Vaughan Gething AC/AM Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services



Ein cyf/Our ref: MA-P/VG/5961/19

Dai Lloyd AM Chair, Health, Social Care and Sport Committee National Assembly for Wales Cardiff Bay CF99 1NA

30 January 2020

Dear Dai,

Thank you for your letter of 12 December 2019 requesting an update against a number of the recommendations contained within *Everybody's Business: A report on suicide prevention in Wales*.

Since we published our response to the Committee's report, we have taken forward a comprehensive range of actions that contribute directly to our efforts to prevent suicide and self-harm in Wales. Whilst in this response I will set out progress against specific recommendations as requested by the Committee, I am keen that this work is not seen in isolation, but in the broader context of improvements that we are making to mental health services more generally.

We continue to make sustained increases to our investment in mental health services and in 2020-21 the ring fenced mental health allocation for the NHS will rise to £712m. This represents an increase of £109m since 2016-17. This is significant and meaningful investment to improve the quality, range and access of mental health services. In 2019-20, this investment is already supporting improvements in key areas that align with the ambition of the *Everybody's Business* report that I would like to bring to the attention of the Committee.

Firstly, and as set out in my response to the Committee's recent report on Policing and Mental Health, we are taking forward a programme of work to improve crisis care support in Wales. This work is being progressed in collaboration with a number of partners, reflecting the multi-agency response that is needed to respond to people in mental health crisis. In addition to targeted funding to improve crisis care, we have also commissioned a Mental Health Urgent Access and Conveyance Review. Data is currently being collected across a range of agencies including the police, local authorities, the NHS, WAST and 111 to help us better understand the needs of people with mental health or social distress and how services currently support them. The bespoke data collection includes those individuals contacting services with suicidal thoughts or who have self-harmed. The review will report in April and we will consider the findings with partners to inform future improvements to the multi-agency response.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Also, within the context of prevention and early intervention, the Committee will be aware of our joint-Ministerial Whole School Approach programme of work. The Welsh Government intends to double its investment in this programme in 2020-21 – with an additional £500k from health and £2m from education. Part of this funding will support an extension of schools based counselling to ensure appropriate support is available for younger children. This demonstrates our continued commitment to cross-Government working to improve the emotional well-being of our children and young people.

Clearly, our broader investment to improve both primary and secondary CAMHS and improving access to psychological therapies (all-ages) are also key components of our overall programme of work to prevent suicide and self-harm in Wales.

Finally, we published the *Together for Mental Health Delivery Plan 2019-22* on 24 January and preventing suicide and self-harm is positioned as a key action in the plan for the next three years. We have also extended the *Talk 2 Me 2 Strategy* in line with the timescales for the delivery plan. I hope this reassures the Committee about the importance we attach to this agenda and of our continued commitment to preventing suicide and self-harm in Wales.

The Welsh Government's response to the Committee's specific questions are included below:

1. Could the Welsh Government set out its overall, strategic approach to implementing the Committee's recommendations. Is there a 'project plan' and can this be shared with the Committee?

As the Committee is aware, there are currently four Committee reports relating specifically to mental health services (*Everybody's Business, Mind Over Matter, Perinatal Mental health* and *Policing and Mental Health*). Together, the reports make around 100 recommendations for mental health services – and significantly more if you include the sub-actions. In order to ensure deliverability and integration officials reviewed all recommendations across each committee report to identify priorities. These were included in the draft *Together for Mental Health Delivery Plan 2019-22* which was consulted on over the summer. Following feedback from the consultation we have reviewed and strengthened the actions within the priorities outlined in the final plan published on 24 January.

The *Together for Mental Health Delivery Plan 2019-22* sets out the actions we and our partners will take over the next three years to improve mental health and mental health services – including actions to prevent suicide and self-harm and the actions set out in Talk to me 2. Progress will be overseen by a cross-Government Officials Group which was convened in December and the National Mental Health Partnership Board. Monitoring of progress will include six monthly reporting against the actions and milestones in the plan, including those that are intended to deliver on the prevention of suicide and self-harm. Progress reports submitted to the National Mental Health Partnership Board will be shared in due course with the Committee.

2. How are the competence frameworks and other resources now available via the Talk To Me Too website being disseminated/promoted to services and to the wider public?

The National Advisory Group on Suicide and Self Harm (NAG) has reviewed the training frameworks published by Public Health England in late 2018. The chair of the NAG assisted in the development of this work which is intended for a UK wide audience. It was agreed that these frameworks, in conjunction with Welsh specific information on local

training resources, were appropriate to provide guidance and support to organisations in Wales.

The frameworks are now available on the www.talktometoo.wales website and the new national coordinator will work with regional leads and others to update on the range of training resources available in Wales throughout 2020. Members of the NAG are also reviewing the full content of the reports, and will modify sections as appropriate to reflect any Wales-specific content. This work will be completed once the regional coordinators are in post to support the necessary changes.

We continue to promote the website through regional networks and the NAG is exploring options to further raise awareness of the resources.

3. How will implementation of the training frameworks be monitored/reported?

The training frameworks are intended to guide organisations in making informed decisions about appropriate training options for their staff / members and settings.

Data about how people are using the website, including accessing the frameworks, can be obtained to track which pages are visited and how frequently. This will give an indication of how often the frameworks and associated information are being accessed.

4. Can you please confirm whether a Welsh Health Circular been produced and, if not, what is the timescale for this?

Following internal discussions, it was agreed that a Chief Medical Officer letter would be more appropriate and will still provide the necessary direction. Officials have written to GPC Wales to notify them of our intention to circulate the letter. I will notify the Committee when the letter is circulated.

5. Are all health boards now implementing a three day target for first follow-up after discharge from inpatient mental health care?

We expect health boards to follow the recommendations for post-discharge follow-up in the National Confidential Inquiry into Suicide and Homicide with Mental Illness. This includes follow-up within 2-3 days of discharge from in-patient care (unless the patient will continue to receive secondary mental health services).

In our response to the committee report, we committed to considering the best approach for ensure compliance with this guidance as part of the core mental health data set work. I can confirm that the post-discharge target will be included in the core data set and have included the following milestones for the development of the mental health core data set work in the *Together for Mental Health Delivery Plan 2019-2022:*

Year 1 (2020)

- Assure dataset through Welsh Informatics Standards Board (WISB) processes.
- Commence publication of both the new section 135/136 dataset and the psychological therapies 26 week target on Stats Wales.
- To develop and implement a common set of forms for assessment, care and treatment planning, and reviews across health and social care teams.
- To pilot outcomes focused model and develop process to roll out.¹

¹ More information, including a paper detailing the outcomes model, can be found on the 1000 Lives/Improvement Cymru website at http://www.1000livesplus.wales.nhs.uk/data-collection-and-outcome-measures.

Year 2 (2021)

- Roll out Word versions of forms across services.
- Improve the way data is shared with the public, making user-friendly information available on the Stats Wales website.

Year 3 (2022)

- Roll out of dataset alongside the Welsh Community Care Informatics Service (WCCIS) system across Wales.
- Roll out outcomes focused model across Wales.

In the interim, I have asked officials to request written assurance from health boards on adherence with to the post-discharge follow-up with 2-3 days. .

6. When will performance data for access to specialist/secondary care psychological therapies be published?

Please see response to question 7 below.

7. When does the Welsh Government expect to be in a position to reduce the target time for access to specialist psychological therapies?

Whilst health boards are reporting against the 26 week psychological therapies target, publication has been delayed due to quality assurance issues with the data. We continue to work with NWIS and health boards to improve the quality of the data and we have included a commitment in the *Together for Mental Health Delivery Plan 2019-22* to commence publication of the data in 2020. I have made a previous commitment to further reduce the target once we can demonstrate sustainable achievement of the current target, with robust data in place.

To support this, we have also committed to introduce a new psychological therapies infrastructure in Wales that will support service improvement, workforce development and strengthen governance.

8. Will the Welsh Government commit to a timescale for the all-Wales postvention pathway?

We are committed to an all Wales postvention pathway but this needs to be informed by the scoping review of bereavement services, and driven by the new National Co-ordinator for Suicide and Self-harm. The bereavement review was received in December and mapped existing support, ranging from signposting through to specialist counselling, and identified areas where further resourcing is needed. The report is currently being considered by officials.

The national co-ordinator for suicide and self-harm has now been appointed and a start date is being agreed. I will make a written statement in February, which will confirm our next steps and timescales for the postvention pathway and bereavement support more generally.

9. Can you provide an update on the areas identified as needing further resource, and what funding will be made available to support these.

A key area where we have committed to strengthen support is for postvention and bereavement support and I will make a statement in February to set out our next steps in this area. In 2019-20, we also provided additional funding to support regional approaches to

suicide and self-harm. A breakdown of the funding per Regional Suicide Prevention Forums with a summary of the work that has been support is included in the table below:

South East Wales Regional Suicide Prevention Forum	
Total: £48,000	 To train 40 barbers in mental health awareness To create mental health friendly pop up barber shops
	 Run awareness campaign across the region targeting 5,000 men Facilitated sessions using existing training package
	To create short films / media clips with a focus on men (awareness raising)
	To deliver 'SHARE' program / peer support groups
	To provide talking therapy sessions and recovery college courses, including self harm prevention / harm reduction
South West Wales Regional Suicide Prevention Forum	
Total: £104,000	 To provide training from CRUSE, ASIST, Mental Health First Aid To train the trainer creating sustainable resource Research into specific regional factors contributing to higher rates of suicide To work with Ospreys rugby targeting awareness in men
	 To provide additional counselling capacity for existing schools service for at risk children and young people To print materials supporting those feeling suicidal in rural communities and postvention support materials for bereaved families
	To facilitate an outdoors program for at risk young people
North Wales Regional Suicide Prevention Forum	
Total: £55,000	Phase I feasibility study for safeguarding infrastructure improvements in high risk locations
	Monies to Enfys, a new postvention initiative supporting those recently bereaved by suicide

We have also recently provided up to £80,000 per year funding, via Powys Regional Partnership Board for a three-year self-harm, suicide and substance misuse prevention project. This will include work to roll out the national training resources, work with the whole schools approach to improving mental health support for children and young people and strengthen current postvention support within the county.

Recommendation 24 - Implementation of Mind over Matter recommendations

10. Can you provide an update on implementation of the guidance on talking about suicide and self-harm in schools; whether additional steps will be taken to ensure all schools in Wales are supported with clear guidance about action to take and communication with pupils and families following the death of a pupil by suicide,

and; how suicide prevention in schools will be supported through the new curriculum.

Responding to issues of Self-harm and Thoughts of Suicide in Young People, guidance for teachers, professionals, volunteers and youth services was published in September 2019. Anecdotal evidence suggests the guidance has been well received by professionals and we have received a number of requests for further copies from schools and others since its publication.

In evidence to the CYPE Committee in summer 2019 the Minister for Education noted we would produce a framework for schools to support the development of their own whole school approach to emotional and mental well-being. We have included specific reference to suicide and self-harm in the draft Framework and will provide links to appropriate supporting resources either in the Framework or the supporting toolkit of universal or targeted interventions we are developing jointly with Public Health Wales. The Framework will be formally consulted upon during the spring.

An important element of the Framework will be how we ensure it is having the desired impact, and we will be formally reviewing its implementation and application. This will include all the key priority areas highlighted in the document, including the important issue of suicide and self-harm.

In December 2019 we commissioned Swansea University and Professor Ann John to undertake further research in this field related to online expressions by children and young people; its links to online bullying; and bystander interventions. This will lead to a resource co-produced with young people to support them and others in being able to provide empathetic responses when they come across these issues online.

One of the four purposes of the new curriculum is that learners develop as healthy, confident individuals who are building their mental and emotional well-being by developing confidence, resilience and empathy and as such is integral to the new curriculum. The four purposes are at the heart of the new curriculum and are the starting point for all decisions on the development of the new curriculum and assessment arrangements.

The new Curriculum has six Areas of Learning and Experience (AoLE), around which learning will be organised. The Health and Well-being AoLE, is concerned with developing the capacity of learners to navigate life's opportunities and challenges. The fundamental components of this Area are physical health and development, mental health, and emotional and social well-being. Learning in this Area encourages learner's to understand and appreciate how these different components are interconnected.

AoLEs are designed around 'Statements Of What Matters', which sum up the key principles of each Area and will be used to guide the development of curriculum content. They are an essential part of schools' curriculum design.

One of the 'Statements of What Matters' in Health and well-being is: How we process and respond to our experiences affects our mental health and emotional well-being. This Area can help learners explore the connections between their experiences, mental health and emotional well-being. By being provided with opportunities to explore the complexities of these connections, learners can be enabled to recognise that feelings and emotions are neither fixed nor consistent. Included within this is supporting learners to develop strategies which help them to regulate their emotions which can contribute towards good mental health and emotional well-being and; by learning how to communicate their feelings, learners will be better placed to create a culture where talking about mental health and emotional well-

being is normalised. Creating a culture where talking about mental health and emotional well-being openly is normalised can support schools in suicide prevention.

11. Does the Welsh Government have a clear idea of the resources needed to fully implement the Talk to me 2 strategy across Wales, and will further, specific funding for suicide prevention be identified (for example in the 2012-21 budget round)?

Preventing suicide and self-harm requires a multifaceted approach across a range of agencies and broader improvements to those set out in Talk to me 2 contribute directly to the ambition to reduce suicide and self-harm. It is therefore difficult to separate resources for Talk to me 2 from this broader approach. The Welsh Government has however included a further £20m in 2020-21 to improve mental health. The £500k I announced in 2019-20 specifically for suicide and self-harm prevention is recurrent and will be used to support the work of the National Suicide and Self-Harm Prevention Co-ordinator, and the Regional leads going forward.

I hope this reassures you that our plans to utilise the additional funding to prevent suicide and self-harm will build upon and add value to our wider investment to improve mental health and well-being.

I will provide further information when I next update the Committee.

Yours sincerely.

Vaughan Gething AC/AM

Y Gweinidog lechyd a Gwasanaethau Cymdeithasol

Minister for Health and Social Services