

Live Well - Mental Health Planning and Development Partnership (MHP&DP)

Terms of Reference

Background

It is a requirement under *Together for Mental Health* that Local Health Boards (LHB) put in place local multiagency partnership arrangements (on LHB footprints) from January 2013.

Purpose

The partnership will be responsible for supporting and reviewing progress in implementing:

- the agreed delivery plan for Powys "*Together for Mental Health (2019-2022)* which aligns with the *Mental Health (Wales) Measure 2010*.
- linked mental health priorities in the "Powys Health and Care Strategy" and Area Plan

The MHP&DP is required to produce six monthly monitoring returns of the Delivery Plan priorities to be submitted to Welsh Government to update on progress. Each Partnership board is also required to produce an annual public-facing statement highlighting their position in achieving the *Together for Mental Health* actions. The Partnership will provide reports on progress to Powys Teaching Health Board; Powys County Council; Powys Regional Partnership Board and other related boards where needed, such as the Area Planning Board for Substance Misuse and the Regional/Powys Housing Support Boards

The Partnership will also review the progress of specific plans aligned with the *Together for Mental Health Delivery Plan*, e.g. *the National Crisis Care Concordat Plan, the Substance Misuse Co-occurring Plan and other local action plans*.

The Partnership will be responsible for monitoring compliance with targets associated with the T4MH delivery plan including the *Mental Health (Wales) Measure 2010*. Specifically, it will meet the requirements of the agreed Part 1 Scheme. This will include ensuring periodic reviews of the Scheme.

The Partnership will consider the implications for service design and development of messages from key investigations, reviews and user feedback mechanisms including: participation arrangements,

complaints, incidents, serious incidents, homicide and suicide inquiries, serious case reviews, and child practice reviews.

The MHP&DP will cover all ages and will have a strategic focus on multiagency planning; performance; compliance; and feedback from people using services, parents and carers.

The MHP&DP will work alongside the Emotional Health and Wellbeing Workstream linked to the "Start Well" (Children and Young People's Partnership Board) and will work collaboratively across shared priority areas so that the Together for Mental Health delivery plan priorities and reporting are aligned.

The Emotional Health Workstream and the MHP&DP will collaboratively, and in partnership support, each other's service developments.

Membership

The membership of the Partnership takes account of the reporting needs provided by Welsh Government and revised in 2020 to ensure membership reflects requirements to implement the reviewed T4MH Delivery Plan. It will have Board level leadership. Membership will be at Director level or the equivalent, although deputising officers may be confirmed and nominated.

Powys Teaching Health Board and Powys County Council are the "local mental health partners" under the Mental Health Measure and will chair the group.

Joint Chairs	Director Primary, Community Care and Mental Health	Powys teaching Health Board (PTHB)	Jamie Marchant
	Head of Adult Social Services (Care)	Powys County Council (PCC)	Michael Gray
Members	Three Individual (Patient/Service User) Representatives, two adult and one carer representative		Sarah Dale Rhydian Parry Jane Bishop
	Head of Children's Services	PCC	Representative TBC
	Chief Officer	Powys	Clair Swales

		Association of Voluntary Organisations (PAVO)	
	Asst Director Mental Health and Learning Disabilities (i)	PTHB	Joy Garfitt
	Director covering Housing (New due to T4MH)	PCC	Nina Davies
	Director of Education or representative (New due to T4MH)	PCC	Hayley Smith, TBC
	Head of Adult Social Care (Commissioning) (i)	PCC	Rachel Evans
	Workforce Representative (New due to T4MH)	(PTHB/ PCC)	Louise Richards
	Chief Superintendent	Dyfed Powys Police (DPP)	Insp. Brian Jones
	Community Health Council Representative	Powys Community Health Councils (PCHCs)	Nicola Ruck
	Consultant Psychiatrist representative	PTHB	Ben Shooter
	Mental Health Participation Officer	PAVO	Owen Griffkin
	Voice for children	Junior Start Well Board	Jo Hughes to help facilitate (as/when needed)
	Operations Manager	WAST	Huw Jackson
	Primary Care representative	GP Clusters	Representative TBC
	Mental Health Partnership Manager	PTHB	Freda Lacey
	Mental Health Lead	PCC	Rachel Williams

(A)		
Operational Manager, Mental Health (A)	PTHB	Louisa Kerr
Head of Psychology	PTHB	Geoff Watts (retiring shortly)
Principal Health Promotion Specialist	Powys Public Health Team	Tessa Craig
CAMHS Manager (C)	PTHB	Samantha Shore
Children's Services, Leaving Care/16+ Team (C)	PCC	Jo Hughes
Probation Service	Probation	Gemma Rennie
Participation Officer – facilitating Engage To Change	PTHB	Lucy Harbour

A= adult and/or older people services C = children and young people services
 i) will lead on link with substance misuse

The Probation Service will be invited to receive papers although can attend Partnership as and when possible.

Representation will include a Mental Health Service User Development Officer. Engagement and participation arrangements will be age appropriate, link with existing mechanisms and will be compliant with statutory requirements, where applicable such as under the Carers Strategy (Wales) Measure 2010 and the Rights of Children and Young Person's (Wales) Measure 2011.

Membership will include the statutory Lead Directors under the Children Act 2004 responsible for arrangements for co-operation to improve children and young people's mental health and emotional wellbeing.

Members are responsible for ensuring feedback to the agencies represented; and for appropriate participation in prioritisation and resource allocation processes within each agency – including corporate planning processes.

The MHPDP will be a co-operative arrangement ensuring the effectiveness of joint planning and working arrangements. Each partner retains their existing accountability. The partnership does not have the power to direct its partner organisations. Its success will rest on its ability to reach collective decisions. In the unlikely

event that voting is necessary this will be restricted to Members only. Should any substantial area of difference arise between partners, the joint chairs will attempt to reach a solution. If the matter is not resolved it will be referred to the Chief Executives of Powys County Council and Powys teaching Health Board.

The partnership will work in liaison with other partnerships such as the Regional Partnership Board, Start, Live and Age Well Partnership Boards, Public Service Board, Area Planning Board, Housing Support Grant Board; Local Safeguarding Board(s); the Protection of Vulnerable Adults Committee; Youth Offending Services Partnership; the Integrated Family Support Service.

Frequency

The Partnership will meet at least 4 times per year, with an additional "Development Session" once a year. Meetings will be quorate if there is representation from the "relevant local partners" Powys teaching Health Board and Powys County Council and a third agency.

Subgroups

The partnership will be supported by the Mental Health Officer's Group which will monitor the performance of the Together for Mental Health Delivery Plan and related thematic subgroups; Engage to Change, Suicide and Self-Harm Forum (when constituted) and the Crisis Care Forum (including focus on S136 Criminal Justice) who will all provide highlight reports on a quarterly basis.

Together for Children and Young People is a national programme and accountability for delivery at a local level has been placed with Local Mental Health Partnership Boards. Therefore, in Powys all workstreams and steering groups associated with this programme will be brought together with the Start Well Partnership Board and linked with the Emotional Health and Wellbeing Sub-Group..

The Partnership will link with age and condition specific subgroups for adult mental health services, dementia, and substance misuse.

Resources

The Partnership will work within the policies and resources of the statutory agencies.