

**MINUTES OF THE MEETING OF  
THE POWYS MENTAL HEALTH  
PLANNING AND DEVELOPMENT  
PARTNERSHIP**



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd  
Addysgu Powys  
Powys Teaching  
Health Board

**21<sup>st</sup> September 2021 – 2:00pm**  
**Via Skype**

**In Attendance:**

<b>Name</b>	<b>Designation</b>
Joy Garfitt (JG)	Assistant Director for Mental Health & Learning Disabilities Service, PTHB - Chair
Freda Lacey (FL)	Mental Health Partnership Manager, PTHB
Dr Ben Shooter (BS)	Consultant in Adult Psychiatry, PTHB
Christopher Hartwright (CH)	Head of Psychology, PTHB
Clair Swales (CS)	Head of Health & Wellbeing, PAVO
Jo Hughes (JH)	Children's Commissioning Team, PCC
Joe Wellard (JW)	Regional Partnership Manager, PCC
John Lilley (JL)	Individual Representative
Brian Jones (INSP Jones)	Inspector, Dyfed Powys Police
Louisa Kerr (LK)	Interim Head of Mental Health Operations, PTHB
Lucy Harbour (LH)	Mental Health Partnership Participation Officer, PTHB
Melanie Davies (MD)	Vice Chair, PTHB
Nina Davies (ND)	Head of Housing and Community Development, PCC
Owen Griffkin (OG)	Participation Officer, PAVO
Gemma Rennie (GR)	Senior Probation Officer, National Probation Service
Sarah Dale (SD)	Individual Representative
Victoria Ruff-Cock (VRC)	Senior Manager, Adult Social Services, PCC
Victoria Sharpe (VS)	Volunteer Coordinator, PTHB
Jane Bishop (JB)	Individual Representative

**In Attendance:**

Owen Price (OP)	Administration Support, PTHB – Minute Taker
Katie Hockett (KH)	Medical Student
Harry Evans (HE)	Medical Student
Alexandra Milligan (AM)	Post Graduate Placement

**Apologies:**

Jamie Marchant	Executive Director for Primary Care, Community and Mental Health
Ruth Derrick	Head of Nursing, Quality & Safety, Mental Health, PTHB
Michael Gray	Head of Adult Services, PCC
Samantha Shore	Head of Service for CAMHs, PTHB
Nicola Ruck	Community Health Council, PCHC
Jamie Marchant (JM)	Executive Director of Primary, Community & Mental Health Service, PTHB
Supt Ross Evans	Superintendent, Dyfed Powys Police

Joanna Harris	Senior Change Manager, Start Well, PCC
Louise Turner	Assistant Director of Women's and Children's Services, PTHB
Rachel Williams	Senior Manager Mental Health & Disabilities, PCC
Rhydian Parry	Individual Representative
Huw Jackson	Health Board Clinical Lead, WAST
Louise Richards	Workforce Planning Manager, PTHB

Agenda Item		Action/By Whom
1	<p><b>PROCEDURAL MATTERS</b></p> <p><b>1.1 Welcome and apologies for absence</b></p> <p>JG introduced herself and invited everyone to make introductions. JG welcomed attendees to the meeting and thanked everyone for their attendance. Apologies were noted as above.</p>	
2	<p><b>PARTNERSHIP UPDATES</b></p> <p><b>Subgroups:</b></p> <p><b>2.1 Community Voluntary Service(s) Report</b></p> <p>CS – Stated that she will pick up the issue around third sector provider representation on this board, outside of this meeting with FL.</p> <p>PAVO has been able to provide training around gender identity which was delivered in partnership through the grant form from the Health Board via WG (Welsh Government) which was successful, with a lot of interest from the education sector. Further training has been identified through discussions with the LA (Local Authority) also and PAVO have increased the range of courses available because of this.</p> <p>There are concerns around late funding decisions which applies to MH (Mental Health) Providers as well as the wider partnership, which are causing issues around the planning and development of services for support in mental health and wellbeing.</p> <p>There are further concerns on staff well-being due to the increased demand on services and the capacity to support this. CS suggested that the partnership come together to collectively address these issues and support one another to improve well-being.</p> <p>Third sector providers came together to review the Together for Mental Health Plan (T4MH) and look at the services being delivered in Powys, as well as identifying potential gaps within third sector provision for opportunities of collaboration and service improvement. CS also used this opportunity to meet with FL to discuss any emerging issues and added that within the Programme for Government the Social Prescribing from WG is a big issue currently. CS added that the Deputy Minister for MH will be attending the Connect Wales conference on Thursday 23<sup>rd</sup> September to discuss the commitment around social prescribing.</p> <p>PAVO facilitate a number of networks, and the Powys Agri well-being support network have raised a number of concerns around the impact on agricultural workers mental health with concerns around the low numbers entering or taking on work within the agricultural industry. Farmers MH are suffering particularly at the end of their careers due to the added pressure of completing paperwork for their tenancy. CS is offering to have additional conversations around this to provide support for those working in agriculture and suggested to start recording the number of people coming</p>	

through the connector service as a means of wrapping the support provided.

Lucy Taylor has been working on the Mind Our Future Lottery bid with Third Sector partners and the council. In addition, over the coming weeks there are meetings taking place to see how a joint bid to the lottery can be put together; looking at ways to manage the wellbeing of young people and children going forward.

There are issues associated with the Hoarding toolkit which has been put on pause. The Mid West safeguarding board was leading on their own toolkit, which was why PAVO's cross-sector toolkit was poor. PAVO are looking to identify representatives of that safeguarding board to locate the toolkit, with the hope to revise and ensure the inclusion of MH services within that toolkit as a way of supporting people.

Citizens Advice Powys (CAP) have had a positive outcome in applying to the Social Value Development Fund and will be continuing to offer their services on Felindre ward and develop it.

CS reported challenges around recruitment of staff stating that this is as a result of posts being short term, combined with staff generally feeling tired due to the impact of Covid-19 on peoples MH and well-being.

CS has included updates from all the providers and their work across the sector within the reports.

Patients within the Patients Council have raised concerns about advocacy services during the Covid-19 period with difficulties accessing advocates. Additional reported concerns stated that there was blurring between advocacy on the ward and advocacy within the community which is something the engage to change group are working on distinguishing the differences between the two provisions within their feedback. The Patients Council have expressed challenges around having queries answered due to the change-over of staff and are looking forward to having the new Ward Manager start to address these queries. A recent blog has been published around Occupational Therapists highlighting the gardening work taking place at Felindre.

CS queries to the membership the status of the potential expansion of the Patients Council to older people, people on the wards who are out of county. CS recognised the challenges of this during Covid-19 and suggested this is something to look at and is happy to have conversations around this with those involved and interested in taking this forward.

CS invited individuals to book on to the "Understanding Hate Crime Course" taking place on Monday 27<sup>th</sup> September with a link included within the report.

	<p>PAVO have submitted a partnership bid to the National Lottery to look at helping to end homelessness. PAVO carried out a survey on Engagement HQ asking people around their experiences of homelessness and what led them to become homeless, which identified that support was needed. There were issues raised around access to MH support and CS suggested to include this within T4MH to look at how this can be addressed.</p> <p>The report also provides an update on those organisations providing MH and well-being support who have been successful in the last round of the Social Value and Development Fund which will increase funding coming into the sector to deliver essential support and services.</p> <p>CS opened to questions.</p> <p>JG – Thanked CS and invited MD to speak.</p> <p>MD – Stated that the MH Managers would be interested in receiving a patient’s view following feedback from the Patients Council and Advocacy Service report, once this is available and MD would put this through the quarterly meetings with the managers for discussion and understanding.</p> <p>CS – Welcomed this and offered to link with OG to feed this through once available.</p> <p>SD – Requested further information on the current work around homelessness due to personal experiences and interest within this.</p> <p>CS – Agreed to liaise with SD and provide further information on this and invited SD to contribute and to help scope the work around homelessness if they are successful in the joint bid with PAVO, LA and CAP and Shelter at the end of November 2021.</p> <p>SD – Agreed.</p> <p>JG – Thanked CS for comments and summarised the following actions.</p> <p><b>Action: CS to link with LH to provide Patients Council feedback once available.</b></p> <p>JG – Third sector representation difficult due to the size of the representation within these meetings – however, maintains that their views are reflected within the partnership.</p> <p><b>Action: CS to link with FL to discuss third sector representation within these meetings as PAVO usually fulfil this role as umbrella organisation for Third Sector.</b></p> <p><b>Action: CS to link with SD around discussion of the current homelessness bid and additional support SD can provide if this bid is successful.</b></p>	<p>LH/CS</p> <p>CS/FL</p> <p>CS/SD</p>
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CS – Thanked JG.

JG – Progressed into item 2.2.

## **2.2 Engage to Change**

LH – Offered apologies due to the reduction of activity this last quarter as LH had been off work for a long period.

Engage to change met earlier this month and received an update from John Lilley, who is our Powys representative for Wales in the MH and well-being forum. The forum has produced national guidance around co-production in MH and Powys Teaching Healthboard (PTHB) have been involved in supporting this and carrying out consultations via regular workshops. This consultation strategy will be available in December 2021 for Powys to review the recommendations and implement into the co-production strategy for MH.

PTHB have provided comment on the currently embargoed guidance and JL has advised that all the comments are being compiled with a final copy circulated shortly.

The forum have been working on a workshop about how to influence decision making at a strategic level within WG; to obtaining maximum influence at a local partnership board setting, and are due to have a meeting in Carmarthenshire this month.

JL, OG, LH attended Wrexham Universities in an introduction to co-production course this quarter which proved useful in developing a more in-depth understanding in how to co-produce within MH and a range of other examples. LH recommended that the members of the Partnership Board sign up to this training and would benefit from this, and has added the course register link into the report for those that wish to do so.

On the issues around the Patients Council being between substantive Felindre Ward Managers, LH added that OG and JL have been put in touch with Greg Luetchford (the new Ward Manager) to be introduced and resolve the issues currently on the Patients Council issue log.

There have been additional activities particularly around the transformation of the Felindre Ward Garden, thanks to Millie Griffiths (Occupational Therapist). Images have been embedded within the report.

Engage to Change have a dedicated agenda item to Advocacy to differentiate and provide clarity on the two provisions; IMCA and IMHA. Engage to Change are producing a paper to outline the provisions within Advocacy and how best to move forward with Advocacy within MH services.

The annual report presented within the previous meeting has been sent for translation into Welsh which will be available soon to share with members.

LH

**Action: Share annual report to members once translated into Welsh.**

LH invited the service user representatives to provide any additional comments.

SD – Commented that the service user representatives attended the Suicide and Self-Harm Prevention Forum. SD has put herself forward to write up the Forward Work Plan Strategy and the requirements around Talk2Me2, linking up with Jan Roberts and the forum members to carry out this piece of work.

JL – Added that the Patients Council are looking to recruit female service users as it is currently all male service users, and currently have a gap within the forum in providing a female service user perspective that would be beneficial. SD has put her name forward to support this.

LH – is working on coordinating representative away days and is going to meet socially distanced with all of the representatives to map out the priorities for the year and all work currently being completed.

JG – Thanked all for their continued support and work. Opened to questions.

All – No.

JG – Thanked all again for their work within MH in and around the development of services.

**2.3 Crisis Care Forum/Covid-19 Group Q4 Report**

The COVID-19 Crisis Care Group continue to meet fortnightly with the objective to identify and prevent the risk of harm and to monitor the demand placed on services. The group have recently discussed the current format and frequency of the meeting and it was agreed to continue in its current position, as it was felt to be a valued partnership approach.

The Group are currently discussing nine persons of interest. Seventeen cases have been closed since its introduction April 2020. Ten Integrated Risk Intervention Support (IRIS) cases are being discussed and eleven Sec 136 MHA cases. None of these have been repeats. The demand on Police resources is monitored through this group and there has not been be a significant increase of incidents being reported to the Police (Powys). Brian highlighted that it is understood that this is not replicated across partners, where the demand of resources is at an all-time high. Brian stressed the necessity to review the wider demand from all partners to better understand the current position.

Brian highlighted the main points of the Sec 136 Quarter One Crisis Care report. For the period April – June 2021, there had been six cases where Sec 136 powers were used, with four persons being admitted to Hospital. All six cases were considered to be appropriate use of the Police powers. No persons were detained at Police Custody under Sec 136 and the power was not used for any youths.

Self-harm and the threat of harm is managed through the Crisis Care Forum and Brian highlighted sixty six cases during Quarter one where the Police were involved. Thirty six cases were male and thirty two cases were female. This is an expected ratio.

The known causes for these incidents were alcohol, followed by relationship difficulties, medical and then bereavement. The majority of persons were left in the care of family, taking the least intrusive response in the interests of the patient. This was followed by being taken to A&E where medical intervention was required and then being left alone. Persons are only left alone when it is considered safe and this generally follows a significant amount of time in the company of Police Officers.

The number of apparent suicides are below five for Quarter one compared with eleven the same period last year. Brian raised concern for the Pandemic potentially being raised as the cause which would not be factual, as none of the cases had COVID as the primary cause and it was essential to fully identify the risk factors to consider preventative measures.

Brian raised the work being undertaken by Jan Roberts and that this work was going to influence suicide prevention and the response provided to the bereaved families. Jan has met Chief/Insp Andy Pitt who wishes to see development made with the support provided to families.

Brian provided an awareness of the Mental Health Act assessments carried out with persons in Police Custody for criminal offences. During Quarter one there had been six assessments. The average time between the request for the assessment and the assessment being carried out was just under four hours, which is acceptable taking into consideration the geography of Powys.

There had been one case where a person spent thirty one hours in Police Custody. The delay was initially due to the difficulty in securing a Second Doctor. Once the assessment was carried out, there were further delays in securing Psychiatric Intensive Care Unit (PICU) accommodation. The delay was such, that a second Mental Health Act assessment had to be carried out and at this stage it was considered suitable for the patient to be transferred to the Felindre Ward.

Brian informed the group that Supt Ross Evans (Dyfed Powys Police Mental Health Lead) had authorised multi-agency mental health training at



Powys to be held to address key areas impacting on performance. This will be on-line training involving all partners from the Crisis Care Forum and will commence this year.

JG – Opened to comments.

All – None. Moved into item 2.4.

## **2.4 Mental Health Officer's Group Report**

FL – The MHOG met on the 1<sup>st</sup> September to focus on the T4MH Delivery Plan in preparation for the upcoming workshop. The plan successfully progressed in mapping local priorities with the different agencies that were present, and looking to substantiate this today within the break-out rooms and partnership present.

Additional specific priority areas within the plan that was covered and emerging from the workshop include key themes such as:

- People with Complex Needs; post Covid-19
- Co-occurring needs; Homelessness, Housing, and Substance misuse

A strategic workshop took place in June covering the above areas, with a subsequent smaller, more focussed workshop that took place with Operational staff (chaired by Louisa Kerr) very recently. FL has included the key themes that came out of that workshop across all partner areas, within the report.

There is a plan that cumulates these themes within the steering group for complex needs, reporting through the MHOG as well as the Housing Support Group, and the Area Planning Board (APB) are also looking at these key themes and how they can take this forward by working together to resolve.

The MHOG have been reviewing training needs across all sector staff within complex needs, and corroborating this with common training needs, induction planning for new starters particularly within complex needs and the dual diagnosis workers.

The work around suicide and self-harm and harm reduction (Drug Related Deaths) is reported through the Crisis Care Forum (CCF) as well as the APB ensuring that people in crisis needing crisis support is being reported across different mechanisms and ensuring partners are aligned.

Jan Roberts is working alongside Jacqueline Davies looking at the data around suicide, and have discovered that many individuals who have committed suicide known to services within Powys were held within

	<p>primary care which is different across Wales. Finding this is useful for partners in planning services moving forward.</p> <p>The MHOG are looking to isolate and pull self-harm into it's own project area. As a result, CAMHS colleague Samantha Shore was invited into the MHOG to focus on self-harm and present to the membership. FL has included the presentation within the report for members to review if required.</p> <p>There is available funding for Suicide Bereavement from WG, and Powys is working on producing a proposal around this.</p> <p>Tier 1 funding is also available and has been aligned with key priority areas such as complex needs and crisis support, which includes the launch and ongoing development of the pilot for the NHS 111 service (twilight model / out of hours service).</p> <p>JG - Opened to comments / questions.</p> <p>All – No.</p>	
3	<p><b>PARTNERSHIP PRIORITIES – TOGETHER FOR MENTAL HEALTH DELIVERY PLAN (2019-2022)</b></p> <ul style="list-style-type: none"> <li>- <b>Workshop with Partners on endorsing/adding to mapped priorities against national plan</b></li> </ul> <p>FL – took the members of the meeting into individual break-out rooms to discuss the local priorities and linking them with the national priorities within the documents. Looking at whether the information within the T4MH is correct, and if there are any missing pieces of information that can be resolved today.</p>	
4	<p><b>PARTNERSHIP MANAGEMENT</b></p> <p><b>4.1 Partnership Summary Update</b></p> <p>FL – Full summary available for members to read. FL talked through highlights.</p> <p>The 10-year strategy for MH is due to come to an end in the next year, and there is an evaluation taking place to assess the performance of that strategy which will call upon partners as part of that evaluation. The new T4MH plan will come into place in 2022. FL assured the membership that completion of the T4MH plan is well ahead in terms of the priority gathering and linking that through to the priority areas.</p> <p>FL updated the membership on projects around self-harm, harm reduction, and substance misuse and the new projects ongoing currently. Mentioned that there is a new process in place between</p>	

	<p>partner agencies around drug related deaths (DRD) and how that links with suicide investigations and case reviews.</p> <p>Andrew Mason (Harm Reduction Coordinator) is partnering with Public health to trial postal testing; a new service around blood spot testing for Blood Bourne Viruses (BBV's).</p> <p>There is an Arts in Health project being launched, and PTHB are working with five cohorts of different service users (inpatients, children and young people, substance misuse etc) to help data mine and work with them around creative pursuits, one of which is in Felindre Ward. The project being worked on by practitioners will aid in the development of the Arts in Health strategy for the Healthboard.</p> <p>PTHB have gained access to St. John's Ambulance to aid with conveyancing, a big step forward for the Crisis Care Forum and Powys. FL gave thanks to JG and LK for their help with this.</p> <p>JG – Thanked FL for comments.</p> <p><b>4.2 Partnership Action Register Tracking</b></p> <p>FL – Following Jamie Marchant's request the team have taken archived actions from previous minutes and placed within it's own document to manage all actions. Actions associated with the minutes at that particular meeting have been kept within the minutes.</p> <p>The master document is designed with a RAG rating against each action to monitor the stage in which they have been dealt with.</p> <p>FL talked through a couple of red items to the partnership.</p> <p>FL welcomed comments.</p>	
5	<p><b>MINUTES FROM PREVIOUS MEETING</b></p> <p><b>5.1 Review of Minutes and Action Log</b></p> <p>JG – Reviewed the previous minutes for accuracy.</p> <p>JL – Requested that the actions log is made easier to read for future meetings.</p> <p><b>Action: Make the actions log clearer and easier for members to read in future meetings.</b></p> <p>JG – All happy?</p> <p>All – Yes.</p>	FL/LH

	<p>FL – Talked through outstanding actions from previous meetings and provided an update on these.</p> <p><b>Action: Update Action Register and distribute to the membership.</b></p> <p>FL – As part of service user participation FL proposed that within the December MHPDP meeting, Engage to Change should focus on Advocacy as a presentation. Suggested this would enable to address many of the actions around Advocacy also.</p> <p>JG – Agreed.</p> <p><b>Action: Engage to Change to provide a presentation on Advocacy to the Partnership Board on 14<sup>th</sup> December 2021.</b></p> <p>JL – Requested involvement within this meeting due to previous involvement with advocacy.</p> <p>FL – Confirmed as it’s the Partnership Board meeting JL will have involvement as a representative on the board.</p> <p>JG – Asked whether this was associated to IMHA?</p> <p>FL – Yes. As well as IMCA, as there is a need to bring in Powys County Councils (PCC) commissioned service into this from a community advocacy perspective. Outlined that the presentation will cover this and encourage a robust discussion.</p> <p>JG – Thanked for comments.</p> <p>MD – Announced that she will be having her last Partnership Board meeting will be in December with a new Vice Chair in replacement. MD suggested it would be prudent to bring the discussion around advocacy to the MH managers to brief the new Vice Chair which they are aiming to have in post by December 2021.</p> <p><b>Action: Provide SD with embedded documents within the papers.</b></p> <p>JG – Moved into AOB.</p> <p><b>5.2 Any Other Business</b></p> <p>JG – Anything for Any Other Business?</p> <p>All – No.</p> <p>JG – Thanked all for contribution and closed meeting.</p>	<p>FL</p> <p>LH/E2C</p> <p>OG</p>
	<p><b>Next Meeting Date:</b></p>	

14<sup>th</sup> December 2021 – 2-4pm  
22<sup>nd</sup> March 2022 – 2-4pm

**MENTAL HEALTH PLANNING AND DEVELOPMENT PARTNERSHIP ACTIONS TABLE**

<b>Meeting Date</b>	<b>Item title and action</b>	<b>Who</b>
21st September 2021	CS to link with LH to provide Patients Council feedback once available.	<b>Claire Swales &amp; Lucy Harbour</b>
	CS to link with FL to discuss third sector representation within these meetings.	<b>Claire Swales &amp; Freda Lacey</b>
	CS to link with SD around discussion of the current homelessness bid and additional support SD can provide if this bid is successful.	<b>Claire Swales &amp; Sarah Dale</b>
	Share annual report to members once translated into Welsh.	<b>Lucy Harbour</b>
	Make the actions log clearer and easier for members to read in future meetings.	<b>Freda Lacey &amp; Lucy Harbour</b>
	Update Action Register and distribute to the membership.	<b>Freda Lacey</b>
	Engage to Change to provide a presentation on Advocacy to the Partnership Board on 14th December 2021.	<b>Lucy Harbour / Engage to Change</b>
	Provide SD with embedded documents within the papers.	<b>Owen Griffkin</b>