

# Grŵp Traws Bleidiol ar Iechyd Meddwl Cross Party Group on Mental Health

## Minutes of the last meeting – Annual General Meeting

29 November 2017

12.15 – 1.15

Conference Room A, Ty Hywel, National Assembly for Wales

IN ATTENDANCE:		
<b>Lee Waters</b> (acting Chair)	<b>LW</b>	Llanelli (Welsh Labour)
<b>Maddie Rees</b>	<b>MR</b>	AMSS David Rees AM
<b>Brigid Bowen</b>	<b>BB</b>	Compassionate Mental Health / Gofal
<b>Lewis Cole</b> (secretary)	<b>LC</b>	Gofal
<b>Suzanne Duval</b>	<b>SD</b>	Diverse Cymru
<b>Ewan Hilton</b>	<b>EH</b>	Gofal
<b>Callum Hughes</b>	<b>CH</b>	Welsh NHS Confederation
<b>Richard Jones</b>	<b>RJ</b>	Mental Health Matters Wales
<b>Steve Mulligan</b>	<b>SM</b>	BACP
<b>Linda Newton</b>	<b>LN</b>	CAVAMH
<b>Glenn Page</b>	<b>GP</b>	Mind Cymru
<b>Sarah Stone</b>	<b>SS</b>	Samaritans
<b>Manel Tippett</b>	<b>MT</b>	Royal College of Psychiatrists in Wales
<b>Jamie Westcombe</b>	<b>JW</b>	Equality and Human Rights Commission
<b>Jon Willey</b>	<b>JWi</b>	Hafal

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CPGMH/NAW5/10 - Welcome	
<p>As <b>DR</b> was unfortunately called to another meeting, <b>EH</b> welcomed attendees to the annual general meeting of the Cross Party Group on Mental Health.</p> <p>Apologies were received from:</p> <ul style="list-style-type: none"> <li>• Simon Thomas AM</li> <li>• Neil Hamilton AM</li> <li>• Jeremy Miles AM</li> <li>• Alun Thomas, Hafal</li> <li>• Peter Martin, Hafal</li> <li>• Justin Irwin, Bipolar UK</li> </ul>	
CPGMH/NAW5/11 – Minutes of the last meeting	
<p><b>APPROVED</b> Minutes of the last meeting.</p>	<p><b>LC</b> to send to Table Office</p>
CPGMH/NAW5/12 – Annual Report and Financial Statement	
<p><b>APPROVED</b> The Cross Party Group on Eating Disorders Annual Report and Financial Statement.</p>	<p><b>LC</b> to send to Table Office</p>
CPGMH/NAW5/13 – Cross Party Group Focus and Priorities 2018	
<p>The group discussed the progress of its key asks and priorities identified at the last meeting. The need to improve data collection associated with mental health services through the implementation of the mental health core data set, in order to assess the effectiveness of support, has progressed well.</p> <p>Dementia spend is still not being separated from mental health spend but this has been raised.</p> <p>WAMH members have identified two areas to prioritise in the group's work for next year:-</p> <ol style="list-style-type: none"> <li>1. Anti-stigma funding – The three year second phase of the Time to Change Wales campaign is due to end on 31<sup>st</sup> December 2017 with no confirmation of future support.</li> <li>2. Crisis Care Condordat – while phase one of the project went well ultimately there are still no safe places for people experiencing a mental health crisis.</li> </ol>	

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A commitment to tackling the stigma that can often surround mental health is a key part of Welsh Government's strategy, and the Time to Change Wales campaign which works to reduce discrimination and improve public attitudes has ran since 2012 and it's currently in its second phase, which ends at the end of the year.

A third phase proposal has been submitted with a specific focus on men's mental health and the work improving wellbeing in the workplace. No confirmation has been received that phase 3 will go ahead yet, but an extension to the existing phase has now been confirmed to last until 31<sup>st</sup> March 2018 while the decision is made. The group agreed to send a letter to the Cabinet Secretary for Health asking for further clarity on the continuation of the campaign's funding.

The group identified the continued lack of places of safety for people in crisis as a major issue. There are reporting issues with people slipping through the gaps in the current crisis intervention system, and from the police's point of view there's a lot of pressure on them resulting in people not being detained but sectioned or left in unsafe places. The pressure on the police in terms of dealing with people with poor mental health goes wider, with black people being found to be more likely to access mental health support through the police.

Some key questions and concerns identified by the group for the Cabinet Secretary for Health going forward included:

- Would it be more effective if the Task and Finish group acted as a ministerial advisory board?
- There is currently no transparent view from the police in terms of 'in-crisis' reports.
- Has there been any movement on non-health places of safety?

**LW** asked the group whether the issues surrounding the group would be suitable for an individual member's debate, and it was agreed that a briefing would be put together for the AMs of the group to suggest an individual member's debate in the assembly. The briefing will consist of the above points and also include other models of 24/7 safe places. What's wrong currently, and what needs to be done differently.

The group agreed to draft a letter to the Cabinet Secretary for Health asking for clarity on the above key questions, and also use the opportunity to bring up the ongoing issue of dementia spend grouping

**GP** to draft letter on clarity of the continuation of Time to Change Wales funding.

**EH** to put together briefing document for AMs on Crisis Care Concordat.

**EH** to draft letter to the Cabinet Secretary for Health on the group's concerns on the Crisis Care Concordat work progress.

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<p><b>LW</b> thanked the members for their contribution, but stressed the need for a greater number and a pipeline of issues to keep the pressure on mental health provision.</p>	<p><b>WAMH</b> members to identify more priority issues for the CPG</p>
<p><b>CPGMH/NAW5/14 – Any other business</b></p>	<p><b>Actions</b></p>
<p><b>LW</b> raised the issue of mental health support for children and young people. The group fed back that statistics from Children and Adolescent Mental Health Services aren't very positive and a focus on this would be really useful. Organisations were identified that currently have a focus and provide support to young people.</p> <p>The pressure on CAMHS may not be solved by additional investment but by the findings of studies that early intervention is key, with a consensus from the group that there needs to more focus on preventative, school based, community action etc. activities and not just additional calls for more clinical and crisis care. <b>SD</b> added that there aren't many black children accessing CAMHS, when compared to the number of men accessing adult services. She said young black men generally enter mental health system via the police. What are the barriers to seeking help or accessing services earlier? <b>MT</b> told the group that a study into the effectiveness of CAMHS services in Scotland by Scottish Government is currently being carried out and these could be presented at a later meeting.</p> <p><b>MT</b> raised that there are currently a number of different Cross Party Groups which have a focus on poor mental health, and it is important to stress the mental health need and lack of psychological support across all long term health conditions. <b>MT</b> will make sure the groups are aware of each other for the potential of working together on related issues in future.</p> <p><b>JW</b> brought up the review of the Mental Health Act (1983) commissioned by the UK Government and led by Simon Wessely – outgoing president of the Royal College of Psychiatrists, and what implications changes will have on mental health provision in Wales. An interim report identifying the review's priorities will be published in early 2018 and will be brought up at the next meeting, for an update and what is the legislative possibility to do things differently in Wales.</p>	<p><b>MT</b> to share contact details with other CPGs which have mental health connections.</p> <p><b>LC</b> to add Mental Health Act review to next meeting's agenda.</p>
<p><b>EH</b> thanked everyone for their attendance.</p>	