

Date: 14 March 2001

Venue: Committee Room 3, National Assembly for Wales, 2.00 pm to 5.15 pm

Title: **Preliminary results from consultation on new all Wales Mental Health Strategy for adults of working age**

Purpose of Paper

1. This paper follows the Committee meeting on 24 January where a "paper to note" gave preliminary results from consultation on the draft All Wales Adult Mental Health Strategy for adults of working age.

Summary

2. The consultation exercise on the independent Advisory Group draft produced a debate which many respondents have hailed as the most wide-ranging discussion on mental health issues ever in Wales. As expected, a wide range of views emerged but from an initial analysis of replies it is clear that we have solid support for certain key elements which can be built on to produce a final Strategy for Wales. These are:

- The overarching principles of " Equity, Empowerment, Effectiveness and Efficiency are fully endorsed
- The strong emphasis on user and carer involvement is overdue and very much needed
- The importance of mental health promotion is fully supported
- There is strong support for the recommendation that Government should tackle systematically the problem of the stigma attached to mental illness
- The need for better joint planning is well highlighted in the draft and needs to be maintained and strengthened in the final document
- The draft sets out a blueprint for improvements which are based on systems we know work for Wales and which are fully achievable within the next 10 year life span of the new Strategy.

Next Steps

3. Officials have almost completed an amended draft which incorporates the many constructive comments made by respondents. This will be put to the Minister for Health and Social Services soon with a view to issuing the final Strategy as guidance shortly thereafter. The National Service Framework

for Wales will follow soon afterwards and together the two documents will provide a template to radically improve services in Wales.

4. We need too, to take into account the proposals contained in the White Paper on reform of the Mental Health Act which was published after the consultation period ended. We are in close touch with the Bill team at the Department of Health and have representation on the high level Project Board taking this work forward. We need to acknowledge the impact of the major capital and revenue funds which have flowed into mental health services in Wales during 2000 but which would not have had time to influence responses to the draft.

Background

5. Research by the Welsh Office had shown that there was widespread consensus in Wales that the 1989 strategy needed to be reviewed in the light of modern conditions. The National Assembly accepted this view. An Advisory Group was set up with membership drawn from relevant interest groups and with a remit to produce a draft strategy document which would go out to consultation. After amendment in the light of the consultation a final Strategy document would be issued as National Assembly guidance.

6. The Health and Social Services Committee received an initial report from the Advisory Group in January 2000 and endorsed the direction the Group was taking. Since then, work has gone on to flesh out these proposals and to produce the draft strategy document. Consultation began on 29 July 2000 and ended on 17 November 2000. Demand for the document led to several reprints. The draft was available also on the internet and intranet. In addition, the National Assembly funded a series of consultation conferences organised by Mind Cymru to ensure the views of users and carers could be fully expressed.

Results of consultation

7. An analysis of the responses is attached at Annex 1. 115 replies were received and most were extremely detailed. Mind Cymru's, for instance, ran to over 100 pages. Although analysis remains ongoing, some major issues are pretty clear already as set out in the Summary above.

8. The concerns of those respondents who voiced significant reservations on parts of the draft strategy were met through additional meetings with officials where these views were fully explored and explained.

Implementation

9. Implementation has started already, in the sense that authorities have seen the emerging themes from the strategy and have taken the initiative. For instance, Community Mental Health Teams are already being strengthened in some areas, and extra resources are being allocated to the voluntary sector by at least one Health Authority.

10. These first steps have been possible due to the extra £10m revenue for mental health services allocated in this financial year and next. Similarly the large injection of capital funding (£32m) in 2000/01 has brought nearer another key strategy aim of closing all the large outdated institutions and will help ease the pressure on forensic psychiatry beds.

11. The draft's recommendation that an Implementation Group be set up to oversee the implementation of the Strategy has been endorsed by the consultation exercise. Recommendations on internal and external representation are being drawn up by officials.

Compliance

12. Implementation of policy governing the provision of mental health services within the NHS in Wales rests with the National Assembly.

Action for Subject Committee

13. The Committee is asked to note the position.

Jane Hutt

Minister for Health & Social Services

Contact Point

John Sweeney, Primary and Community Health Division, or Dr Sarah Watkins, Health Professionals, may be contacted for further information if required.

Annex 1

CONSULTATION ON DRAFT ADULT MENTAL HEALTH SERVICES STRATEGY

SUMMARY OF COMMENTS

Overview

Consultation period: 29 July to 17 November 2000

In excess of 2000 draft documents were distributed by the National Assembly. The document was

available too on the Intranet and Internet.

115 responses were received. The overwhelming majority of these made detailed and extensive comment on what is a very complex and complicated subject. Mental health issues lend themselves to a much wider range of opinion than is the case with other clinical subjects and this analysis does not attempt to explore the nuances of each reply. It sets out to provide a brief summary of the main points put forward.

Discussions have continued post-consultation with those organisations with the most significant reservations to ensure their concerns were fully met

Broad numerical conclusions

57 respondents indicated clearly that they supported the intention behind the document although almost all of these had comments on individual sections.

11 indicated clearly that they were against the general thrust of the document although all of these had supportive comments to make about large sections of the draft.

47 expressed no overall opinion, but gave comments on principles, or on individual sections of the draft, or said that further work was required on particular themes.

This analysis does not attempt to give any weighting to the individual responses. There were influential groups in all three categories. Nor does the analysis include individual replies sent direct to the independent Chair of the Advisory Group which included, for example, endorsements from Professor Louis Appleby the English mental health czar, and from Matt Muijen, Director of the Sainsbury Centre.

This broad analysis makes allowance for the fact that many of the subjects raised will be covered in the National Service Framework for Wales.

Breakdown into main themes

The further analysis set out below concentrates on criticisms made and does not reflect the many positive comments and endorsements made. The intention is to highlight those areas where people felt more work was needed, or a different approach required, to build a strategy document to which they could subscribe. Many of the criticisms concern issues which will be captured in the National Service Framework for Wales rather than in the Strategy document. Since consultation ended, further discussions have been held with those who expressed the most significant reservations and their further comments have been taken on board wherever possible as drafting has continued.

Comments most frequently raised by respondents - 25% +

- 51% of the respondents mentioned resources in some shape or form, mainly highlighting the need for adequate funding to implement the strategy
- 28% indicated strong support for the move away from the purely medical model of treatment
- While acknowledging that the draft tried to take an intelligent look at related initiatives, 27% felt that there needed to be stronger links to other policy initiatives e.g. Drugs and Alcohol
- 25% asked for more clarity of language. This total includes those who wanted a definition of severe mental illness (an argument that has gone on for many years and which is by no means a solely Welsh issue) those who commented on the lack of continuity of terminology and those who suggested a glossary as in the CAMHS strategy

Comments raised very frequently by respondents - 15% to 24%

- 22% said that more consideration needs to be given to wider social issues such as housing conditions and social exclusion and how they link in with mental health
- 22% felt that the strategy should set more clearly a long term vision with specific ideas on where services should be in 5/10years time
- 17% wanted the language to be stronger and to use more 'musts' rather than 'shoulds' to ensure compliance
- 17% felt that Wales should adopt the Care Programme Approach or similar standardized system
- 16% felt that there should be even more stress on "New Flexibilities" and their potential impact on mental health services

Comments raised frequently by respondents - 10% to 14%

- 14% felt that the section on health promotion should be strengthened
- 14% said that the links to child and adolescent and elderly mentally ill services needed to be strengthened with particular reference to age limits
- 13% said that when mentioning Liaison services, the medical model is promoted when other exist (similar comments in regards to mother and baby units)
- 10% argued for recognition of existing examples of good practice and for more emphasis on ways in which good practice should be disseminated across Wales

- 10% per cent felt that ring-fencing of funding was the most effective way of ensuring delivery of a strategy - there remain widespread fears that money allocated for mental health can be diverted in the system to meet other, unconnected needs
- 10 % said homelessness was not addressed sufficiently
- 10% said that the needs of users and carers should be considered separately

Other significant comments raised by a smaller number of respondents - up to 9%

- 8% said rurality was insufficiently addressed
- 8% felt forensic services should be given more emphasis
- 8% said psychology should be seen as basic not as a specialised service
- 8% said that service pressures are not recognised sufficiently
- 8% felt that the draft needs a timetable for action/ needs prioritisation
- 7% felt that the statement regarding the closure of the remaining older institutions is not firm enough
- 6% said that leadership and management should have been highlighted as key issues
- 5% said EMI should not have been excluded. (Note - this is being picked up in the older people's National Service Framework)
- 4% regretted that there is no mention of community support workers
- 4% said that there should be more mention of Children Act Human Rights Act and other relevant legislation and protective measures
- 4% felt that Welsh language aspects need reinforcing.
- 3% stressed the importance of early intervention in young adults needed to be highlighted
- 3% said that pre-senile dementia needs to be addressed
- 3% said that the role of young carers needs to be considered very carefully

- 2% pointed out that discharge planning is not mentioned

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