



Wales Safer Communities Network response to: Draft mental health and wellbeing strategy

Closed 11 June 2024

Response submitted via the online survey.

Organisation (if applicable):

Wales Safer Communities Network

Your interest in the strategy. Please tick all that apply.

- Lived experience
- Carer
- Member of the public
- Health care staff
- Social care staff
- Third sector staff
- Other professional role
- Organisational response
- Prefer not to say

Which version of the strategy have you looked at? Please tick all that apply.

- Draft mental health and wellbeing strategy
- Children and young people's version
- Easy read version

If you want to receive a receipt of your response, please provide an email address:

safercommunities@wlg.gov.uk

Responses to consultations may be made public. To keep your response anonymous (including email addresses) tick the box:



Consultation questions

Question 1

How much do you agree that the following statement sets out an overall vision that is right for Wales?

“People in Wales will live in communities which promote, support and empower them to improve their mental health and wellbeing, and will be free from stigma and discrimination. We will take a rights-based approach to ensuring that everyone has the best mental health possible. There will be a connected system of support across health, social care, third sector and wider, where people can access the right service, at the right time, and in the right place. Care and support will be person-centred, compassionate and recovery-focused, with an emphasis on improving quality, safety and access. Care and support will be delivered by a workforce that feels supported and has the capacity, competence and confidence to meet the diverse needs of the people of Wales.”

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

Question 1a

What are your reasons for your answer to question 1?

The Wales Safer Communities Network agrees in principle with the overall vision and in the move towards prevention from crisis management in mental health services and support, but it is not clear how this will be resourced and at what point funds will be moved from crisis health services and into social and community focused prevention as described in the vision.

Question 2

In the introduction, we have set out ten principles that are the building blocks of the new Mental Health and Wellbeing Strategy. Do you agree these principles are the right ones?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 2a

What are your reasons for your answer to question 2?

Whilst we agree with the ten principles as included in the strategy we think there may be additional that should be included or at least strengthened in their wider descriptions.

It may be worth considering if person-centred should be expanded to include lived experience more specifically and for there to be the inclusion of unpaid carers who are often providing support in place or alongside other services and fall victim themselves to vicarious trauma.

There is little to mention about treating people fairly when they have limited or no capacity on either a short term or long term due to progressive illness such as dementia. Recent focus on the Deprivation of Liberty Safeguards (DoLS) process brings these even more into the spotlight.

In the list of groups we think there are potentially three groups missing the first being those who are victims of domestic abuse, the second are perpetrators of domestic abuse, and the third people going through the menopause an area under researched for many years as a 'female' health issue but now with increased focus.

In the strategy, we have a number of sections which are informed by four key vision statements. These four vision statements represent our overall aims. We would like to know what you think of each of them. You can answer questions about as many of the statements that are of interest to you.

Vision statement 1

Question 3

Vision statement 1 is that people have the knowledge, confidence and opportunities to protect and improve mental health and wellbeing. Do you agree that this section sets out the direction to achieve this?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 3a

What are your reasons for your answer to question 3?

We agree with this vision statement which appears to move the focus from health based mental health services to social based approaches and services. How this change will be resourced with current demand and capacity issues, delivery to meet this vision we think will require additional funding for local government and community partners, potentially moving finance, resource and focus to the preventative services that are outside of primary and secondary health settings.

It is vitally important here that there is an increased focus on positive mental health messaging as so often messaging focuses on the negative (understandably). It is also imperative that in order to move to a social based approach and service that greater focus and resources are accessible for the workforce and unpaid carers who are at risk of struggling themselves with vicarious trauma.

In the section on *Babies, children and young people*, there is no mention of young carers who may be specifically at risk due to the stigma of a parent having a mental health issue and avoid disclosing to avoid bullying which is one of the risks identified in the draft self-harm and suicide prevention strategy. This risk may be added to if the individual with mental health conditions is a sibling and attends the same school, meaning they neither get a break and have the added stigma and risk of bullying to contend with.

There is also anecdotal information that not only does socioeconomic deprivation have an impact but so to does the housing crisis. If a child or young person, or asylum seeker and migrants are concerned about where they are sleeping and if it safe then their ability to meaningfully engage with services and support is limited.

Prevention and support for those under the age of 25 is paramount as laid out on page 20 of the draft strategy, but youth services are under pressure with community services having to close, leading to increased loneliness and isolation which negatively impacts on mental health. This is one area where resource could and should be moved from health to local government to ensure community events and services are able to continue or to be developed that enable community cohesion and offer affordable options for connecting with others and reducing isolation and loneliness.

Question 3b

We've included a number of high-level actions for vision statement 1 in the strategy. Do you agree with these actions?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 3c

Are there any changes you would like to see made to these actions?

We agree with the actions but will be interested in the detail in the delivery plan and the costings for delivering the training required and for how under pressure third sector and other community services are meant to manage the increased demand when many are struggling to survive.

It is not just about knowledge, understanding, advice and communication but culture. Professionals can learn and improve knowledge to advise others but if workplace cultures are not consistent with this then this could have a negative impact on the workforce. Therefore, it may be relevant to incorporate compassionate leadership and a greater understanding of the vicarious trauma of staff which has been in health through Public Health Wales for at least five years and is now being introduced into social care settings through Social Care Wales.

We also anticipate there will be some impact of the change of police policy with the Right Care Right Person programme, where some early information from England in a few areas are of people in mental health crisis being referred to community groups with no experience in mental health. We are keen the same does not happen in Wales.

Understanding the wider determinants and mental health without preventing the wider determinants or at least reducing them and their impact is unlikely to have the positive impact on prevention, none of the high-level actions look to tackle the wider determinants directly.

We think there should be an increased focus on positive mental well-being, it is often very negative and if the strategy is to be achieved then in our opinion the conversation needs to change.

Vision statement 2

Question 4

Vision statement 2 is that there is cross government action to protect good mental health and wellbeing. Do you agree that this section sets out the direction to achieve this?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 4a

What are your reasons for your answer to question 4?

No specific comments on this vision statement.

In this section we say what different parts of Welsh Government will do to meet the objectives of vision statement 2:

- what mental health policy can do (question 4b)
- what wider Welsh Government will do (question 4c)

Question 4b

Is there anything else that mental health policy can do to ensure that work across Government improves mental health outcomes?

The implementation of Right Care Right Person which is a police programme (reserved) which has the potential to impact on devolved policy areas including health services, the Ambulance Service, community safety, housing, social care and safeguarding.

Question 4c

There is lots of work happening across Government that could improve mental health outcomes. Is there any work we have missed that you think we should include?

SHEP (Food and Fun) should be included as it can provide a bridge over the summer holidays in terms of vulnerable learners. Food and Fun has 5 intended outcome areas, one of which is 'Improved Mental Health and Emotional Wellbeing'. The programme provides a platform for school communities to keep children engaged and enthused over the summer holidays as well as nourish them both mentally and physically. In addition to providing routine and structure, it provides an opportunity for school welfare teams to stay connected with their most vulnerable pupils and families over the holidays.

Nation of Sanctuary Plan under "Create and develop healthy and sustainable places and communities"

Question 4d

We've identified a number of high-level actions for vision statement 2 in the strategy, do you agree with them?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 4e

Are there any changes you would like to see made to these actions?

There is potentially too much emphasis and focus on health impact assessments on which a public consultation closed relatively recently and the responses are still being analysed. As part of the WLGA response to the consultation we highlighted the challenges of resources, including funding, but also how the issues identified by the Wales Audit Office on Equality Impact Assessments would be avoided.

The focus of the strategy for Vision Statement 2 appears to be on existing work and programmes from across Welsh Government with little detail on how they will be linked and joined up to enable person-centred holistic perspectives of people to be seen and silos and barriers potentially broken down.

Vision statement 3

Question 5

Vision statement 3 is that there is a connected system where all people will receive the appropriate level of support wherever they reach out for help. Do you agree that this section sets out the direction to achieve this?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

Question 5a

What are your reasons for your answer to question 5?

We agree with this Vision Statement however we think that it should be brought more closely with Vision Statement 4 as well, as seamless mental health services we think should form one element of a larger connected system.

On reviewing what is included in the connected system we thought there may be some missing or needing expanding:

- Libraries and warm hubs, may be included within culture but we think should be considered to be identified specifically.
- Refuge for survivors of domestic abuse.
- Offenders and Sexual Offenders within the secure estate and in the community.
- Registered Social Landlords (Housing Associations), whilst they may be covered in housing or the voluntary sector their role can be more specialist.



Question 5b

We've identified a number of high-level actions for vision statement 3 in the strategy, do you agree with them?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

Question 5c

Are there any changes you would like to see made to these actions?

The high-level actions all appear to be appropriate, but our concern is that each is about a different part of the system and not about bringing it all together so each understands what the others are doing.

We suggest consideration should be given to include a high-level action around open communication and sharing of information, often people have to repeat experiences/trauma etc as they move onto other services which is detrimental to their mental health. Also, with improved understanding there should be fewer inappropriate referrals and signposting.

There may also be an opportunity to incorporate other elements around the wider determinants of health which could be included in this wider connected system perspective.

Vision statement 4

Question 6

Vision statement 4 is that people experience seamless mental health pathways – person-centred, needs led and guided to the right support first time without delay. Do you agree that this section sets out the direction to achieve this?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 6a

What are your reasons for your answer to question 6?

We agree with the principle of Vision Statement 4, but are concerned about if this will lead to increased demand and capacity for health services reducing resources to the preventative and community service elements. We know that there can be complexities with the need for substance misuse, domestic abuse and mental health to allow people to flow between them, but the strategy only focuses on one of these- mental health.

Waiting lists for mental health services continues to be a challenge, so guiding a person to the right support first time without delay, when the service has a waiting list and no capacity may leave community and local services to manage and support the patient even though the correct pathway and right support has been identified. The current Vision Statement does not appear to provide solutions in this matter.

Again, whilst we agree with the principle of this Vision Statement we recognise that transition periods will continue to be a challenge. Caseworkers passing over support to adult services when a client turns 18 or at such time their support ends. Prison leavers or those on short term sentences also run the risk of their mental health being destabilised and their needs not being met; with short term sentences any medication or join up with existing services may not be possible and for those leaving the secure estate the stability of regular medication and support may no longer be available when back out in the community, both of these situations are known to be a time of heightened mental health need and not currently covered in the actions.

Question 6b

We've identified a number of high-level actions for vision statement 4 in the strategy, do you agree with them?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree



Question 6c

Are there any changes you would like to see made to these actions?

Whilst we agree with the high-level actions which are heavily health focused we would suggest there may be additional actions to be considered:

- Mental health provision in prisons, asylum seeker and refugee detention centres, and other secured accommodation which often sits separate to the pathways in primary and secondary health settings.
- Support for unpaid carers living with individuals with Mental Health (including young carers). Support is needed for knowing how best to assist the person they care for, to manage their condition; but also for them directly, to help navigate the trauma and consequence of supporting that individual.
- Access to medication, gaps in treatment can often destabilise people and add to stress and anxiety leading to heightened mental health needs.

Question 7

We have identified some areas where action is needed to support the mental health system as a whole. These areas are:

- o digital and technology
- o data capture and measurement of outcomes
- o supporting the mental health workforce
- o physical infrastructure (including the physical estate of services)
- o science, research and innovation
- o communications

Do you agree these are the right areas to focus on?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

Question 7a

What are your reasons for your answer to question 7?

We agree that these are all important, however we suggest that communication should be included under one of the Vision Statements as mentioned in the answer to question 5c. In addition, we think the communication to challenge stigma and to focus on positive mental health should include all forms of media including social media as is included in the Draft Suicide and Self-Harm Prevention Strategy. In our opinion, attitudes, culture and stigma cannot be challenged or changed without good and clear communication.

There may also be an opportunity to include an element around self-care and sharing the messages around what good self-care looks like, which may prevent further escalation of a mental health condition.



The strategy overall

Question 8

The high-level actions in the strategy will apply across the life of the strategy. They will be supported by delivery plans that provide detailed actions. These delivery plans will be updated regularly. Are there any detailed actions you would like to see included in our initial delivery plans?

Please see our responses to specific questions in this response.

Whilst we agree with the Vision Statements we are concerned about how they will be delivered and without the detailed delivery plan which will accompany the finalised strategy we are concerned that there will be little or no additional resource and funding to support delivery whilst demand and complexity increase for systems, organisations and a workforce already at capacity.

Question 9

This is an all-age strategy. Whenever we talk about our population, we are including babies, children, young people, adults and older adults in our plans. How much do you agree that the strategy is clear about how it delivers for all age groups?

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

Question 9a

What are your reasons for your answer to question 9?

There is little information in regard to older people which we would expect to find in regard to dementia and the focus on ageing well.

Transition between children and adult mental health services has been an issue for a number of years and resolving these issues does not appear to be covered within the draft strategy.

Whilst the strategy does look at Prison Mental Health the transition from the secure estate to service delivery and on entry from community into the secure estate we think needs to be strengthened.



Question 10

We have prepared impact assessments to explain our thinking about how our strategy may impact Wales and the people who live in Wales. We have thought about positive and negative impacts. Is there anything missing from the impact assessments that you think we should include?

No comment.

Question 11

We would like to know your views on the effects that the strategy could have on the Welsh language. How could we change the strategy to give people greater opportunities to use the Welsh language? How could we change the strategy to make sure that the Welsh language is treated as well as the English language?

Welsh language is included within one of the Vision Statements and High-level actions and therefore we think this element of equality is covered.

Question 12

We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them.

Stigma may be higher in certain communities and community groups than others which is likely to require culture appropriate responses that are not limited to language and word choice.

This response is on behalf of all of our members which includes the 22 Councils, 4 Office of Police and Crime Commissioners, 4 Police Forces, 3 Fire and Rescue Services, Probation in Wales, Public Health Wales, 3rd Sector, Welsh Local Government Association and Welsh Government.