

## Planning Objective 4C: Mental Health Recovery Plan

- Executive Lead: Andrew Carruthers, Director of Operations
- Reporting Officer: Liz Carroll, Director MH&LD
- Reporting Period: April – September 2023

## Overview

Planning Objective 4C is to develop a recovery plan for Mental Health (MH), neurodevelopmental (ND) and child and adolescent mental health services (CAMHS) to reduce waiting times by March 2024, and maintain a 111 press 2 service on a 24/7 basis for urgent mental health issues.

Aligns to Ministerial Priorities:

- Development and maintenance of 111 Option 2 (all age Mental Health Single Point Of Contact) 24/7
- Recover waiting time performance to performance framework standards for Specialist Child and Adolescence Mental Health Services (SCAMHS) Part 1 assessment and intervention
- Recover waiting time performance to performance framework standards for all age Local Primary Mental Health Support Services (LPMHSS) assessment and intervention

Wider planning objectives take into account national and local guidance, priorities and directives. These objectives are supported by more detailed action plans where appropriate, including:

- Annual Plan (H DUHB)
- Service Framework for the Treatment of People with a co-occurring Mental Health and Substance Misuse Problem 2015
- Together for Mental Health Delivery Plan 2012
- Dementia Action Plan Wales 2018 – 2022 All Wales Dementia Standards March 2021
- West Wales Dementia Strategy 2021

# Specialist Child & Adolescence Mental Health Services (SCAMHS)

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Undertake demand and capacity review against service need. Report monthly through Heads of Service meeting. Continue to review training needs against workforce skill mix.		<p>A range of staff have attended/booked to attend demand and capacity training delivered by the Delivery Unit (DU). Bench marking on track based on clinical cases and near misses. Service mapping has been completed.</p> <p>A robust training plan has been developed. Successful funding of therapies training for staff via Health Education and Improvement Wales (HEIW) additional funding.</p> <p>Trajectories for expected improvement have been agreed and continually monitored through the Integrated Performance and Assurance Report (IPAR).</p>	<p>Regular monitoring of recruitment/skill mix.</p> <p>Identified staff to undertake therapies training prior to March 2024.</p> <p>Regular meetings are scheduled with WG and the DU in line with Enhanced Monitoring procedures.</p>	
Work collaboratively with Regional Partnership Board (RPB) colleagues to seek sustainable funding for Kooth on-line counselling platform. Ensure staff have adequate digital resources to efficiently and effectively manage service demand.		The Service has commissioned Kooth until March 2024 via in year underspend from Service Improvement Funding (SIF). The service continues to be assessed, with robust contract monitoring in place.	Plans are underway for a business proposal to the RPB for consideration for future funding.	If HDDUHB is unable to secure sustainable funding through the RPB Kooth will likely be decommissioned in March 2024.
In line with the 'No Wrong Door' approach SCAMHS will work with multi-agency referral panels to agree community interventions to reduce the demand on secondary care services and mitigate against waiting lists. Clarify how the SCAMHS Primary Mental Health Service structure aligns with the Measure.		<p>The strategic work on 'No wrong door' is ongoing and being led by the RPB. Scoping of possible models for multiagency referral panels is underway.</p> <p>A Directorate review of the Part 1 Scheme in respect of the Mental Health (Wales) Measure 2010 is underway in line with recent DU Action Plans and this will include SCAMHS.</p>	Discussions to take place with partners to explore options for multi-agency panels.	

# SCAMHS Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Continue quarterly meetings with DU colleagues. Monthly reporting and monitoring via IPAR. Monthly returns to Welsh Government (WG).		This is ongoing with regular meetings scheduled. The service continues to monitor the waiting lists internally.	Continue with scheduled meetings and reporting mechanisms.	Risk of harm to children and young people due to the internal waiting lists in SCAMHS for therapeutic intervention. This is caused by vacancies, demand outstripping capacity, estates not fit for purpose, and COVID-19.
Establish 24/7 Children and Young People (CYP) alternative to hospital/Discharge Lounge in Carmarthen, linked to Crisis Assessment and Treatment Teams.		<p>Extensive capital works have been undertaken on the Bro Myrddin building in line with the new service requirements. The design of the building and make up of ‘Crash pads’ was fully coproduced with CYP.</p> <p>A Rapid Action Team (RAT) to support 24/7 working has been fully recruited to.</p> <p>The new Hwb opened on 3 July. Pathways and referral criteria have been developed and links made to 111 Option 2.</p> <p>HDdUHB is currently working with the Royal College of Psychiatrists (RPSYCH) to agree national outcome and Key Performance Indicator (KPI) measures in line with WG funding requirements.</p> <p>A draft service specification is currently being finalised.</p>	<p>Finalise national outcome measures and KPIs with RPSYCH.</p> <p>Engage on draft service specification with partner agencies and stakeholders.</p>	Revenue funding for staff has only been awarded until March 2025. If WG do not extend the funding the service will not be sustainable post 2025.

## SCAMHS Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Develop two Youth Worker led CYP Sanctuaries in Pembrokeshire and Ceredigion.		Two CYP Sanctuary services have been commissioned with Third Sector partners in Pembrokeshire and Ceredigion. Both services have been operational since April, with robust contract monitoring processes in place.  Service have been widely publicised and have made links into 111 Option 2.	Ongoing contract monitoring of performance including KPIs and outcome measures.	Revenue funding for CYP Sanctuaries has been awarded until March 2025. If WG do not extend the funding, the services will not be sustainable post 2025.
Achieve and implement the RPSYCH Standards for Perinatal Mental Health.		Work continues to achieve the RPSYCH Standards. Projected target to have implemented the Standards is 2025.	Continue to work on actions to meet the Standards by 2025.	
Further strengthen the workforce and the capacity within the restructured S-CAMHS Crisis and Assessment Teams to meet the increased acuity and demand.		Successful recruitment campaigns in 2023/24 has enabled the majority of vacant posts to be recruited into, which has enabled the Crisis Team to become operational 24/7.	Continual monitoring of workforce capacity and demand.  Job descriptions will be routinely reviewed to ensure they are attractive to prospective applicants.	
Attain accreditation with Royal College of Physicians (RCP) standards for early intervention in psychosis (EIP).		Work continues to achieve the RCP Standards. Projected target to have implemented Standards is 2024.		
Implement all new service developments following WG funding i.e. Eating Disorder (ED) service.		HDdUHB has successfully recruited to the majority of WG funded posts.  In particular the ED Service has recruited 13 staff to date.	Continue to monitor recruitment against WG funding proposals.	

# 111 Option 2

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Communications and engagement activity to transfer to national team in line with a targeted national advertisement campaign.		<p>Extensive marketing undertaken with partner agencies, education and other areas of health. Additional funding agreed to undertake targeted local campaign, commencing in Q3.</p> <p>HDdUHB has developed a National Protocol for Police Professionals which is currently being reviewed by all four Police forces prior to implementation.</p>	<p>Commence local marketing campaign to include radio, social media and newspapers etc.</p> <p>Work with Accident &amp; Emergency (A&amp;E), Minor Injury Unit (MIU) and General Practitioners (GPs) colleagues to agree baseline MH presentation data and tracking of 111 Option 2 referral information.</p>	<p>Delay to national communications campaign due to another Health Board being unable to provide 111 Option 2 until later in 2023.</p> <p>Introduction of Right Care, Right Person will likely increase call volume. Working with National Collaborative Commissioning Unit (NCCU) to identify additional funding and changes to service delivery and reporting.</p>
Establish monitoring processes to capture national minimum data set and local targets.		<p>National minimum data set agreed in Q1, monitored through national dashboard. Met all targets in Q1 and Q2.</p> <p>Weekly monitoring reports produced and shared Directorate wide and with partner agencies.</p> <p>Peer Review undertaken in Q1. Positive feedback. Action plan included staff training – all actions complete.</p> <p>Qualitative Service User Distress Scores (SUDS) introduced in Q1.</p> <p>Demand and capacity is reviewed monthly in line with staff rota requirements. This will be monitored in line with the national communications campaign.</p>		<p>Pembrokeshire base likely to be displaced through reinforced autoclaved aerated concrete (RAAC) issues. Working with national 111 team to enable continued colocation on alternative site.</p> <p>Alternative to Adastra system has been delayed. Working with NCCU to identify a potential solution through Microsoft (MS) Teams.</p>



# Adult Mental Health

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Develop and implement a robust co-occurring Mental Health and Substance Misuse Framework and Pathways.		<p>A Co-occurring Substance Misuse Framework has been developed and implemented. The Framework was widely engaged and consulted on with stakeholders via Local Mental Health Partnership Board (LMHPB), Written Control Documentation Group (WCDG), Crisis Care Concordat Group (CCC) and the Area Planning Board (APB).</p> <p>Dedicated training has been developed and rolled out alongside the Framework.</p>	The Framework and pathways will be reviewed in 2024/25.	
Embed and review co-occurring Nurse roles within high demand co-occurring areas.		<p>A review of Co-occurring Nurse roles has been undertaken, with posts identified for recruitment in each Local Authority area:</p> <ul style="list-style-type: none"> <li>Two Whole Time Equivalent (WTEs) have been recruited in Llanelli, one in post (redevelopment of current nurse role), one onboarding.</li> <li>One WTE in Pembrokeshire had recently been appointed to, however the applicant has since withdrawn. Post will be advertised.</li> <li>One WTE Nurse post in Ceredigion has been reprofiled to a co-occurring role.</li> </ul> <p>Joint working is being ensured through the establishment of regular Clinical Liaison Groups within each county, which facilitates discussions and agree actions for complex cases.</p>	<p>Readvertise the Co-occurring Nurse role in Pembrokeshire.</p> <p>Awaiting decision from APB on the early release of additional funding from 2024/25 to this financial year to enable further recruitment.</p> <p>The Clinical Liaison Groups will be reviewed in 2024/25.</p>	The defined caseload of these posts has had a positive impact on recruitment challenges in hard to recruit areas eg an additional post was reprofiled in Llanelli due to areas of high acuity.

# Adult Mental Health Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Review demand and capacity of Community Mental Health Centres (CMHCs) and Community Mental Health Teams (CMHTs) to ensure appropriate staff numbers in respective areas.		Currently undertaking a comprehensive review of caseloads, referral numbers and acuity times, and Care and Treatment Plan (CTP) numbers.	Undertake scoping work to review service delivery boundaries within geographical areas to ensure equity.	<p>If changes are made to boundaries an Organisational Change Process (OCP) will need to be undertaken with affected staff.</p> <p>Advice will need to be sought from Llais on engagement and consultation requirements.</p> <p>Staff and service users may not be in agreement with proposed boundary changes.</p>
Develop and implement service specification for new ways of working across CMHCs and CMHTs, inclusive of Crisis Resolution and Home Treatment Teams (CRHTs).		<p>Service specification is being finalised and is scheduled to be engaged on in November/December.</p> <p>Delay due to changes required from review of seven day working as an action from Annual Recovery Plan work.</p>	Engage on draft service specification, including five day working with staff and stakeholders.	An OCP will be required for Gorwelion CMHC to reduce from seven day working to five in line with Annual Recovery Plan recommendations.



# Integrated Psychological Therapy Services & Local Primary Mental Health Support Service

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Introduce text messaging service for appointment reminders to mitigate Do Not Attends (DNAs) and increase attendance.		<p>Have introduced pilot test messaging reminder service in Intensive Psychological Therapies Service (IPTS) and Local Primary Mental Health Support Services (LPMHSS) (Adult).</p> <p>Discussions are taking place to introduce in group therapies Primary Mental Health (Ceredigion and Carmarthenshire) and Perinatal.</p>	<p>To continue to monitor DNA rates.</p> <p>Agree plan to extend text messaging service into Neurodevelopmental (ND), Integrated Autism Service (IAS) and Attention Deficit Hyperactivity Disorder (ADHD) service areas in Q3 and Q4.</p> <p>Undertake review of DNAs versus text reminders sent over Q1 and Q2 to identify correlation and further actions.</p> <p>Further develop text service to include signposting to additional services/support.</p>	
Introduce additional evidence-based group interventions as appropriately identified through the review, utilising community venues to increase uptake.		<p>Pilot group interventions took place from May – July in a community venue in Carmarthenshire. Uptake and retention were improved, with positive feedback received.</p> <p>Currently finalising scheduling plans for four groups which will run simultaneously in the Autumn term in Llanelli, Carmarthenshire, Neyland and Aberystwyth.</p>	<p>Work with Third Sector and community organisations to identify suitable venues that can be utilised for group work.</p>	<p>It has been difficult to secure community venues to run groups. Current cohorts are accessing services online. There is a risk that some clients may not be able to engage due to the requirement to use IT.</p>

# Integrated Psychological Therapy Services & Local Primary Mental Health Support Service Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Monitor the demand and capacity of the service to reduce waiting lists and maximise capacity by monitoring and implementing performance improvements such as job planning, caseload reviews, waiting list reviews.		<p>Performance improvement strategies continue to be reviewed including job planning, caseload reviews, waiting list reviews etc.</p> <p>An external provider has been commissioned to undertake Eye Movement Desensitization and Reprocessing (EMDR) therapy to improve waiting lists.</p> <p>HDdUHB has introduced a ‘firebreak’ for the Cognitive Behavioural Therapy (CBT) modality waiting list which involves a one-off therapy session to provide individuals with resilience skills to help them to self-manage while they wait individual therapy.</p>	<p>Continue to monitor demand and capacity in line with staff skill mix.</p> <p>Continue to contact monitor EMDR external contract in line with waiting lists.</p> <p>IPTS and LPMHSS to undertake annual job planning to maximise capacity and resources.</p> <p>Continue to review and monitor caseloads through supervision process.</p> <p>To undertake a mail shot of all individuals wating over 26 weeks for therapy to be offered group intervention.</p>	
Service reporting on maintained trajectories to move to business as usual.		The service has continued to demonstrate improved compliance with improving trajectories and is on track to reach full compliance for Part 1 by March 2024.	Compliance with trajectories is continually monitored through IPAR and reported monthly.	

# Integrated Psychological Therapy Services & Local Primary Mental Health Support Service Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Implement a new work stream of Psychological Wellbeing Practitioners to further improve links between GP clusters, LPMHSS and other Mental Health services.		<p>WG has provided sustainable funding to develop a GP cluster based Well-being Service. HDdUHB has successfully recruited five out of seven Well-being Practitioners and band 6 Clinical Lead. The remaining two posts are being readvertised.</p> <p>HDdUHB has agreed with GP colleagues that one Practitioner will be based in each cluster area for ease of referral. The service has developed close links with 111 Option 2 to enable direct referrals for face-to-face interventions.</p> <p>Staff are currently undertaking an extended induction period which includes shadowing of related services such as 111 Option 2, LPMHSS, CMHT, Dyfed Drug and Alcohol Service (DDAS) and THE Community Drug and Alcohol Team (CDAT). Further shadowing opportunities have been provided by commissioned Third Sector service such as Mind.</p>	<p>A Service Specification will be shared with partners for engagement in Q3, with approvals via WCDG in Q4.</p> <p>Readvertise two remaining Well-being Practitioner posts.</p>	Inability to deliver psychology assessments and psychotherapeutic interventions due to inability to recruit to qualified psychologist vacancies, due to national shortage.
Work in partnership with Primary Care and internal services to improve efficiencies in referral processes.		<p>HDdUHB has established good working practices with Primary Care for referrals into IPTS via e-mail.</p> <p>Following a Welsh Risk Pool recommendation IPTS have been working with CMHTs to pilot a joint assessment.</p> <p>Following the Delivery Unit’s All Wales Review of Psychological Therapy Services it has been identified that some additional work needs to be undertaken to adapt and enhance services to be fully inclusive for Older Adult Mental Health (OAMH) clients.</p>	<p>Undertake review of joint assessments with CMHT to identify best practise and areas for improvement.</p> <p>Identify and develop resources for adaptations and reasonable adjustments for OAMH client group, including staff training.</p>	
Continue to embed and integrate LPMHSS and IPTS services to dilute treatment by 1 of 24		<p>Work on service integration is ongoing.</p> <p>Currently developing an integrated Service Specification.</p>	Engage with stakeholders on draft Service Specification.	

# Older Adult Mental Health

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Review clinical pathways for older adults experiencing mental health crisis in later life to assure equality of service with working age adults.		<p>This action is being monitored through the Hywel Dda audit process and is on the inspection tracker. The trajectory was to complete an SBAR by 28 August to be taken through Business Planning, Performance and Assurance Group (BPPAG). However, initial timeframes were unrealistic due to the volume of unanticipated work involved for serious and untoward incidents, and so completion deadline has been extended to 31 December.</p> <p>Bench marking is on track, with a review of 23 clinical cases and near misses and three quarters of the report in draft with recommendations subject to stake-holder engagement.</p>	Complete assurance review of clinical pathway equality of access for those experiencing mental health crisis in later life by 31 December.	Due to the unexpected/unscheduled nature of clinical and operational pressures there may be an issue with the reviewer’s capacity to undertake the work within the revised timescale. Review of incident management structure has been undertaken to improve this situation.
Explore alternative pathways (holistic multi-agency and multidisciplinary) for people and their carers living with dementia and acute-frailty distress.		<p>Identifying urgent and unscheduled care pathways for people living with dementia experiencing acute frailty episodes across three Health and Local Authority (LA) areas.</p> <p>Meetings have taken place with respective service delivery managers and project leads in three Health and LAs eg Proactive Care Pilot in Carmarthenshire.</p> <p>Currently identifying processes to integrate best practice Dementia Care expertise into established and developing pathways. Technically this action has been completed, however, due to service being open to further collaboration, next steps can now be considered for the next financial year.</p>	To develop draft plans to move from discovery and design principles with Health and LA colleagues to pilot a phase of an alternative pathway practices within the next 12 months, for commencement within the next financial year.	<p>Some issues in agreeing Health Board wide pathways as each LA is trialling different approaches, with differing local focuses.</p> <p>The successful recruitment/commencement of a Service Delivery Manager to operationalise this work and other areas of the regional Dementia Well-being Strategy is critical to the completion timescales.</p>

# Older Adult Mental Health Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Improve psychological assessment, treatment, and clinical risk management pathways for people experiencing functional mental ill health conditions associated with and manifesting in later life.		<p>Initial draft clinical risk pathway circulating in service for consultation.</p> <p>Completed data collection for functional inpatient admissions over 12 – 14-month period. Data has been correlated and presented in a Directorate meeting for feedback and discussion.</p> <p>Recruited and dedicated 0.5 WTE Principle Clinical Psychologist to support the Clinical Risk Lead to review, recommend and support clinical pathway improvements.</p>	Undertake functional data collection for community services to enable a holistic picture.	Preparation work on orientation and working practice to integrate this way of working into current service operational processes.
Agree a holistic clinical pathway for people living with dementia whilst experiencing acute-frailty distress during inpatient episodes of care.		<p>Strong commitment from geriatricians to support this pilot in Pembrokeshire. Agreement in place to draft a stepped shared care dementia wellbeing pilot/model service specification to bridge shared-care practice across Acute Hospital and mental health Wards.</p> <p>There have been difficulties in scheduling initial meetings in the summer due to geriatrician’s operational pressures and leave.</p>	<p>Schedule design meeting to define and test the model for November/December.</p> <p>Agree revised timescales for pilot.</p>	



# Older Adult Mental Health Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Integrate the Dementia Wellbeing Teams into a single Dementia Wellbeing Service networked across the region to simplify access, assessment and intervention for people living with dementia, unpaid and paid carers/professionals alike.		<p>Memory Assessment Service specifications have been completed and engaged on with multi agency stakeholders. Dementia Well-being service specification drafted with a view to integrate into a one-service specification.</p> <p>For Regional Work-stream 2, the Terms of Reference (ToR) has been updated to reflect a single service model. Expected to be approved by the Regional Dementia Steering Group in December. New job description developed for a Service Delivery Manager. Job was advertised in September with interviews scheduled for early October. This role is critical to the delivery of the regional Dementia Well-being Strategy.</p> <p>Reviewed the older adult access and reasonable adjustments needed on IPTS, LMHPPS, co-occurring and health psychology pathways.</p>	<p>Interviews for Service Delivery Manger post scheduled for early October.</p> <p>If successful applicant is appointed onboarding will likely take place in January/February.</p>	<p>If HDdUHB is unable to recruit the Service Delivery Manager, agreed timescales will be impacted due to additional need to recruit.</p> <p>There is a risk that an OCP will be needed for aspects of the service restructure/re-design, which would therefore move this objective into the next financial year.</p>
Improve access to psychological therapies for people experiencing functional mental health needs in later life.		<p>Local population needs have been defined alongside national guidelines and pathway draft in place. Have reviewed the evidence base and identified the most suitable psychotherapeutic treatment modalities for mental health treatment in later life.</p> <p>Awarded funding from HEIW for additional Post Graduate Education for therapies training to support clinical staff. Have undertaken a scoping exercise on population needs mental health morbidity profile both nationally and regionally.</p> <p>Reviewed the clinical psychotherapeutic capability within the current workforce. Completed a skill-mix for alternative Health Care Practitioners to provide psychotherapeutic/psychotherapy as unable to recruit clinical psychologists.</p>	<p>Identified clinical staff to undertake therapies training through HEIW prior to March 2024.</p> <p>Identify respective job descriptions and move into recruitment processes.</p>	<p>Workforce readiness: Practice Transformation sessions to facilitate and change practice of Community Psychiatric Nurses to deliver more psychologically informed practice and psychotherapeutic treatments will now be undertaken next year.</p>

# Commissioning

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Develop commissioning principles to define the commissioning role and operational roles based on the recommendations of the NCCU review.		<p>A draft action plan has been developed based on the report recommendations.</p> <p>A Steering Group has been established to oversee the completion and implementation of the identified actions.</p>	Work streams to be established in line with identified themes, responsible clinician and key actions.	Completion and implementation of the Action Plan requires Directorate wide involvement and commitment from senior clinicians to progress, therefore operational pressures may affect capacity to deliver within the agreed timeframes.
Pilot revised joint funding request process and roll out based on findings.		<p>A regional joint funding request process has been developed jointly with partners through the West Wales Care Partnership (WWCP).</p> <p>Initial pilot has been agreed between Carmarthenshire Local Authority and Carmarthenshire Community Team for Learning Disability (CTLD).</p>	<p>Establish weekly progress meetings with CTLD and LA to review referrals and agree actions/progress.</p> <p>Review joint funding guidance and pathway flowchart.</p>	Improvements in joint funding requests require robust multidisciplinary team (MDT) decision making and joint LA and Health commitment to resolve issues, which are often complex and require extended periods of time.



# Commissioning Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Undertake the Regional Progression Project, with the aim of achieving financial savings target of £1.2m.		<p>A Progression Team was established in Q1, funded through the Regional Improvement Fund (RIF).</p> <p>Regional working is progressing well with regional processes agreed on jointly worked cases.</p> <p>Current savings projection against the target £1.2 million is circa £600,000.</p> <p>RIF monitoring data and outcomes have been agreed and are submitted quarterly.</p>	<p>Band 5 Occupational Therapist rotation scheduled to commence in November.</p> <p>Presentation to regional RIF evaluation group in Nov to confirm ongoing funding.</p> <p>RIF expectation is that projects will be sustainable and mainstreamed within five years; therefore, a financial exit strategy is required.</p>	<p>There is a query on the achievability of the £1.2m savings target, as this was based on over a number of financial years against a targeted list of placements. The expectation from the Health Board to deliver the £1.2m saving in year is not achievable.</p> <p>One of the main issues in achieving the savings target is the lack of availability of council accommodation eg there are 15 individuals who could step down into independent accommodation, however there are no suitable/available LA housing options.</p>
Engage with regional partners and health teams to develop new service models.		<p>A Regional Market Stability report has been completed, which includes a mental health and learning disability (MH&amp;LD) accommodation needs analysis.</p> <p>A Carmarthenshire Accommodation and Efficiency Project Group has been established to support the development of new services initiatives.</p> <p>Ceredigion Council have undertaken a review of their mental health supported accommodation services, which will form the basis of a new service development plan.</p>	<p>With partners, undertake an options appraisal of regional commissioning capacity based on the recommendations of the Market Stability Report.</p> <p>Establish project delivery groups in Pembrokeshire and Ceredigion.</p> <p>The Regional Commissioning Programme Board to procure external consultants to undertake the options appraisal.</p> <p>Establish a Complex Needs pilot in Carmarthenshire, which has been funded via the Housing Support Grant (HSG).</p>	<p>LA capacity to support their project groups to develop new service models is at risk due to capacity and operational pressures.</p>

# Substance Misuse

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Develop additional services and implement pathways to meet the needs of those with complex needs where substance misuse is a factor, alongside regional partners.		<p>A new Co-occurring Substance Misuse Pathway has been developed and approved by regional partner organisations.</p> <p>A Complex Needs Strategic Board (linked to the APB) has been established to oversee the development of the wider substance misuse agenda including the oversight of additional resources through WG funding.</p> <p>A Co-occurring Substance Misuse Action Plan has been developed to progress the remaining Welsh Government Framework actions.</p> <p>An Alcohol Related Brain Damage working group has been established to oversee pathway development and resource requirements.</p> <p>The APB has approved additional funding for a Complex Needs Caseworker based in the Community Drug and Alcohol Team. With further posts being funded in the LA's and APB to support development of a virtual complex needs team approach.</p>	<p>Establish regular monitoring and updating of new action plan.</p> <p>Undertake recruitment process for new Complex Needs Caseworker post.</p>	The new Health Board recruitment panel processes and approvals may delay the recruitment of the additional Complex Needs posts.

# Substance Misuse Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Further develop and embed the new prescribing model to ensure that clinical governance, pathways, processes and estate are in place to support the new staffing structure.		<p>The APB have approved funding for additional posts to support the Advanced Nurse Practitioner/Nurse Prescriber led approach to mitigate against the reduction in specialist GP capacity.</p> <p>Controlled Drug storage license issues have been addressed in the interim through a change in individual Buvidal prescribing. To enable this, clinical space has been set aside in Brynmair.</p>	Controlled Drug storage license applications to be submitted for Health Board premises only initially.	<p>Arrangements for Controlled Drug storage licenses have only been addressed as a short term measure. A longer-term solution needs to be agreed.</p> <p>The Llanelli North Dock capital development has been delayed due to planning consent issues. Awaiting confirmation on whether the APB will appeal the planning decision.</p>
Improve and implement arrangements for service user feedback, individual outcomes monitoring and reporting.		<p>A review of the feedback and outcomes mechanisms used by CDAT has been undertaken. New processes have been developed following the outcome of the review.</p> <p>A mechanism to gather feedback by the Commissioning Team has been developed through the Progression Project.</p>	<p>Establish regular monitoring of new service user feedback and outcomes measures.</p> <p>Embed service user feedback in the review process to ensure consistency and enable regular reporting to RIF.</p>	

# Autism Spectrum Disorder

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Work collaboratively with Welsh Government to implement the recommendations of the Welsh Government Neurodevelopmental review.		<p>The WG Neurodevelopmental 3-year Improvement Plan continues.</p> <p>HDdUHB has established excellent relations with colleagues from the WG policy team and national neurodevelopmental team.</p> <p>Work is ongoing work with RPB colleagues to further develop regional integrated plans to meet the Code of Practice and implement new service initiatives.</p>	The DU report following last year's review of ND services has not yet been published. When the review has been shared, HDdUHB will develop relevant action plans in line report recommendations.	ASD performance continues to remain significantly challenging with increased demand and limited capacity.
In line with the anticipated recommendations of the review, develop ways to deliver timely multi-disciplinary assessments and interventions across the age range.		<p>Review of clinical and administrative processes has been undertaken in both services.</p> <p>Work has begun to further develop pre and post diagnostic support in IAS and introduced in Adult ADHD.</p> <p>Work has begun to explore ways to align Adult ADHD and IAS services and Children's ADHD and ND service. Including the development of &lt;5s integrated pathway between Children's ND and Child Health.</p>	<p>Ongoing Plan Do Act Study (PDAS) cycle to ensure seamless and efficient processes are in place.</p> <p>Regular supervisions are scheduled which manage caseload allocations and waiting list monitoring.</p> <p>Regular job planning scheduled for clinical and support staff.</p> <p>Finalise &lt;5s integrated pathway.</p>	Recruitment into Clinical Psychology posts remains an issue.

## Autism Spectrum Disorder Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Secure additional funding to increase workforce to meet demand capacity imbalance from WG Neurodivergence Improvement Funding.		Successfully awarded £297k through the Neurodivergence Improvement Fund (NIF), across four service areas. Awaiting allocation of funds from WG.	Recruit to new posts once funding has been granted.	Funding is for 12 months which will make it difficult to recruit applicants on short term contracts.
Work with procured private providers to deliver timelier assessments to reduce excessive waiting times.		Procurement process undertaken, with two providers awarded contracts, one for adults and one for children.  Referral processes and contract evaluations have been agreed. Both contracts currently meeting agreed targets.	Monthly contract monitoring meetings have been established to manage referrals and evaluate effectiveness.	Funding for both contracts has been agreed outside of budget.
Work with the DU to agree realistic trajectories to meet national targets.		All Wales DU review of ND services is now complete. HDdUHB awaits the final report with recommendations and actions.	Routine internal monitoring processes established to monitor waiting lists.  Following publication of ND report, agree action plan in line with recommendations.	Current demand continues to outweigh capacity, which is severely impacting performance targets.

# Learning Disabilites & Inpatients

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
<b>Learning Disabilities</b>				
Co-production of the new service model for inpatient care and enhanced community services.		<p>A comprehensive eight week engagement with service users, staff, carers/parents and partner organisations on the new model concluded on in April.</p> <p>A report was taken to Public Board in May detailing the outcome of the engagement, with recommendations for next steps. Board approved the redesign of community services and the integration of a Learning Disability (LD) inpatient bed within Adult Inpatient services.</p> <p>A multi-agency programme group has been established to oversee the service resign, which includes service user and carer representatives from the three LA's.</p> <p>HDdUHB has engaged with the third sector and the Regional Improving Lives Partnership (RILP) to agree coproduction processes and methods. A range of workshops have been scheduled for Q3 to ensure that the new service delivery model is fully coproduced.</p>	<p>Process mapping of all pathways is being supported by Improvement Cymru. Workshops have been scheduled during Q3 to progress this.</p> <p>Regular reporting has been established through LMHPB and RILP.</p> <p>Service Specification will be finalised in Q4 following further engagement and coproduction.</p>	
Undertake an OCP for staff working in new ways to support the model		<p>Following the development of the new service specification including pathway redesign, roles and functions etc, an OCP will be undertaken with all affected staff, including those supporting the LD bed on adult inpatient wards.</p> <p>A draft schedule has been developed for the OCP timeline including Exec Team approvals, which will be approved by the programme board in November.</p>	<p>An OCP will be undertaken in Q4/Q1. This has been rescheduled due to in year financial pressures.</p>	<p>There is a national shortage of LD Nurses which may impact on planned recruitment for the new service model.</p>



# Learning Disabilites & Inpatients Cont.

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Inpatient Services				
Develop and implement service specification for acute wards		<p>Following approval to integrate LD inpatient services within Adult inpatients, an integrated service specification is now being developed.</p> <p>The LD pathway element is being supported by Improvement Cymru, with development workshops scheduled for Q3.</p> <p>The specification is being co-produced with service users and carers. A range of engagement and co-production workshops have been scheduled from October – December, which are being supported by Third Sector partners.</p> <p>In Q1 Inpatient Services won the Working Together category at the Heddlu Dyfed-Powys Police 2022/23 Annual Awards for joint working and positive relationships between the Police and Mental Health, especially around the multi-agency daily Bed Management Conference meetings.</p>	<p>Finalise service specification and engage with stakeholders.</p> <p>Specification sign off scheduled for Q4 via WDCG.</p>	<p>Demand on inpatient beds continues to remain high, with surge beds being used occasionally to ease pressures when needed.</p> <p>There is lack of registered nurses to safely staff wards, exacerbated by staff sickness, maternity leave and difficulties with recruitment.</p>
Develop the assessment and treatment pathways for inpatient care		Assessment and treatment pathways will be developed in line with the overarching service specification as outlined above.		



# Psychology

Key Objectives	Status	Key Achievements	Next Steps	Risks/Issues & Considerations
Strengthen the professional leadership of psychology ensuring governance, supporting consultant psychologists and psychological therapy leads, and provide professional input and advice to directorate strategy and operational delivery.		<p>HDdUHB has successfully recruited a Professional Lead who is scheduled to come into post on 14 November.</p> <p>An extensive induction has been scheduled with all service areas and relevant leads.</p>	Following induction period of the Professional Lead throughout Q3, the role will become fully functional in Q4, providing leadership and governance to psychology services.	
Improve vacancy position and sustainability plan for the future, including finalising plans for ‘Grow your own’ workforce and exploring new roles.		<p>Services continue to maximise the use of Annex 21 to promote recruitment opportunities.</p> <p>Contracts for assistant psychologists (Grow your own) to undertake clinical Psychology training are nearing completion.</p>		
Enable gaps in the psychology establishment of input into critical areas of mental health to be remedied with specific input and through evaluation of outcomes plan for more sustainable establishment.		<p>The evaluation of the outcomes plan pilot highlights that the experiences of teams from low level input supports the value of psychology input.</p> <p>Planning long term sustainable input in progress with budget reconfiguration.</p> <p>Recruitment will need to be progressed following budgetary alignment.</p>	<p>Annual Recovery Plan action to review financial establishments will be finalised in Q3.</p> <p>Following budget reconfiguration longer term sustainable workforce planning will be undertaken.</p>	

## Recommendations and Assurances

The Strategic Development and Operational Delivery Committee is asked to:

- **NOTE** the Mental Health and Learning Disability Directorate's progress against its planning objective as presented, including the associated risks, issues and considerations for each service area as highlighted
- **RECEIVE ASSURANCE** that each service area's objectives are being managed/scrutinised through the Business Planning, Performance and Assurance Group and the Quality, Safety and Experience Group; and that quarterly monitoring and reporting arrangements have been developed