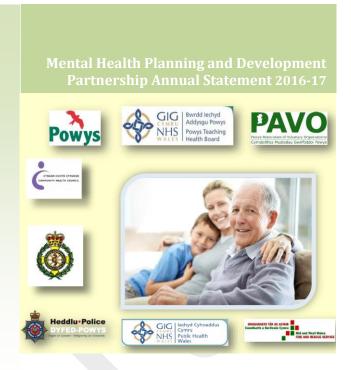
2016-2017 | Powys Teaching Health Board | Together for Mental Health Delivery Plan 2016-2019

Hearts & Minds: Together for Mental Health in Powys Annual Statement 2016-2017



Introduction

Together for Mental Health is the Welsh Government's 10 year strategy to improve mental health and well-being in Wales. Published in October 2012, following significant engagement and formal consultation with key partner agencies, stakeholders, services users and carers, it is a cross-Government strategy and covers all ages. It encompasses a range of actions, from those designed to improve the mental well-being of all residents in Wales, to those required to support people with a severe and enduring mental illness.

Actions identified in the second Delivery Plan, covering the 2016-2019 period, require a cross-cutting approach and are implemented jointly by partners, including Welsh Government, health boards, local authorities, the third and independent sector, education, public health Wales, police, fire, ambulance and others. The Delivery Plan is overseen by the National Partnership Board, and there is a Local Partnership Board (LPB) in each area. In Powys the LPB is known as the Mental Health Planning and Development Partnership.

This public-facing report represents the annual statement that is produced in November each year by Local Partnership Boards (LPBs), for the October 2016- October 2017 period. The report has been coproduced with service user and carer representatives, and is a summary of progress to date against the actions. The document also provides an overview of future priorities. The 2016-2019 Delivery Plan can be found at: http://gov.wales/topics/health/nhswales/plans/mental-health

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1 Putting it in Perspective: Population Needs Assessments and Partnership Working

The population assessment was compiled by partners drawing on data and information from all engagement work with people using services, families and carers (including young carers). It is an assessment identifying health and social care needs in Powys and is required by Section 14 of the Social Services and Well-being (Wales) Act which ensure citizens have been fully involved in the process of identifying the range and level of services necessary, including mental health, within the final reports.

The Powys population assessment has identified that improving mental health is a critical issue for people of all ages and its impact is cross cutting, affecting life chances, learning, home life, employment, safety, physical health, independence and life expectancy.

One in four people in the UK will experience a mental health problem each year, and 25% of GP consultations are used for people with mental health problems.

8% of the Powys population report being treated for depression or anxiety and it is one of the top three leading causes of disability.



Powys Mental Health
Planning and
Development
Partnership (MHPDP)

'The Powys Mental Health Planning and Development Partnership aims to work together to provide high quality, integrated care services to make a positive difference to the lives of people who need them. The partnership is made up of organisations and individual representatives of people using services and those close to them. The group promotes mental and emotional health and wellbeing for all.'

Regional Partnership Boards

Regional Partnership Boards (RPB) are seven statutory groups established under Part 9 of the Social Services and Wellbeing Act. They are responsible for ensuring that local authorities and health boards work together in an integrated way around the 4 principles of the Act, including Prevention, Well-being (including mental well-being), People and Partnership.

Both LPBs and RPBs share some common themes, and it is important that their activities are linked to maximize positive outcomes for those who access services for their mental health – wherever they are accessing support and promoting positive mental health. The Powys Mental Health Planning and Development Partnership is now a formal sub group of the Regional Partnership Board which means that it can align its delivery plan with the priorities of the Wellbeing plan for Powys.

Mental Health and Substance Misuse

During 2016-17, a close working relationship was established with the Powys Area Planning Board, which commissions Substance Misuse Services in Powys. As a result, two important work streams have been developed, for which there is joint accountability under both Partnerships:

- 1. Delivery of a joint action plan to effectively deliver Welsh Government's Mental Health & Substance Misuse Co-occurring Substance Misuse Treatment Framework (September 2015) for adults and children and young people.
- 2. Strengthening of dynamic and intelligence led harm reduction practice though planning, implementing and monitoring relevant aspects of substance misuse aimed at reducing harm through a prevention, intervention and partnership approach.

Veterans Mental Health

The Powys Armed and Ex Forces Forum (PAEFF) is a multi-agency group which includes veteran representatives. Its role is to ensure that health issues relating to the Armed Forces Covenant are appropriately reflected in NHS service design and improvement across all services.

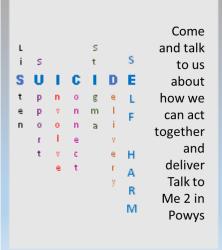
The All Wales Veterans' Mental Health Service is provided in Powys by three neighbouring health boards, BCUHB for Montgomeryshire, ABUHB for Mid and South and ABMUHB for the Ystradgynlais area of Powys. Work is ongoing to raise the profile of the service in Powys and to ensure close joint working with secondary adult mental health services. The PAEFF and MHPDP are now connected with a joint action plan in place being delivered to ensure mental health services for Veterans in Wales who are experiencing mental health problems are sustainable and able to meet that populations needs in a timely and appropriate manner.

Talk To Me 2 (T2M2): Suicide and Self-Harm Prevention Strategy 2015-2020

LPBs are responsible to report on action plans, supported by Regional T2M2 groups. The National Advisory Group on suicide and Self-harm monitors progress, and produces an annual report. The Welsh Government monitors statistics on suicide and self harm rates, admissions to hospital and population mental health well-being scores. We can all work together to improve wellbeing. The strategy and action plan can be found at:

http://gov.wales/topics/health/publications/health/reports/talk2

Under the governance of the MHPDP, a workshop is to be held during 2017 to help develop and establish structures to deliver on priorities for Powys for T2M2. With the support of Powys Associations of Voluntary Organisations (PAVO), a list of support networks for those affected by bereavement through suicide has been produced and working with the Third Sector support networks and crisis pathways will be localised as part of this work.



2 People Using Services and Those Close to them - Involvement

The Powys MHPDP brings together key stakeholders, facilitated by PTHB and great care is taken to involve people who use services, parents and carers in the ongoing planning and in the delivery of the Hearts and Minds Strategy. This includes working together through development sessions.



Individual representatives of people using services and those close to them are appointed to the Powys MHPDP.

They provide the Partnership with feedback from local networks (formal and informal) and from the national forum and national partnership boards and ensure that key priorities of the Hearts and Minds delivery plan stay at the forefront of Partnership business. This means people using services are also involved in the Partnership's work streams, including the Engage to Change Sub Group which has purposely been established to:

- Inform and involve people using services and those close to them in developing, improving and evaluating services, and to strengthen signposting and service information throughout Powys.
- Promote ways to develop and maintain good mental health and wellbeing and reduce stigma, and to more widely inform communities about the work of the Mental Health Planning and Development Partnership

This is also the group who have co-produced this Annual Statement for the Partnership using outcomes from all of the engagement work facilitated during 2016-17 with people using services and those close to them.

Engage to Change achievements:

- Development of a Communications Plan for the MHPDP
- Receive reports on audit work undertaken in Care and Treatment planning and support improvement activity
- Pooled partnership communication resources
- Induction pack for individual representatives of people using services appointed as MHPDP members
- Using feedback from PAVOs Mental Health participation networks, ensure issues raised are compiled in an issues log, considered and resolved at the appropriate level and fed back to people using services
- Co-ordinate feedback from Patients Council
- Development of a Recruitment Policy to ensure people using services are involved in PTHB
- Supported specific projects, activities and services with ensuring promotional material is up to date, and accessible in terms of encouraging people to engage
- Following the baseline work undertaken to audit Care and Treatment Planning, the Engage to Change group can support future annual satisfaction surveys as required by the Delivery Plan.

Common themes identified from the 'Issues Log'

- i. Tackling stigma in Communities
- ii. Ensuring involvement of people in developing their own care and treatment plans
- iii. Building confidence in people using services and those close to them in expressing when they may not be happy with the service they are receiving without fear of being stigmatised. The Engage to Change Group is working with services to provide more information about who people can talk to without having to go through formal complaints procedures.

Back to the Floor

The Engage to Change Group look for innovative ways to gather feedback and have facilitated a 'Back to the Floor' style programme of visits for Directors and other members of the Partnership who have been shadowing staff in mental health services and speaking with people using those services. The group captures the experiences of participants and relevant information is fed into future planning processes.

The Back to the Floor programme has been so successful that more visits are planned for 2017/18 and beyond.



Superintendent Jon Cummins
(Dyfed-Powys Police) with Staff
Nurse Melanie Fletcher. The
Superintendent visited the Felindre
Ward, Bronllys Hospital, which
offers patients acute in-patient
mental health services and then
with the South Powys Crisis
Resolution Home Treatment Team.

Other visits:

Assistant Director Mental Health and Learning Disabilities, PTHB visited Kaleidoscope, Substance Misuse Service.

Chief Executive PAVO visited the CMHT, Brecon.

Vice Chair, PTHB visited Mid Powys Mind.

Chief Officer, Powys
Community Health Council
spent time with a Social
Worker in the CMHT in
Newtown.

Assistant Director Mental Health and Learning Disabilities and Vice Chair, PTHB visited Brecon Mind.

"Well, I had hoped to learn more about mental health services and I have absolutely done that! I have made some great contacts within the Mental Health services at an operational and tactical level..... Everyone currently on the ward seemed happy. They are getting the care and attention that they need and no issues were raised."

Dignity Pledge

The Powys MHPDP recognise the importance of the emotional and psychological dignity of the people partner agencies work for, and taking the lead from the National Partnership Board member organisations in Powys have adapted their Dignity Pledge to ensure that dignity is at the forefront of care, treatment, and support. The Dignity Pledge will be signed by all members of the MHPDP and summaries of the pledge posted in mental health service premises across the County. The full pledge will be available on partner agencies websites, shared with people using services, used for staff inductions and form part of regular staff supervision sessions. The Dignity Pledge reinforces that:

- EACH PERSON IS EQUALLY VALUED
- ***** EACH PERSON DESERVES RESPECT AND PRAISE
- **❖** EACH PERSON DESERVES ACCEPTANCE AND UNDERSTANDING

3 Checking In: How are We Doing?

During 2016-17 the MHPDP considered, actioned and or dealt with topics including:

- Emotional Health and Wellbeing reports from the Children and Young People's Partnership in Powys including details of online and school based counselling service performance
- Mental Health and housing related support plus connecting with the Supporting People agenda
- Performance and defining future needs for the adult online Cognitive Behaviour Therapy programme known as 'Beating the Blues' and ongoing involvement in terms of recommissioning
- Ongoing updates on the repatriation of adult mental health management arrangements back into PTHB (fully implemented June 1st 2017)
- Progress on implementing the requirements of the Social Service and Wellbeing Act and how the MHPDP will work within the Regional Partnership Board arrangements
- Full exploration of priorities for people with co-occurring mental health and substance misuse issues and approval of joint plan to improve service delivery, implement audit of existing policies and multi agency training
- Endorsement of the Powys Dementia Plan
- Understanding Perinatal Mental Health provision and developments in Powys (Perinatal Mental Health Steering Group now a formal sub group of the MHPDP)
- Potential training needs for Primary Care and a written offer of support to introduce evidence based training packages for GP Clusters
- Development session to revise the Hearts and Minds Delivery Plan in line with Welsh Government updates. This included a proposal to restructure the Partnership, particularly to incorporate the Together for Children and Young People agenda and revise Terms of Reference for the MHPDP.

Section 136 Criminal Justice

In addition the MHPDP has a further work stream specifically to deliver on the Mental Health Crisis in Care Concordat sub group known as the Section 136 Criminal Justice sub group. This group has been working to improve how people, in mental health crisis and who present a risk to themselves or the public, are helped.

During 2016-17 the group developed an action plan to ensure Powys is delivering on the priorities of the Concordat and it covers a range of activity from prevention and early intervention, increasing awareness of



alternative interventions for people in crisis, ensuring appropriate information sharing and access to specialist advice, collaborative risk assessment and case management/review processes.

One of the key achievements of last year was improving local practice through multi agency training. Over five sessions, 98 Police officers and 55 partner agencies working in Powys attended the training with input from Psychiatry, CMHTs, CRHTTS, Felindre Ward and the Emergency Duty Team, and the view of a person using services on their experience. Including a further 5 sessions held during 2015-16 the total number of staff provided with Mental Health Awareness and a working knowledge of Section 135 and 136 of the Mental Health Act now totals 305.

Five Ways to Wellbeing

As part of prevention work and to build emotional resilience, the MHPDP regularly promotes the Five Ways to Wellbeing, an evidence based approach to living a longer, happier and healthier life. The 'Five Ways' are actions that can be undertaken by anyone in their everyday lives.

Most recently, five members of the Engage to Change sub group from PTHB, PAVO and the Mid and West Wales Fire and Rescue Service wrote about their experiences of putting the 'Five Ways' into practice as part of a blog produced by PAVO's Mental Health Information Service.

Tim took notice and was active, cycling from Powys to Stratford Upon Avon to learn more about Shakespeare.

Anne is active playing football (for Hay St. Mary's LFC.

Pum Ffordd at Les Powys Five Ways To Wellbeing





Penny connected with others to create a Roly Poly Bird for one of the two amateur dramatic groups she is part of in Brecon.

Jackie connects with people in her community whilst volunteering for the Quilt Association.

Louisa got creative and drew a picture of her sister's dog to give to her for her birthday.

Promoting the Five Ways to Wellbeing is an ongoing priority of the MHPDP. More information, including a blog from Powys Public Health Team can be found here: http://powysmentalhealth.blogspot.co.uk/2017/11/five-on-five-ways-to-wellbeing.html

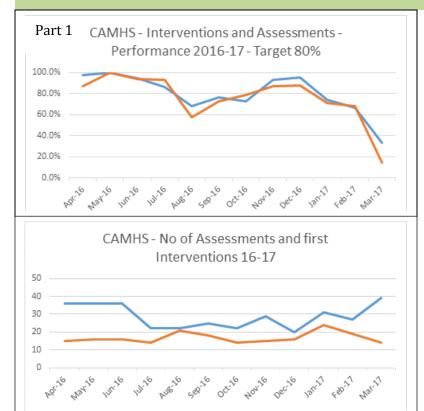
Third Sector

The recent addition of a Powys Wellness, Learning and Recovery Centres (Third Sector Mental Health Provider) representatives at the Engage to Change meetings has helped to collate a central list of local third sector activities that exist across Powys. The group will now consider ways to help raise the profile of the activities, promote and keep at the forefront of referrers minds and share/replicate good practice etc. This will be done by ensuring information is up to date, accessible, consistently promoted and shared with GP Clusters, secondary Mental health services and Community Wellbeing Co-ordinators who have recently been appointed across Powys by PAVO to connect individuals and communities with wellbeing services.

The MHPDP also receives reports from the Third Sector at each meeting to hear how mental health Third Sector Providers including Ponthafren, Ystradgynlais Mind, Mid- Powys Mind, Brecon Mind, Aberystwyth Mind continue to meet need. These Providers also work to build resilience through activities linked to Mindfulness, Anger Management, Thrive, IT, Tai-Chi, Gardening, Creative Writing and others. The providers have also contributed to the development of the Hearts and Minds: Together for Mental Health Delivery Plan.

In 2016, Managers at Ponthafren and the CMHT won the PTHB staff excellence award for Partnership working.

4 Children and Young People - Performance



Total number of assessments undertaken during the month

Part 1 of the Mental Health (Wales) Measure 2010 aims to improve access to mental health services in primary care, ensuring the availability of a consistent range of services. There are targets that must be achieved to ensure that assessments are undertaken within 28 days of a referral and interventions started within 28 days of assessment

The ability for CAMHs in Powys to meet the Part 1 targets fluctuated during 2016-17 due to a large increase in referrals exacerbated by staff sickness and changes in staffing.

On the 21st June 2017 the terms of reference and scope for a CAMHS service review was agreed. Following the review a new model will be put in place to meet demand, and improve client experience, and ensure the service can be more responsive.

Part 2 of the measure places duties on LHBs and Local Authorities to work together and requires that people of all ages within secondary mental health services receive a care and treatment plan and a care coordinator. During 2016-17 CAMHs were meeting the target but following an audit on the quality of Care and Treament plans remedial action was taken to ensure accurate reporting and improved quality. This is reflected in the decline in December 2016 followed by rapid improvement in early 2017.

CAMHs	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
	16	16	16	16	16	16	16	16	16	17	17	17
90 % of HB residents	98	100	100	100	100	100	100	100	78	81	89	97
who are in receipt of	%	%	%	%	%	%	%	%	%	%	%	%
secondary MH services												
to have a valid CTP												
Total number of patients	39	40	44	49	48	49	51	51	25	25	25	28
resident in your LHB												
with a valid CTP at the												
end of the month												
Total number of patients	40	41	45	50	49	50	52	52	32	31	28	29
resident in your LHB												
currently in receipt of												
secondary Mental												
Health services at the												
end of the month												

Children and Young People - Services

Gwasanaeth lechyd Meddwl Amenedigol Perinatal Mental Health Service



Welsh Government funding was provided in 2015 to all health boards to enhance the development of specialist perinatal mental health services to support antenatal and postnatal mental health care. However, in Powys the emphasis is on the development of a community focussed model of care rather than a specialist perinatal mental health service, due to the low population numbers and the large geography of the county. Instead, the Powys model focuses on the support that can be provided by midwives and health visitors to those women experiencing mild to moderate mental ill-health, plus referral routes to the primary mental health service for those in need of more specialist support, and referrals to secondary mental health services for those at risk of or experiencing more severe mental ill-health.

Further to this, the multi-agency Powys Perinatal Mental Health steering group works to improve outcomes and experiences, and reduce variation across the county in relation to perinatal mental health in line with NICE guidance (2016). It also works to improve communication between teams which is the key for good quality perinatal mental health services (NICE guidance 2014 and MBRRACE report).

During 2016-17 services have been working towards achieving the standard set up by Quality Network for Perinatal Mental Health Services for community Perinatal mental health services and soon aiming to start collecting data for it. The steering group is also working closely with the All Wales Standard and Pathway development group to incorporate it in the local services.

A Nursery Nurse, Midwife, and Health Visitors referral Pathway have been developed and now all midwife and health visitors undertake mandatory training about prenatal mental health. The steering group is organising workshops and presentations for local GPs and other organisations to increase awareness and improving awareness in the public through press releases/display boards, Bump Talk and the Health Visitors face book page. They have also drafted Antenatal poster for waiting rooms, guided by people using services. This work links strongly to the Adverse Childhood Experiences (ACES) work and PTHBs Health Inequalities plan which is currently being drafted by Powys Public Health Team.

CAMHs Updates:

- The Co-ordinated Intensive Treatment Team (CITT) is in place and Powys CAMHs have met the target that out of area placements for children and young people are reduced below 2013/4 baseline by 10%.
- Powys CAMHs is using the Framework for Improvement which provides a definition of specialist CAMHS and three key pathways, ensuring that all children and young people receive consistent care wherever they live as part of remodelling of the service during 2017-18.
- People with early or a first episode psychosis (EIP) are now seen by the Crisis Practitioners within 48 hrs and provision of NICE compliant psychological therapies and interventions follows (if appropriate).
- Powys Youth Justice Service has designated time from CAMHS professional and access to forensic CAMHS. This
 equates to a CAMHS nurse employed to be the clinical nurse specialist, a Mental Health Psychologist advisor
 and pathways are clear for partners.

Together for Children and Young People:

'Together for Children and Young People' (T4CYP) was launched by the Minister for Health and Social Services on 26th February 2015. Led by the NHS in Wales, this multi-agency service improvement programme considers ways to reshape, remodel, and refocus the emotional and mental health services provided for children and young people in Wales, in line with the principles of prudent healthcare.

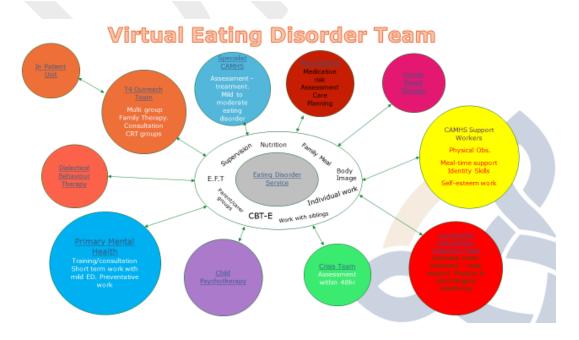
LPBs are recognised as the key vehicles for delivery of the T4CYP programme. To this end, the MHPDP has reviewed local delivery mechanisms to ensure it is fit for purpose to deliver T4CYP. It has since been working to link emotional health and wellbeing structures where they exist to the main LPB and develop them where they don't.

It has also reviewed its terms of reference, engaged with the Powys Perinatal Steering group for it to become a sub group of the partnership, led a workshop under the CAMHs review to 'map and gap' emotional health and wellbeing work in Powys and it is strengthening specific participation for mental health with children and young people.

Eating Disorders

At the September 2017 meeting of the MHPDP, presentations were given from Children's and Adults' Services on what Eating Disorder Pathways and services were in place. A virtual Eating Disorders Service is in place for children and young people in Powys linked with a Tier 4 outreach service who provide supervision for Powys staff as demonstrated in the diagram below. In terms of adults, access to Eating disorder treatment (Tier 3) for Powys residents is commissioned from neighbouring Health Boards. PTHB have Tier 2 Leads in each area (adult).

Agreed actions from the meeting were to ensure ongoing sharing of systems and processes and to develop a joint plan with the National Eating Disorders Network to consider wider impact of harm associated with Eating Disorders and therefore to focus on strengthening multi agency prevention activity, working with families, carers and third sector more effectively, and ensuring effective use of additional resource from Welsh Government to support transition from children's to adults' services. This plan will be overseen by the MHPDP as well as the implementation the Eating Disorders Framework using the standards in the original Framework. Baselines will be established along with ongoing monitoring of performance for the Partnership as a result.



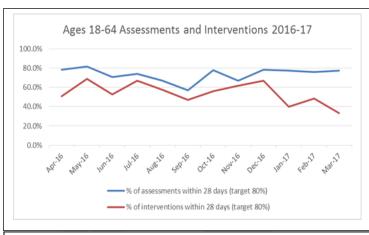
5 Adults - Performance

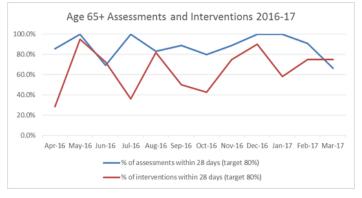
Performance - Mental Health Measure

Part 1 – the main challenges have been in respect of staff sickness and vacant posts. Work has been undertaken to resolve these issues including holding a number of recruitment campaigns.

Part 2 – During 2016-17 PTHB consistently met the target in terms of numbers of people who have a valid care and treatment plan in place. In 2017, as part of a wider piece of service improvement work, PTHB worked in partnership with Public Health Wales 1000 lives and with the Delivery Unit (DU). As part of this, in June 2017, the DU commenced a focused study into the quality and effect of CTP planning and are now working with the service to develop an action plan to guide service improvement over the next 12 months.

Part 3 gives all adults who are discharged from secondary mental health services the right to refer themselves back to those services. Figures show that the numbers of patients requesting assessment and being assessed in Powys are low.





Part 2 figures

Adults	Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17
90 % of HB residents who are in receipt of secondary MH services to have a valid CTP	95.8%	95%	96%	94%	96.1%	94.5%	94.8	97.4%	96.7%	94.6%	91.5%	91.1%
Total number of patients resident in your LHB with a valid CTP at the end of the month	794	775	779	778	779	772	766	777	769	733	700	702
Total number of patients resident in your LHB currently in receipt of secondary Mental Health services at the end of the month	842	828	820	833	823	828	816	806	795	775	765	771

Adults and Older People's Services

- PTHB has made considerable progress in the reduction of waiting times supported by significant additional investment in Psychologists and Cognitive Behaviour Therapists on a fixed term basis to remove current waiting lists. This work is now nearing completion.
- Additional resources from Welsh Government have also enabled the recruitment of an additional CBT therapist and 2 additional LPMHSS clinicians to strengthen the provision of NICE recommended therapies and also supported by the development of local computerised CBT. This follows on from the successful 'Mastermind' project which demonstrated the utility of CCBT. Work continues currently with a tender process to enable the project to continue using a range of platforms with a view to provide a national roll out as requested by WG.
- Referral pathway changes have been made and psychology referrals are now via CMHT rather than GP reducing no. of inappropriate referrals
- ❖ At the beginning of 2016, a workshop was held between adult mental health service and Kaleidoscope staff to review the joint working policy. Policy and practice will be audited in 2017-18 and an improvement plan developed as a result which will also cover future training needs.
- Provision of NICE compliant psychological therapies and interventions for people with first episode psychosis in Powys is based on the needs of individual patient based on their specific presentation. Individual commissioning arrangements are implemented to support patients. Local pathways are in place for those suspected of psychosis and that these cases are treated as urgent and seen within 48 hours.
- Following a decision in June 2016 to temporarily close the Fan Gorau inpatient assessment in Newtown on patient safety grounds due to significant challenges in maintaining safe staffing, an alternative service model was put in place through a Dementia Home Treatment Team. This Team has enabled even more people to receive specialist support, with more people cared for at home or closer to home. It has reduced the need for hospital admission and has helped families to stay together. Based on the outcomes of consultation with hundreds of people in the North of Powys, the decision was taken to permanently establish the Home Treatment Team and to keep Fan Gorau closed.

Woodland Walk and Marking Time Sculpture

During 2016-17, the Green Valleys CiC (TGV), PTHB, supported by Powys Armed Forces Covenant created a woodland walk to allow local armed forces veterans patients, staff, and visitors alike to take some quiet time in the small mature woodland adjacent to the hospital. TGV worked with forces veterans over the past year to create a wheelchair accessible route through the wood, complete with a large fired sculpture by Brecon Beacons artist Rebecca Buck. The Marking Time walk was opened in June 2017, by by PTHB's Chief Executive, Carol Shillabeer. As the project group also worked with children from two schools, Mount Street Primary in Brecon and Llandrindod High School, children from Mount Street Primary attended the opening and were delighted to see the fired tiles they had created in situ.



Dementia

Within Powys there are approximately 2400 people living with dementia, and, because of our ageing population, this figure is set to rise to 44% within the next 8 years.

In anticipation of the significant growing number of people with dementia that are predicted not only in Wales, the UK but worldwide, PTHB have been working collaboratively with Powys County Council, PAVO, the Alzheimer's society and Dementia Friendly Communities,



Dementia Friendly Communities enable people with dementia to continue to enjoy being part of their local community.

A dementia friendly community promotes inclusivity rather than isolating or separating people who might be living with dementia.

In Powys there are now five communities officially recognised by the Alzheimer's Society as being or working to become dementia friendly:

Brecon, Newtown, Welshpool, Ystradgynlais and Knighton.

And there are a further eight who are either active in the process or just at the beginning stages of becoming dementia-friendly:

Machynlleth, Hay on Wye, Crickhowell, Llandrindod Wells, Montgomery, Presteigne, Guilsfield and Rhayader. particularly Brecon and Hay, to strengthen the previously produced Dementia Plan, which was a sub-part of the Hearts and Minds Together for Mental Health in Powys Strategy.

The scale of the challenge that dementia presents for our rural community over the next three years, and beyond, should not be underestimated. The Dementia Plan produced in 2016-17 builds upon past achievements, which are many, and includes the new priorities identified by Welsh Government but, importantly, it remains focused on firming foundations and ensuring fundamentals are in place.

For more information visit:

http://www.powysthb.wales.nhs.uk/sitesplus/documents/114 5/Board Item 2.8 Dementia%20Plan%202016-19 Plan.pdf

Dementia Co-ordinators are now embedded across Powys to deliver direct support to newly diagnosed patients, families carers, provide ongoing support to people with a diagnosis of dementia and link individuals to community based support including peer support via third sector and other community initiatives.

There are two support workers employed in the Memory service on a full time basis, who cover North and South Powys. Following a diagnosis the Support workers will provide face to face information and advice on accessing services.

They promote peer support groups to people and will attend with the person whilst they forge relationships, in the short term. Dementia Support workers also facilitate a Cognitive Stimulation Therapy group and a Music group in their respective areas.

Dementia training for staff is a current priority. The Butterfly Scheme is an opt-in scheme for people with dementia or cognitive problems where people are identified with a discreet Butterfly symbol next to their name. In 2014 the Butterfly Scheme was launched in all Community Hospitals in Powys. Staff are trained in a special response plan called REACH to better communicate with people with memory problems. Butterfly Scheme Champions have been identified in each hospital ward and many hospital departments. Training for the Butterfly scheme is at 97% but other Dementia Training is lower – improvement work is being progressed through the Dementia leads forum and delivery of the Dementia Plan.

PTHB commissions liaison services with partner Health Boards District General Hospitals and this includes a requirement to ensure that services are accessible to needs of patients with cognitive impairment dementia, or mental health conditions.

Ring-fenced Funding for Mental Health

The minimum sum PTHB were required to spend on mental health (for all ages) in 2016 - 17 was £34,458,000. In 2016-17, the relevant budgets expenditure totaled £34,461,000.

Priorities for expenditure are informed through both demand and capacity analysis for PTHB's Integrated Medium Term Plan, feeding through the views of people using services and those close to them from the Engage to Change work and ongoing performance monitoring and remedial action work required.

NHS Management Arrangements

PTHB has seen an important transition for adult mental health services over the past two years. Adult mental health services in North Powys (formerly managed by Betsi Cadwaladr University Health Board) and in Ystradgynlais (from Abertawe Bro-Morgannwg University Health Board) joined PTHB in 2015. Primary Mental Health Services in South Powys followed in 2016. Now the repatriation is complete with ABUHB colleagues joining PTHB from 1 June 2017.

This is a change in management arrangements for staff – not in the range or location of existing services. The goal has been to enables services to work ever more closely together in Powys, ensuring a parity of esteem between physical and mental health and providing truly integrated services including through our partnerships with Powys County Council, with PAVO and the wider third sector, and with other partners and providers. 2016-17 also saw the appointment of additional keys posts for the service improvement agenda including a Head of Psychology and Head of Operations for Mental Health in PTHB.

6 Future Direction

The MHPDP have highlighted the following specific priorities and activity 2017-19 with cognisance of the requirements and timescales of specific actions within the Delivery Plan:

- Full implementation of the Powys Dignity Pledge.
- Development and implementation of annual Satisfaction Survey following recommendations from Delivery Unit Review.
- Improving crisis pathways for Children and Young People.
- Evaluation of psychiatric liaison service in District General Hospitals.
- Ongoing implementation of the Eating Disorders framework and connecting services.
- Continued delivery of the Mental Health Crisis in Care Concordat delivery plan for Powys and evaluation from the perspective of people using services.
- Audit of joint substance misuse and mental health co-occurring policy and undertake multi agency training.
- Ongoing work with the Third Sector to ensure equity of provision across the County.
- Work with the Powys Armed and Ex Forces Forum to strengthen signposting arrangements for Veterans and specialist services.
- Strengthen accountability for the Together for Children and Young People programme under the MHPDP including participation structures, developing the new model for CAMHs, work with the Perinatal Steering Group and Eating Disorders.
- Continue to audit information available about mental health services and ensure that they are accessible throughout the County.

7 Glossary

ABMUHB - Abertawe Bro Morgannwg University Health Board

ABUHB - Aneurin - Bevan University Health Board

ACES - Adverse Childhood Experiences

APB - Area Planning Board

BCUHB - Betsi Cadwallader University Health Board

CAMHs - Child and Adolescent Mental Health Services

CBT - Cognitive Behaviour Therapy

CCBT – Computerised Cognitive Behaviour Therapy

CITT – Co-ordinated Intensive Treatment Team

CMHT – Community Mental Health Team

CRHTT - Crisis Resolution Home Treatment Team

CTP – Care and Treatment Plan

DU – Delivery Unit

EIP – Early or First Episode in Psychosis

EDT – Emergency Duty Team

GP – General Practitioner

LPB – Local Partnership Board (for Mental Health)

LPMHSS – Local Primary Mental Health Support Service

MBRRACE – Maternal Newborn and Infant Clinical Outcome Review Programme

MHPDP – Mental Health Planning and Development Partnership

NICE – National Institute for Health and Care Excellence

PAEFF – Powys Armed and Ex Forces Forum

PAVO – Powys Association of Voluntary Organisations

PTHB - Powys Teaching Health Board

RPB - Regional Partnership Board

T2M2 – Talk to Me 2

T4CYP – Together for Children and Young People

TGV CiC – The Green Valleys Community Interest Company