: mentalhealthandvulnerablegroups@gov.wales Post Please complete the consultation response form and sent it to: Mental Health, Vulnerable Groups & Offenders branch 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. Mae'r ddogfen yma hefyd ar gael yn Gymraeg / This document is also available in Welsh.
Contact details	For further information, please contact: Mental Health, Vulnerable Groups & Offenders branch Welsh Government Cathays Park Cardiff CF10 3NQ Email: mentalhealthandvulnerablegroups@gov.wales

General Data Protection Regulation (GDPR)

The Welsh Government will be data controller for any personal data you provide as part of your response to the consultation. Welsh Ministers have statutory powers they will rely on to process this personal data which will enable them to make informed decisions about how they exercise their public functions. Any response you send us will be seen in full by Welsh Government staff dealing with the issues which this consultation is about or planning future consultations. Where the Welsh Government undertakes further analysis of consultation responses then this work may be commissioned to be carried out by an accredited third party (e.g. a research organisation or a consultancy company). Any such work will only be undertaken under contract. Welsh Government's standard terms and conditions for such contracts set out strict requirements for the processing and safekeeping of personal data.

In order to show that the consultation was carried out properly, 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. If you do not want your name or address published, please tell us this in writing when you send your response. We will then redact them before publishing.

You should also be aware of our responsibilities under Freedom of Information legislation

If your details are published as part of the consultation response then these published reports will be retained indefinitely. Any of your data held otherwise by Welsh Government will be kept for no more than three years.

Your rights

Under the data protection legislation, you have the right:

- to be informed of the personal data held about you and to access it
- to require us to rectify inaccuracies in that data
- to (in certain circumstances) object to or restrict processing
- for (in certain circumstances) your data to be 'erased'
- to (in certain circumstances) data portability
- to lodge a complaint with the Information Commissioner's Office (ICO) who is our independent regulator for data protection.

For further details about the information the Welsh Government holds and its use, or if you want to exercise your rights under the GDPR, please see contact details below:

Data Protection Officer:
Welsh Government
Cathays Park
CARDIFF
CF10 3NQ

e-mail:

Data.ProtectionOfficer@gov.wales

The contact details for the Information Commissioner's Office are:

Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

Tel: 01625 545 745 or
0303 123 1113

Website: <https://ico.org.uk/>

Introduction

'Together for Mental Health', is the Welsh Government's 10 year cross governmental strategy to improve mental health and well-being across all ages. Published in October 2012, following significant engagement and formal consultation with stakeholders, the strategy has been supported by a series of detailed delivery plans. This is the third and final plan.

Together for Mental Health sets out a number of high level outcomes aimed at achieving a significant improvement to both the quality and accessibility of mental health services for all ages. The strategy recognises that the causes and effects of poor mental health are complex, challenging and multi faceted and therefore require an integrated, cross government and cross sector partnership approach if we are to achieve these outcomes.

Whilst the delivery plan outlines a number of new priority areas for the next 3 years, some of these actions represent a necessary continuation and investment in services, whilst in other areas the delivery plan is intended to drive a step change in service provision and/or additional government led activity to prevent poor mental health as it now firmly recognised that mental health is not only the concern of the NHS - it is 'everybody's business'.

In 2018, the Welsh Government published 'A Healthier Wales: Our Plan for Health and Social Care'. The plan sets out our long term future vision of a 'whole system approach to health and social care', which is focussed on health and wellbeing, and on preventing illness. Realising the ambitions of A Healthier Wales requires a further improvement in terms of integrating services, co-production and holistic approaches to treating physical and mental ill health.

The priorities that will be delivered through the delivery plan continue to support principles of prudent healthcare and the vision outlined in 'A Healthier Wales' with its focus on integrated, person centred care delivered in a way that has been informed by service users and carers.

The delivery plan contains a number of proposed actions for Welsh Government and key partners. We have engaged with a wide range of internal and external stakeholders to agree the key priorities contained in this plan, as well as taking into account relevant reports, National Assembly Committee recommendations and feedback from those with lived experience of mental health issues.

An annual report detailing progress against the delivery plan and an annual statistical and prevalence report will also be published.

Since the publication of the cross-governmental *'Together for Mental Health'*, the profile of mental health has grown considerably. *Prosperity for All*, the Welsh Government's national strategy, challenges all Welsh Government Departments to consider the impact of their work on the mental health and well being of the population in Wales. Therefore, building on a rapid review of a number of areas where we know that additional focus across government departments could make an impact, this latest delivery plan places greater emphasis on the protective factors for good mental health, identifying those

areas of cross-government working such as in education, employment and housing that can make a significant contribution to improving mental health and wellbeing outcomes in a way that is sustainable for the future.

Consultation questions

We would welcome your feedback and views in relation to the '*Together for Mental Health Delivery Plan 2019-2022*' and have included some specific questions which we would ask that you answer. The questions can be found online on the Consultation Response Form.

'TOGETHER FOR MENTAL HEALTH' DELIVERY PLAN 2019-2022

Strategic Context

Together for Mental Health, is the Welsh Government's 10 year cross governmental strategy to improve mental health and well-being across all ages. Published in October 2012, following significant engagement and formal consultation with stakeholders, the strategy has been supported by a series of detailed delivery plans. This is the third and final plan.

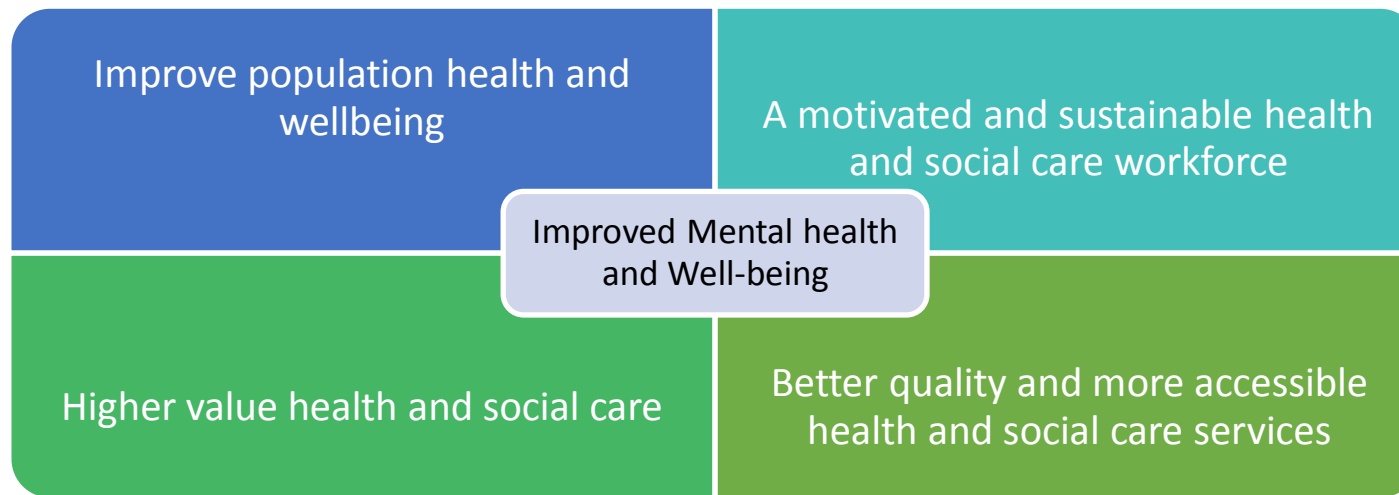
Together for Mental Health sets out a number of high level outcomes aimed at achieving a significant improvement to both the quality and accessibility of mental health services for all ages. The strategy recognises that the causes and effects of poor mental health are complex, challenging and multi faceted and therefore require an integrated, cross government and cross sector partnership approach if we are to achieve these outcomes. The six high level outcomes underpinning the 10 year strategy are:

- The mental health and wellbeing of the whole population is improved
- The impact of mental health problems and /or mental illness is better recognised and reduced
- Inequalities, stigma and discrimination are reduced
- Individuals have a better experience of the support and treatment they receive and feel in control of decisions
- Improved quality and access to preventative measures and early intervention to promote recovery
- Improved values, attitudes and skills of those supporting individuals of all ages with mental health problems

Whilst the delivery plan outlines a number of new priority areas for the next 3 years, these all contribute to achieving the high level outcomes set out originally in *Together for Mental Health*. Some of these actions represent a necessary continuation and investment in services, whilst in other areas the delivery plan is intended to drive a step change in service provision and/or additional government led activity to prevent poor mental health as it is now firmly recognised that mental health is not only the concern of the NHS - it is 'everybody's business'. Our schools, workplaces and communities play an important role in keeping us well and healthy. This is reflected in *Prosperity for All, the Welsh Government's national strategy* which highlighted wellbeing, prevention and tackling mental ill health as one of six priority areas which emerged as having the greatest potential contribution to long-term prosperity and well-being. Recognising that there must be a cross Government effort to improve the nation's mental health and that only a fully co-ordinated response from public services can effectively prevent rising demand and poorer outcomes. The high level outcomes of *Together for Mental Health* also mirror the themes which have come from the engagement with service users and carers, outlined in the diagram below.



In 2018, the Welsh Government published '*A Healthier Wales: Our Plan for Health and Social Care*'. The plan sets out our long term future vision of a 'whole system approach to health and social care', which is focussed on health and wellbeing, and on preventing illness. Realising the ambitions of *A Healthier Wales* requires a further improvement in terms of integrating services, co-production and holistic approaches to treating physical and mental ill health. In order to realise this vision *A Healthier Wales* is shaped around four 'Quadruple Aims', which describes interlocking themes that help develop a shared understanding of how we want the whole system approach to develop and how we will prioritise change. The diagram below shows the interface between the Quadruple Aims and improved mental health. Further information how each of the themes relate to *A Healthier Wales* is also included within Annex 1.



The priorities that will be delivered through the delivery plan continue to support principles of prudent healthcare with its focus on integrated, person centred care delivered in a way that has been informed by service users and carers. For example, by routing some of the additional funding resources for mental health through Regional Partnership Boards and by setting expectations about the involvement of the third sector, as well strong partnerships with the police and local government, the plan should ensure that care is provided at the right level and at the right time. This approach also supports value based healthcare given the delivery plan's emphasis on improvements in areas such as access to psychological therapies and improvements to crisis care services which we know are important to service users.

Scale of Challenge and Progress to Date

Since the publication of *Together for Mental Health* we have published a series of action plans at both an all Wales and health board level and provided additional funding to support improvements. As a result of this investment, we have made progress in a number of areas, including:

- Reduced stigma around mental health, including through supporting the Time to Change Campaign, with more people accessing support
- Greater service user and carer involvement in the development and planning of services at both a regional and national level,
- Significantly reducing the number of children and young people waiting longer than 4 weeks to access to treatment

- Reducing mental health hospital admissions through an emphasis on more support in the community
- Reducing the number of delayed transfers of patient with mental health issues
- Reducing the number of patients (both adults and children) that need to be sent outside of Wales for treatment
- Significantly reduced the number of people in mental health crisis detained in police cell as a place of safety.
- The implementation of the Mental Health (Wales) Measure 2010, including the introduction of Local Primary Mental Health Support Services (LPMHSS) and a focus on care and treatment planning.
- Implementing new community perinatal mental health services providing support across all areas of Wales
- Establishing psychiatric liaison in hospitals;
- Establishing CAMHS and adults community crisis intervention teams.
- Development of both neurodevelopmental and early intervention in psychosis services
- Launching the Mental Health Crisis Care Concordat with partners to improve the multiagency response to people in mental health crisis.
- Embedding mental health in preventative programmes, for instance Healthy Working Wales and the Wales Network of Health Schools.
- Establishing mental health social prescribing pilots to develop the evidence to improve access to non-clinical support
- The development of a separate Dementia Action Plan, itself supported by additional government investment.

It is important to note that these improvements have been made in the context of increasing demands for services. For instance, across Wales, there is on average an additional 1,000 referrals being received each month to LPMHSS when compared to 2013-14 and over 200,000 people have been seen by LPMHSS since their introduction, with 100,000 people receiving therapeutic interventions. In addition, Community Mental Health Services, established as part of our approach to provide more support in the community, received around 20,000 referrals for crisis assessments over a twelve month period.

A Cross Government Approach

Since the publication of the cross-governmental '*Together for Mental Health*', the profile of mental health has grown considerably and as noted earlier there is an increasing recognition that mental health is 'everybody's business'. *Prosperity for All* challenges all Welsh Government Departments to consider the impact of their work on the mental health and well being of the population in Wales. Therefore, building on a rapid review of a number of areas where we know that additional focus across government departments could make an impact, this latest delivery plan places greater emphasis on the protective factors for good mental health, identifying those areas of cross-government working such as in education, employment and housing that can make a significant contribution to improving mental health and wellbeing outcomes in a way that is sustainable for the future.

Over the duration of the previous delivery plan there was a focus on embedding mental health across a range of Welsh Government plans. In particular, work with Education, Employability, Tackling Poverty and Crime and Justice has ensured that delivery plans in these areas carry explicit links to mental health and related actions. The intention is not to repeat all of these actions in this delivery plan, but to make reference where appropriate, and to strengthen links in other areas.

Therefore the plan continues to highlight the important contribution needed across government to protect and improve mental health through programmes and policies that tackle the wider determinants of good mental health. Whilst health services are designed to respond the needs of individuals who need a clinical response for mental health problem, most of the key levers to improve mental health and wellbeing sit outside of the health sector. Achieving the aspirations in the delivery plan is therefore underpinned by broader strategic aims, such as:

- Eliminating the gap in economic inactivity rates between Wales though an increased focus on employment for disabled people, including those with mental health conditions though the ***Employability Plan***
- Promoting inclusive growth and employer commitment to fair work, employee health and skill development through the ***Economic Contract***
- Ensuring every young person has an equal opportunity to reach the highest potential through ***Education Wales: our national mission***
- Provide housing-related support to help vulnerable people to live as independently as possible though the ***Supporting People Programme***
- Reducing rough sleeping and end the need for people to sleep rough through the ***Rough Sleeping Action Plan***.

There are also many initiatives in place - or planned - across Welsh Government that will support the mental health agenda with significant investment being made in terms of resources. One of the areas where this is demonstrated is through the investment being made to take forward a new ***whole school approach*** to mental health and wellbeing for children and young people in Wales. As part of the '***whole school approach***', all schools will support the broader mental health and wellbeing of learners, which in turn will help to prevent other issues from developing or escalating, including mental health issues. A Joint Ministerial Task and Finish Group has been established to accelerate work on this approach and will augment the work already underway to develop a new schools curriculum in Wales.

The approach taken to develop this delivery plan has also reflected the requirements of the *Well-being of Future Generations (Wales) Act 2015* by emphasising the importance of preventative and integrated services whilst recognising the importance of

taking a longer term approach. We have also sought to embed the requirements of the *Social Services and Well-being (Wales) Act 2014* within the plan. The emphasis in the plan on early intervention so that longer-term harms are prevented before they occur includes preventing exposure to *Adverse Childhood Experiences* (ACEs). This recognises an increasing body of international evidence about the negative long-term impact on health and well-being outcomes, particularly mental health outcomes, which can result from exposure to childhood trauma before the age of 18.

Key Priorities for 2019-2022

Within the context of the commitments already made and the additional resources to support them, this delivery plan prioritises effort to deliver meaningful improvements for individuals and their families. The priorities have also been shaped by a number of National Assembly Committee reports including Perinatal Mental Health Services, 'Mind over Matter' (emotional and mental health support for children and young people) and 'Everybody's Business' (suicide prevention). The Committee inquiries seek an increased focus and pace of improvement in mental health services, as well as a greater focus on prevention. We have accepted most of the Committee recommendations and believe that delivery of the key priorities we have set ourselves in this delivery plan will secure the improvements in prevention and in services that we all want to see.

The proposed priority areas for action, set out in this delivery plan, are:

- **Preventing poor mental health and maintaining mental wellbeing** – through targeted work on prevention and cross-Government action on the wider determinants of mental health and well-being.
- **Improving access to support for the emotional and mental health well-being of children and young people** - improving access and ensuring sustainable improvements to timeliness of interventions, as well as supporting the new curriculum and whole school approach, extending the reach of NHS services into schools and filling gaps in services within both primary and secondary care through Child and Adolescent Mental Health Services (CAMHS).
- Further improvements to **Crisis and Out of Hours provision for children and adults** – moving to a common, multi agency offer across Wales
- **Improving the access, quality and range of psychological therapies across all ages** - to deliver a significant reduction in waiting times by the end of this Government, increase the range of therapies offered and support the workforce to provide these interventions to improve service user experience;
- **Improving access and quality of perinatal mental health services** – further development of perinatal mental health services including in relation to quality standards and care pathways and the provision of in-patient provision
- Improving **quality and access to services whilst developing recovery orientated services** – including responding to

Healthcare Inspectorate Wales/Care Inspectorate Wales thematic reviews, reviews by NHS Delivery Unit and receiving assurance that recommendations have been delivered

- Supporting **vulnerable groups** – with a focus on improvements to services for eating disorders, offenders and co-occurring mental health and substance misuse issues.

These priority areas and the improvements we want to see are dependent on a number of overarching work streams which will also need to be prioritised but will continue beyond the life of this plan. These include:

- Implementing the **core data set** to improve consistency, robustness and the focus on outcomes across all-age mental health services.
- Developing a **workforce plan** in partnership with the NHS Mental Health Network and Health Education and Improvement Wales (HEIW) to support medium and longer-term services improvements and to ensure a stable and sustainable mental health workforce.
- Strengthening **service user and third sector engagement** across policy and service improvements.
- Improving access to **welsh language** mental health services.

Actions to improve dementia are being taken forward under the separate **Dementia Action Plan for Wales**, published in 2018. Similarly, although referenced within this plan, actions to prevent suicide and self harm are also being taken forward as part of our **Talk to Me 2 strategy**.

Mental Health Funding

We continue to spend more on mental health services than any other part of the NHS and we have increased funding in the mental health ring fence budget to £679million in 2019-20.

Additional funding as part of our *A Healthier Wales* plan in 2019/20 will be targeted towards the agreed priority areas, including, enabling earlier intervention, better access to services and improved outcomes for service users and their carers and families. This additional funding has informed the proposed priorities within this delivery plan. The additional spend will be targeted on areas where we know that further service development is required or where there is evidenced demand.

Mental Health Legislation

The current landscape of mental health and mental capacity legislation that operates in Wales reflects some of the societal and policy changes that have occurred in recent years. The three main legal frameworks of the Mental Health (Wales) Measure 2010, the Mental Health Act 1983 and the Mental Capacity Act 2005, including the Deprivation of Liberty safeguards each have points of (sometimes complex) interface with each other and engage people's human rights. The three Acts also reflect a continuum from devolved and reserved policy areas but share a common feature in that people come into contact with the legislation largely through the delivery of health and social care. In Wales, mental health and mental capacity legislation also operates closely with the Social Services and (Well-Being) Act 2014, Regulation and Inspection of Social Care (Wales) Act 2016, Additional Learning Needs and Education Tribunal (Wales) Act 2018 and equality legislation.

The delivery plan sets out how it will support the changes needed to implement known legal reform to the Mental Capacity Act and reflects the need to develop a strategic position during 2019-20 of what changes to the Mental Health (Wales) Measure and the Mental Health Act are needed to deliver and drive our/the plan's policy intentions and outcomes.

NHS National Delivery Support Mechanism

NHS Chief Executives have supported the development of an all-age mental health network and related board to assist in driving forward commitments made within *Together for Mental Health and A Healthier Wales*. Forward work plans are being developed that will need to take account of the actions set out in this new Delivery Plan. The Board is chaired by the lead Chief Executive for Mental Health who will be assisted by a National Programme Director for Mental Health when appointed. The network and Board will coordinate activities within the new NHS Executive in order to share learning and develop integrated approaches. The third sector and local authorities, police, ambulance, and many other partners also have an equal role to play and the existing local mental health partnership boards and National Mental Health Partnership Board (NMHPB) will remain in place to strengthen the way we all work together.

Developing the Draft Delivery Plan

We have engaged with a wide range of internal and external stakeholders to agree the key priorities contained in this plan, as well as taking into account relevant reports, National Assembly Committee recommendations and feedback from those with lived experience of mental health issues. The plan itself has been developed through three phases:

1. Consolidation activity to review progress against the previous two delivery plans and progress against the 10 year *Together for Mental Health* Strategy, identifying areas that require more focus.
2. A rapid review to identify key areas to maximise the impact of cross-government working.
3. A series of workshops and engagement exercises to identify priority areas informed by evidence and personal experiences. These workshops were crucial in hearing what mattered most as we agreed our priorities areas and what we needed to ensure we focused on in the next stage of delivery. These themes have been considered as we have developed our actions underpinning our priority areas.

Building on this the draft plan will be subject to a six week public consultation from June 2019 with the aim of publishing the final plan as soon as possible afterwards.

Monitoring and Evaluation

Delivery of the overall strategy and its constituent delivery plans is monitored and assured through the NMHPB and local partnership boards. To assist, in each section below we have highlighted some key outcome indicators and performance measures from which to monitor progress and we will continue to work with our Knowledge and Analytical Services to strengthen this where the data is available. Through the lifetime of this delivery plan we will also be commissioning an evaluation of *Together for Mental Health*, which concludes in 2022 to inform the next mental health strategy.

Priority 1: Preventing poor mental health and maintaining mental wellbeing

These actions will ensure that I have access to information to understand how I can improve my own mental health and well-being and create an environment that protects my mental health through considering my needs in all areas of life, for instance my education, housing and employment. They will also help services understand my needs through trauma informed approaches.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Improving mental health and resilience	(1.1i) Public Health Wales to increase the visibility and priority of work to promote mental well-being through investment and co-ordinated cross-organisational programmes. (1.1ii) Public Health Wales to develop and disseminate best practice guidance and tools on whole school approaches to mental wellbeing and resilience, including Adverse Childhood Experiences (ACEs). (1.1iii) Public Health Wales and Welsh Government to work with NHS, police local authorities and other partners to develop trauma/ACE informed services.	Year 1 • Agree with partners the key themes and goals for a national conversation about mental well-being and resilience(1.1i) • Pilot mental wellbeing context, criteria, guidance and independent reference source for schools as part of WNHSS (1.1ii) • Pilot feasibility of single integrated front door to services supporting vulnerability in and out of hours (1.1iii) • Monitor continued uptake of Reading Well scheme, in both English and Wales. Year 2 • Develop and commence delivery of longer term plan to improve mental well-being/resilience (1.1ii) • Implement a plan for employer	<i>Increase in mean mental wellbeing score based on Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)</i> Source: National Survey for Wales <i>Increased mental wellbeing in Children & Young People. Source: Understanding Society.</i> <i>Formal Independent Evaluation of Reading Well Scheme.</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	(1.1iv) Welsh Government (HSS) to continue to support the delivery of the Reading Well ('book prescription' for dementia, common mental health conditions (adults) and children's scheme. (1.1v) Welsh Government to work with Public Service Boards to encourage and support participation in cultural and sporting activity at a local level	support activity to improve mental health and wellbeing. • Bespoke training for criminal justice partners regarding trauma / ACE informed to be developed and commence implementation (1.1iii) • Formal evaluation undertaken of the Reading Well scheme. • Discuss the role of culture and sport in promoting mental health and well-being with each of the PSBs Work through the Fusion: Creating Opportunity through Culture programme to increase access to cultural activity	
Preventing suicide and self harm	(1.2i) <i>Talk to me 2</i> National Advisory Group (NAG), working with Welsh Government to support the development of a national suicide prevention website and training framework for Wales. (1.2ii) NAG to establish a postvention pathway in Wales,	Year 1 • Website established and routinely updated with evidence based information and support (1.2i and 1.2iii) • Coordinators recruited, reporting structures agreed (1.2i and 1.2iv) • Establish a farming Charities' Partnership Group specifically to	<i>People will be able to access a range of information and support through one central website.</i> <i>Organisations will be able to review and select training opportunities from a range of providers to suit their needs</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	including support to those bereaved by suicide. (1.2iii) NAG and Welsh Government (HSS) to Improve access to information and support, including educational settings, at risk occupational groups, rural areas and primary care. We will also highlight areas of good practice (1.2iv) Welsh Government (HSS), working with the NAG, to drive implementation of Talk to Me 2 Suicide and Self Harm Strategy (extended to 2022) through regional forums /plans and national coordinator posts.	share knowledge and expertise and identify ways to work collaboratively (1.2iii). Year 2 • Training framework developed Post-vention pathway in place (1.2ii)	<i>Individuals and families will be supported appropriately following a death by suicide</i> <i>Rate of suicide reducing from an average over the 10 year (2005-2015) period. Source: Office of National Statistics (ONS)</i> <i>Rate of hospital admissions with any mention of intentional self-harm for children and young people (aged 10-24 years) per 1,000 population. Source Patient Episode Database for Wales (PEDW)</i>
Strengthening protective factors	(1.3i) Welsh Government (HSS) to support people with mental health problems to remain in, or return to work through health led, European Social Funded (ESF) In-Work Support, Out of Work Support and the Individual Placement Scheme Pilot.	Year 1 and 2: • Work with employers to increase the number with specific programmes aimed at protecting and improving mental health and wellbeing receiving funding (1.3i and 1.3ii) Year 1: • Publication of Loneliness and	<i>Increased number of individuals with mental health problems will be able to retain work</i> <i>More people with mental health problems accessing employment opportunities.</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	(1.3ii) Welsh Government (HSS and ESNR) and Public Health Wales to support and encourage employers to promote good mental health and well-being in the workplace through Healthy Working Wales and the Economic Contract. (1.3iii) Welsh Government (HSS) to tackle loneliness and isolation through implementing a nationwide cross-government strategy, including increasing opportunities for 'meaningful day' activities within the community. (1.3iv) Welsh Government (Housing Policy and HSS) to support the delivery and evaluation of the Housing First Pilots to enable tailored mental health and substance misuse support for individuals to manage tenancies independently.	Isolation strategy which will include agreed priority areas (1.3iii). - Ministerial Advisory Group recommendations on homelessness / engage with Housing First Pilot areas to ensure principles of wraparound support (1.3iv) - Take forward the recommendations and findings from Phase 1 of the Building Resilience in Rural Farming Communities Project (1.3vii) Year 2 - Joint working protocols for engaging mental health and substance misuse services with rough sleepers to be developed (1.3v) - New Single Advice Fund to commence in 2020 with links into health services (1.3vi)	<i>More employers providing workplaces that protect and promote the health and well-being of staff</i> <i>People at risk of homelessness accessing health services and maintain independence</i> <i>Reduction in the number/percentage people who feel lonely. Source: National Survey for Wales</i> <i>National Rough Sleeper Count. Source: Welsh Government.</i> <i>More people with mental health issues accessing money and debt advice/fewer people suffer mental ill health due to money issues. Source:</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	(1.3v) Welsh Government (Housing Policy and HSS) to develop model joint working protocols for engaging mental health and substance misuse services with rough sleepers. (1.3vi) Welsh Government (Prosperous Futures) through its financial inclusion and advice services and working with key stakeholders (for instance the Money and Pensions Service) to help people to access debt and money advice to support improved mental health. (1.3vii) Welsh Government to consider the mental health impact of Brexit and ensure support is available, particularly for at-risk communities		
Tackling stigma	(1.4i) Welsh Government (HSS and Economy and Transport) to continue to work with third sector delivery partners on Phase 3 of the Time to Change Wales (TTCW) campaign with a	Year 1 and 2 • Monitor the number of employers to sign up to TTCW pledge and make relevant changes to HR policy and practice (1.4i) • Monitor the number of adult	Percentage reduction in people with lived experience reporting stigma and discrimination in their relationships, workplaces and communities.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	focus on supporting employers and middle aged men. (1.4ii) The Stigma and Discrimination working group of the MHNPB, supported by the Equality and Human Rights Commission (EHRC), to advise NPB on proposed programme of work and Welsh Government and NPB to consider appropriate actions.	champions who are recruited and training, with a focus on men, those in rural areas and Welsh speaking (1.4ii) Year 1 - Report submitted to NPB on proposed recommendations (1.4ii) Year 2 - Welsh Government and NPB to respond to working group recommendations and agree actions (i.4ii)	Percentage of employers making changes to HR policy and practice Increased numbers of adult Champions, of whom 50% are men, 20% are fluent Welsh speaking and 30% live in rural areas. Source: Time to Change Wales

Priority 2: Improving access to support for the emotional and mental health well-being of children and young people

These actions will support me to develop my ability to cope better with everyday challenges. They will also help teachers and others recognise when I need more support and how to access it. If I do need to access specialist services, these actions will ensure I can get the help I need, when I need it.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Improving access to mental health support in schools as part of whole system improvements	(2.1i) Welsh Government (Education and HSS) to develop and implement a multi-agency whole school approach to mental health and emotional well-being (2.1ii) Welsh Government (Education) and PHW to provide guidance and support for schools to embed a whole school approach to mental health and emotional wellbeing (2.1iii) Welsh Government (Education) Introduce professional learning for all levels of school staff on mental health and emotional wellbeing (2.1iv) Welsh Government working with NHS and PHW to	Year 1: • Develop standard pathways for joint working across agencies with clear roles and responsibilities (2.1i) • Publish guidance on suicide and self-harm prevention, accompanied by a suite of resources (2.1i) • Work with stakeholders to determine current good practice and areas for improvement (2.1ii) • Develop and consult on guidance that aligns with Estyn's self-evaluation framework (2.1ii) • Conduct scoping exercise to establish what is currently taught and what gaps there are that need to be filled (2.1iii) • Work with HEIs to develop bespoke training packages	<i>Schools understand the factors which contribute to positive emotional wellbeing among students and staff, can identify and mitigate the barriers, putting in place effective strategies</i> <i>Teachers will be confident to provide early support and to identify children who need more specialist support sooner.</i> <i>Parents and children have clarity on pathways of support.</i> <i>Increased mental wellbeing in Children & Young People. Source: Understanding Society.</i> <i>Gap in mental well-being between the most and least deprived among</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	implement key learning from the CAMHS in-reach pilots	targeting different school staff roles (2.1iii) • Begin initial evaluation and early learning from in-reach pilots (2.1iv) Year 2: • Implement standardised pathways developed across Wales (2.1i) • Support Public Health Wales in refreshing the Welsh Network of Healthy School Schemes and implementing changes. (2.1i) • Publish guidance on embedding a whole school approach (2.1ii) • Work with schools to implement guidance and begin self-evaluation process (2.1ii) • Continue development of training packages and roll out to school staff (2.1iii) • Work with National Academy for Educational Leadership (NAEL to receive accreditation for leadership training (2.1iii) • Introduce mental health and wellbeing training into ITT (2.1iii)	<i>children and young people. Source: National Survey for Wales</i> <i>Number of young people accessing school-based counselling. Source: Welsh Government.</i> <i>Decreased percentage of children in need with mental health issues. Source: Census.</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
		- Receive formal evaluation of in-reach (2.1iv) - Scale up the in-reach pilots/ implement key elements nationally (2.1iv)	
Improving access to support in the community for children and young people as part of the whole system improvements	(2.2i) Welsh Government to provide funding to Regional Partnership Boards (RPBs) to support the development of local approaches to improve access to community based services. (2.2ii) Welsh Government (Education) working with local authorities to embed mental health and wellbeing into the Youth Support Grant to improve support. (2.2iii) Health boards to work with local authorities to make specialist CAMHS more accessible for those children and young people on the edge of care who are assessed with a need but would not access secondary care through the usual routes. This will be	Year 1: - Issue funding to RPBs to pilot local approaches to improve access to community based services (2.2i). - Support grant recipients of the Youth Support Grant to deliver lower tier support (2.2ii) - Promote best practice and service development to deliver targeted support and interventions to those most at risk of developing emotional and mental health problems or showing early signs of mental disorders (2.2iii) - Consider findings of the pilot to develop implementation plan for the provision of online support for children and young people (2.2iv) Year 2: - Monitor and review of funding to	<i>More children and young people can access non-clinical support at an earlier stage</i> <i>More children and young people on the edge of care accessing appropriate support</i> <i>Children and young people who are ineligible for CAMHS services are able to access other suitable therapeutic or “lower level” support reducing the ‘missing middle’.</i> <i>Percentage of specialist CAMHS referral to first appointment (80% target). Source: Welsh Government</i> <i>Increased mental wellbeing in Children & Young People. Source: Understanding Society.</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	informed by the T4CYP Early Intervention and Resilience Work stream that has focused on children and young people on the edge of care. (2.2iv) Welsh Government (HSS) to explore the development of pilots in relation to on line support for children and young people	RPBs to pilot local approaches to improve access to lower tier , non-clinical community based services (2.1i) • Work with the administrators of the Youth Support Grant to develop ideas and share good practice with recipients of the grant to further support children and young people (2.2ii)	<i>Gap in mental well-being between the most and least deprived among children and young people. Source: National Survey for Wales</i> <i>Number of young people accessing school-based counselling. Source: Welsh Government</i> <i>Decreased percentage of children in need with mental health issues. Source: Census.</i>
Improving children and young people mental health services as part of the whole system approach.	(2.3i) Welsh Government (HSS) investment to support health board improvement plans that take forward recommendations from the recent NHS Delivery Unit (DU) review of LPMHSS (2.3ii) NHS Collaborative to review the NHS Commissioning framework and model demand and capacity to ensure specialist inpatient services meet the needs of children and young people.	Year 1: • Monitor implementation of health board improvement plans following review of LPMHSS (2.3i) • Review the CAMHS framework for In Patient services (2.3ii) Year 2: • Drive and measure improvements made following the DU review of LPMHSS. (2.3i) • Implement the findings from the NHS commissioning framework	Percentage of mental health assessments undertaken by Local Primary Mental Health Support Services (LPMHSS) within (up to and including) 28 days from the date of receipt of referral (80% target). Source: Welsh Government Percentage of therapeutic interventions started within (up to and including) 28 days following an

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
		review.	assessment by LPMHSS (80% target). Source: Welsh Government. Children access appropriate support earlier. Fewer children will be placed outside of Wales.

Priority 3: Further improvements to crisis and out of hours for children and adults

These actions will help me access support when I'm in distress. Frontline staff who I may come in to contact with will know how to support me and will have access to services, at any time.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Strengthening partnership working	(3.1i) Mental Health Crisis Care Concordat (MHCCC) and Regional Mental Health Criminal Justice Groups to implement the new National Crisis Concordat Delivery Plan across LHBs, Police Forces, Local Authorities, WAST and the third sectors (3.1ii) Welsh Government to commission the National Collaborative Commissioning Unit (NCCU) to complete a rapid urgent mental health access and conveyance review to make recommendations for improvement	Year 1 - All partners signed and agreed to local implementation plans with formal reporting to the Concordat group (3.1i) - Commission and complete urgent access review (3.1ii) Year 2 - Implement recommendations from urgent access review (3.1ii)	<i>More people diverted from section 135/136 detentions and into community support</i> <i>Fewer people detained on 135/136 are released from hospital with no mental disorder. Source: Welsh Government</i> <i>We will understand how people access crisis/out of hours support; how they are moved between services; and, why they are accessing MH services (e.g. – intoxicated; social issues/distress/mental health).</i>
Improving Services	(3.2i) Welsh Government (HSS) investment to support health boards to extend and	Year 1 Provide additional funding to health boards and agree	<i>Access to mental health crisis support is consistent across Wales</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	standardise the delivery of crisis and out of hour services to provide 24/7 access, across all ages, including delivering on the priority areas in the National Crisis Care Concordat Delivery Plan (3.2ii) Welsh Government (HSS) to support a discrete range of pilots, including street triage, hub models etc to inform evidence based practice and MHCCC to identify the good practice and models for national roll out (3.2iii) Welsh Government (HSS), health boards, local authorities and police to improve data collection of section 135/136 dataset and improve transparency of this data.	improvement plans for crisis and out of hours services (3.2i) • Agree and support pilot projects (3.2ii) • Commence publication of new section 135/136 data set (3.2iii) Year 2 • Agree national actions to improve crisis system based on access review and evaluation of pilot projects (3.2ii) • Provide first annual report on new dataset and assurance reports from Regional Partnership Boards (3.2iii)	<i>and is available 24/7.</i> <i>We will understand what works to improve the outcomes for individuals accessing services in crisis.</i> <i>More people diverted from section 135/136 detentions and into community support</i> <i>Fewer people detained on 135/136 are released from hospital with no mental disorder. Source: Stats Wales</i>

Priority 4: Improving the access, quality and range of psychological therapies across all ages

These actions will ensure that I can access the most appropriate and evidenced based psychological therapies to support me, in a timely manner. I will also be involved in making decisions about my care

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Improving services	(4.1i) Welsh Government (HSS) investment to support health boards to improve access by consistently meet current targets for specialist psychological therapies, and increase the range of psychological therapies that are available. (4.1ii) Welsh Government (HSS) to commission a review of the Adults Matrics Cymru and the development of a Children and Young Peoples Version of Matrices Cymru (4.1iii) Welsh Government (HSS) working with Health Technology Wales to increase the use of online interventions where appropriate, for both adults and children and young people.	Year 1 26 week specialist psychological therapies waiting time standard will be published on Stats Wales and monitored (4.1i) - Online interventions will be more widely available (4.1iii) - Health boards to begin implementation of Traumatic Stress Initiative (4.1iv) Year 2 - Ongoing monitoring of progress against 26 week waiting time standard, with a view to tightening them further (4.1i) - CYP Matrics will be published and implemented (4.1ii)	<i>Percentage of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health. Source: Welsh Government</i> <i>Outcomes focused practice pilots to improve use of experience information in health boards</i> <i>Training and support to staff will improve</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	4.1(iv) Welsh Government (HSS) to commission the development of an evidence based All Wales Traumatic Stress Quality Improvement Initiative for adults, taking into account other specific population groups including perinatal mental health; refugees, asylum seekers and other vulnerable groups; victims of sexual assault and transition from child and adolescent mental health services (CAMHS).		

Priority 5: Improving access and quality of perinatal mental health services

These actions will ensure that if I struggle with my mental health during, or after my pregnancy, I will be able to access appropriate support. If I need more specialist support, I will be able access this closer to my home and with my baby.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Improving accessing and quality of services	(5.1i) Welsh Health Specialised Services Committee (WHSSC) and lead health board to establish a specialist in-patient perinatal mother and baby unit in Wales (5.1ii) NHS Collaborative to establish a perinatal mental health network to assist health boards to further drive improvements to services, including the collection of core performance management data.	Year 1 • Commencement of build project to establish a mother and baby unit (5.1i) • Establishment of Perinatal Mental Health Network (5.1ii) • Achievement of All Wales Perinatal Mental Health Steering Groups standards, including relevant data collection (5.1ii) Year 2/3 • Establishment of mother and baby unit (5.1i) • Achievement of Royal College of Psychiatrists' quality standards(5.1ii)	<i>Improved quality and availability of perinatal community mental health services supporting better outcomes for mothers and their families</i> <i>Inpatient perinatal mother and baby unit provision in Wales, reducing the number out of Wales placements.</i> <i>Health boards reports on the achievement of All Wales Perinatal Mental Health Steering Groups standards</i> <i>Health board reports on the achievement of Royal College of Psychiatrists' quality standards.</i>

Priority 6: Improving quality and developing recovery orientated services

These actions will assure me that the services that I need to access continually improve and are responsive to my individual needs.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Improve the quality of care and treatment planning	(6.1i) Health Boards to undertake an annual audit of Care and Treatment Planning (CTP), focusing on the importance of building in a recovery approach to service development, and ensuring the implementation of the NHS Delivery Unit recommendations on care and treatment planning.	Year 1 - Health board to undertake a follow up audit detailing progress, including ensuring appropriate service user input, and to report findings / areas for improvement Year 2 - Health boards to demonstrate ongoing improvements	<i>Care and treatment plans that focus on minimising the impact of their mental health problems whilst maximising independence, community integration and mental and physical health.</i> <i>Outcome measure feedback from service users and carers.</i>
Improve the quality of inpatient care	(6.2i) Health boards to undertake an audit of current secure inpatient provision and to develop a secure inpatient strategy for mental health	Year 1 - Audit of current secure inpatient provision Year 2 - Develop a secure inpatient strategy	<i>A clear secure care pathway at a national a local level will be developed</i>
Embed quality improvement	(6.3i) PHW 1000 Lives to undertake a quality improvement exercise through pilots with 7 teams across services in all	Year 1 Work with pilot teams to embed outcomes model and involve service users in the development	<i>Teams will routinely use measures to capture wellbeing, individual goals and to measure experience of</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	regions to embed an outcomes focused model across Wales	of principles to roll out Year 2/3 To roll out outcomes model across Wales supported by PHW 1000Lives	service <i>Routine capture of the experiences of those with lived experience and evidence of improved use of outcome measures in practice</i>
Further developing Community Mental Health Teams (CMHT)	(6.4i) Health boards to implement improvement plans from the joint Care Inspectorate Wales (CIW) / Healthcare Inspectorate Wales (HIW) review of CMHT and report progress against these plans (6.4ii) Welsh Government (HSS) to work with partners to articulate what we want services to look like, by setting a common set of values, reviewing models and producing guidance for Wales	Year 1 - Health board to undertake follow up audit detailing progress and to report findings / areas for improvement (6.4i) - Review / map service configurations and research models of care, workshops to define core functions in primary / secondary care (6.4ii) Year 2/3 - Produce guidance on the delivery of mental health services, using a systems / journey approach (6.4ii)	<i>Functions for mental health services will be defined in Wales, enabling partners to structure services to deliver more needs-based support</i> <i>For people with needs ranging from self help and staying well through to serious mental illness there will be clear guidance on pathways and processes that improve access to appropriate supports</i>

Priority 7: Supporting vulnerable groups

These actions will support services to respond to my needs earlier, with better integration so I don't need to re-tell my story each time.

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Improving support for Eating Disorders	(7.1i) Welsh Government (HSS) to work with service users, carers and health boards to develop a new model of service in response to the recent independent review.	Year 1/2 Develop and begin implementation on local improvement plans	<i>Clear plans to deliver early intervention support across wales.</i> <i>As the programme of work develops patient outcome measures will be built in.</i>
Improving support for people with co-occurring mental health and substance misuse issues	(7.2i) Welsh Government (HSS) continue to monitor the delivery of the Mental Health & Substance Misuse Co-occurring Substance Misuse Treatment Framework. (7.2ii) Undertake a 'deep dive' analysis involving front line clinicians to look at the remaining barriers and good practice in this areas to drive change in service delivery	Year 1 - Undertake analysis of current pathways for an individual with a co-occurring problem, including looking at the barriers on accessing services and good practice on work in this area. (7.2i) - Convene workshop involving clinicians, APB and LMHPs representatives (7.2ii) Year 1/ 2 - Implement findings from review within year 1 (7.2ii)	<i>Improved joint working between substance misuse and mental health services and better support for those with co-occurring problems.</i> <i>Number of hospital admissions due primary named illicit drugs Source: NWIS (PEDW)</i> <i>Number of hospital admissions with primary and any mention alcohol specific disease Source: NWIS (PEDW)</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
			<i>Number of hospital admissions with alcohol attributable conditions (broad and narrow definition) Source: NWIS (PEDW)</i>
Improving support for offenders	(7.3i) Welsh Government (HSS), working with health boards and HMPPS to develop consistent mental health, mental well-being and learning disability services across all prisons that are tailored to need though an agreed set of standards and indicators for mental health services in prison. (7.3ii) Welsh Government (HSS), working with health boards and HMPPS to develop approaches to improve mental health support to youth and female offenders.	Year 1 - Establish joint Prison Health Board (7.3i) - Establish work streams to underpin the four priorities in the prison health partnership agreement. Fund prison health improvement plans (7.3i and 7.3ii) Year 2 - Complete and commence implementation of mental health standards and indicators (7.3i) - Review progress on improvement plans (7.3ii)	<i>Improved mental health, mental well-being and learning disability services in the prison setting.</i>

Overarching actions: Key areas that underpin achieving the aspiration and outcomes in the delivery plan, but are longer term , running beyond the life of the plan

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
These actions set out how we will improve the capability and consistency of data and outcomes collection in Wales. Common IT systems, better information sharing between health, social care and the third sector, and an outcomes-focused workforce are all key goals of the mental health and learning disability core dataset. We are also committing to improve transparency and reporting of information to the public.			
Data and Outcomes:	(8.1i) Welsh Government (HSS) and NHS Wales Informatics Service (NWIS) implement a nationally standardised mental health and learning disability core data set to cover mental health services for people of all ages and include the data on the Welsh Community Care Informatics Service (WCCIS) once it is live. (8.1ii) Welsh Government (HSS) and NWIS to work with health boards and local authorities to implement a common set of forms across health and social services for mental health. (8.1iii) Welsh Government (HSS) and Public Health Wales	Year 1: - Assure data set through WISB process (8.1i) - Commence publication of new section 135/136 dataset and psychological therapies 26 week target (8.1i) - Quality improvement work undertaken to support outcome focused practice with pilot teams (8.1iii) Year 2: - Commence data collection on core data set (8.1ii) - Commence roll out of outcome focused model across Wales (8.1iii)	<i>Mental health data will be consistent, robust and outcome focused.</i> <i>Data sharing within health boards and between health boards and local authorities will be improved.</i> <i>The voice of those accessing support will be used routinely to inform the therapeutic relationship and planning / evaluation of care</i> <i>Outcomes focused model implemented across mental health services</i> <i>Regular reporting of data for individuals, practitioners, managers, Welsh Government and the public</i> <i>WCCIS in place across sectors by 2022</i> <i>Data sharing across the UK and</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	1000 Lives to work with health boards and local authorities to support outcomes-focused practice via quality improvement work with teams, working towards more consistent model for Wales that incorporates principles of compassionate care alongside routine monitoring. (8.1iv) Welsh Government will support the NCCU to undertake the annual NHS UK and International benchmarking project ensuring we learn from the best from within the UK and abroad and understand the landscape of current services	Year 3: - Embed core data set collection through WCCIS and delivery of outcome focused practice across Wales (8.1i-iii) Year 1 – 3 - NHS benchmarking event	<i>Internationally will be improved</i>
In the context of increasing demand for services and increasing investment, actions set out show how we will achieve a sustainable workforce.			
Workforce	(8.2i) Welsh Government (HSS) to work with HEIW to ensure the mental health workforce is prioritised in the 10 year workforce strategy	Year 1: - HEIW / SCW workforce strategy developed (8.2i) - Approve health board improvement plans (8.2ii)	<i>Mental health workforce needs will be clear and plans will be in place to achieve a sustainable workforce</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	(8.2ii) Welsh Government (HSS) to require health boards to consider longer term workforce planning in improvement plans for additional mental health funding	Year 2: Implementation plans in place and activities in progress to support workforce recruitment, retention, succession planning and wellbeing of staff (8.2i-ii)	<i>Health and Social Care Workforce Strategy and implementation plans anticipated by 2020</i>
These actions set out how it will support the changes needed to implement known legal reform to the Mental Capacity Act and reflects the need to develop a strategic position during 2019-20 of what changes to the Mental Health (Wales) Measure and the Mental Health Act are needed to deliver and drive our/the plan's policy intentions and outcomes.			
Legislation	(8.3i) Welsh Government (HSS) to review the Duty to Review recommendations arising from the evaluation of the delivery of the Mental Health 2010 (Wales) Measure. (8.3ii) Welsh Government (HSS) to consider the UK Government commissioned Independent Review of the Mental Health Act 1983 and subsequent response to determine what actions are required in Wales.	Year 1/2: - To change regulations as recommended by the Final Report of the Duty to Review the MH (W) M 2010 with supporting policy implementation guidance and workforce training (8.3i and 8.3iv) - Implementation of the MC(A) Bill / LPS with necessary guidance and training (8.3iii) - Monitoring arrangements and data	<i>The appropriate legal safeguards will be in place for each person who lacks mental capacity and whose care and treatment arrangements amount to a deprivation of his/her liberty.</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	(8.3iii) Welsh Government (HSS) to prepare and support the implementation of the Mental Capacity Amendment Act 2019(MCCA 2019) (8.3iv) Welsh Government to consider amending the regulations to Part 1 of the Measure to facilitate a competency based approach to be used in establishing the workforce to undertake Part 1 assessment.	collection is established (8.3 i-iv) Year 1 • Strategic position on the implications of any changes to the MHA for Wales is established (8.3ii) • Code of Practice to the MCA and Liberty Protection Safeguards accurately reflect the position for Wales (8.3iii) • Secondary legislation, guidance and workforce planning to implement the MCCA 2019I is prepared (8.3iii)	
These actions set out how we will liaise with those with lived experience and the voluntary sector, through better links with local, regional and national networks.			

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
Strengthening engagement	(8.4i) Welsh Government (HSS), through contract arrangements with Practice Solutions to support the Mental Health Forum and development of national guidance to increase co-production and involvement. (8.4ii) Welsh Government (HSS) to review current arrangements for third sector engagement to ensure it reflects the increased number and breadth of third sector mental health organisations.	Year 1 - Forum recruitment drive and scoping of national guidance work, including a communications plan (8.4i) Year 2 - Guidance on involvement produced (8.4ii)	<i>Diversity and membership of the forum will have increased, with wider outreach</i> <i>The lived experience voice will be stronger in Wales</i> <i>The voice of the voluntary sector will be stronger in Wales</i> <i>There will be more consistency in terms of engagement and co-production across Wales</i>
Ongoing efforts to increase Welsh language provision are essential to deliver the vision articulated in More than Just Words. These actions support ongoing improvements but all actions should be taken in the context Welsh language.			
Welsh Language	(8.5i) Welsh Government (HSS) to work with health boards to develop their capacity and capability to improve Welsh Language provision in mental health services (8.5ii) Health boards to deliver on the Active Offer – a key	Year 1 /2 Health boards to report on how they are developing capacity and capability to improve Welsh language provision in mental health services including delivering on the ‘Active Offer’	<i>More people able to access mental health services and support in the Welsh language</i>

Key theme	What needs to be done	Key milestones	What will be different / How will we know? <i>[this section is still under development and will be revised prior to publication of final document]</i>
	principle of More than Just Words ¹ .		

Annex 1

Priority Area	Link to 'A Healthier Wales' quadruple aims
Priority 1: Preventing poor mental health and maintaining mental wellbeing	Quadruple Aim 1: Improve population health and wellbeing Quadruple Aim 2: Better quality and more accessible health and social care services Quadruple Aim 3: Higher value health and social care
Priority 2: Improving access to support for the emotional and mental health well-being of children and young people	Quadruple Aim 1: Improve population health and wellbeing Quadruple Aim 2: Better quality and more accessible health and social care services
Priority 3: Further improvements to crisis and out of hours for children and adults	Quadruple Aim 2: Better quality and more accessible health and social care services Quadruple Aim 3: Higher value health and social care
Priority 4: Improving the access, quality and range of psychological therapies across all ages	Quadruple Aim 2: Better quality and more accessible health and social care services Quadruple Aim 3: Higher value health and social care Quadruple Aim 4: A motivated and sustainable health and social care workforce
Priority 5: Improving access and quality of perinatal mental health services	Quadruple Aim 2: Better quality and more accessible health and social care services Quadruple Aim 3: Higher value health and social care

¹ More than just words is the Welsh Government's strategic framework to strengthen Welsh language services in health and social care. People can feel vulnerable when accessing health and social care and lack confidence to ask for services in Welsh. The active offer therefore means offering a Welsh language choice without patients having to ask for it

Priority 6: Improving quality and developing recovery orientated services	Quadruple Aim 1: Improve population health and wellbeing Quadruple Aim 3: Higher value health and social care
Priority 7: Supporting vulnerable groups	Quadruple Aim 2: Better quality and more accessible health and social care services Quadruple Aim 3: Higher value health and social care
Overarching actions: Key areas that underpin achieving the aspiration and outcomes in the delivery plan, but are longer term , running beyond the life of the plan	Quadruple Aim 1: Improve population health and wellbeing Quadruple Aim 2: Better quality and more accessible health and social care services Quadruple Aim 3: Higher value health and social care Quadruple Aim 4: A motivated and sustainable health and social care workforce.