



**Royal College
Mental Health
Expert Advisory Group
Wales**

annual report
2023

The Royal College Mental Health Expert Advisory Group (RCMHEAG) brings together partners from across health and care services in Wales and acts as a source of independent and impartial, evidenced-based expert advice for policy and decision makers.

- Royal College of Speech & Language Therapists
- Royal College of Occupational Therapists
- Royal College of Psychiatrists Wales
- Royal College of Physicians Cymru Wales
- Royal College of Nursing Wales
- Royal College of Paediatrics & Child Health
- Royal College of General Practitioners Cymru Wales
- British Psychological Society, Division of Clinical Psychology
- The Royal Pharmaceutical Society
- Chartered Society of Physiotherapists

We aim to ensure a sharper focus and understanding on the current and necessary support for the people we collectively represent across primary, community, and secondary care mental health services.

We have a multidisciplinary approach, with input from clinicians and policy leads amongst our respective members.

“

We're excited to issue our second annual report, it couldn't have arrived at a more critical time for mental health services in Wales.

Welsh Government are currently developing a successor mental health strategy to Together for Mental Health, whilst giving consideration to amendments of regulations within the Mental Health (Wales) Measure.

The UK Government hasn't taken forward anticipated reform to Liberty Protection Safeguards, or more recently to the Mental Health Act, however the Senedd is shortly to consider a Mental Health (Wales) Bill which will give new consideration for much-needed reform in Wales.

The next few months present an opportunity for Wales to cement its vision for mental health services in Wales for future years.

Crucially, underpinning all of this, is our workforce.

We're over a year into the Mental Health Workforce Strategy. The need to monitor the strategy and ensure that it is accounting and aligning to the ever-changing policy landscape, and demands upon services, couldn't be greater.

Ollie John
Royal College Mental Health Expert Advisory Group

”



The pressures on mental health services are not new but as they intensify, the need for action becomes ever more urgent.

As an expert group we look forward to continuing to work with key decision makers and listening to our professions on the ground to steer forward change with purpose and pace.

activity

The RCMHEAG meet monthly, whereby clinicians and policy experts discuss areas of priority for their respective professional groups and the wider sector in Wales. Those priorities are escalated through a number of different forums.

We continue to provide representation, wherever we can provide benefit. This includes several advisory groups and boards on key national strategies and programmes:

- WG Clinical Advisory Group
- Neurodevelopmental Ministerial Advisory Group
- HEIW Workforce Plan Implementation Board

Additionally, this year, we have scheduled regular meetings with the Deputy Minister for Mental Health & Wellbeing and her officials in Government. Whilst these meetings have provided a helpful focus and opportunity to inform thinking on the development of the successor mental health strategy, meetings have also provided opportunities to raise several issues of priority.

As our activity continues to grow:

We will shortly be issuing a joint report with the Welsh NHS Confederation 'Creu argraff'. This report follows an exercise we undertook in gathering examples of innovative practice from teams across Wales. Whether this work is in its infancy, has developed to serve its locality, or has grown into a national programme, we've been keen to capture and highlight that work

focus areas

For this report, we have identified several areas of focus that have been a consistent priority within our work programme.

The areas of focus unite the respective professions across the Group.

Seamless Models of Care & Workforce

Services should be both universal across all aspects of life, and targeted, so that they are shaped and placed according to the needs of local population groups. To improve services in order to reduce inequalities it is important that services are co-designed with the people the services are intended to support.

Services and workforces need to reflect and be shaped by the culture of the communities that they serve, with a shared understanding of the desired outcomes for the community and the service. To achieve this there needs to be urgent investment in the mental health workforce, to ensure an appropriate number of staff with an appropriate skill mix in a safe environment.

It's crucial that specialist skills and training are valued across the multidisciplinary team (MDT), and that a full specialist MDT is in place to support patients, this includes specialist mental health speech and language therapists and occupational therapists to aid recovery and mental health nurses to deliver safe and effective care 24/7.

All specialist MDTs should also include a specialist mental health pharmacist with responsibility for medicines optimisation and to support appropriate prescribing and deprescribing.

In recent years there have been efforts by the Welsh Government to address mental ill health. The budget for 2022/2023 provided an additional investment of £100 million for mental health services in Wales. There has also been a significant effort around wellbeing and low-level mental health support, including the introduction of the Whole School Approach. The Whole School Approach has highlighted the need to support the emotional and mental health of children and young people. Investing in overall mental health support for the general population is welcomed as it can aid early intervention, as well as prevention for some mental health problems from deteriorating.

People who have been subjected to physical/sexual and emotional abuse often experience complex post-traumatic stress disorders which exacerbate existing mental health problems, resulting in the need for evidence based, trauma informed care and treatment.

There will also always be a need for inpatient mental health services and a workforce available to provide complex clinical care, including CAMHS and services for children and young people. Individuals with severe and enduring mental ill health may be vulnerable due to the nature of their illness, and it's important that resources and services are suitably equipped to best provide support.

Provision of specialist services in mental health, such as psychotherapy and EMDR treatment, assessments for PTSD, eating disorders, Autism diagnostic and management services, ADHD, and CAMHS provision is often inequitable. In many areas, services have been merged so that patients need to travel greater distances for appointments.

Increasing access to support for lower-level mental health issues can also be improved through greater use of community pharmacists. By monitoring requests for over-the-counter medicines (e.g anti-anxiety or sedative products) they are particularly well placed to identify early signs of mental health problems.

However, at present, there is no formal mechanism in place for community pharmacists to act on their observations. Formal systems should therefore be introduced to enable pharmacists to directly refer patients to appropriate third sector services or health professional colleagues.

Mental health services, in particular specialist CAMHS, are experiencing significant difficulties regarding waiting times. Access needs to be open, appropriate, and fair to population groups who have been known to experience reduced access to, and satisfaction with, health and care services. The implementation of digital throughout the health service is a long-term objective of 'A Healthier Wales' and is an enabler to aspirations for us all to work more sustainably. Digital innovation can support in offering services in different ways that ensure increased service capacity and access, and better outcomes for patients in light of increased demand.

focus & activity

The appropriate treatment of common mental health conditions in a timely manner is vital to avoid further decline in mental health and quality of life, as well as unnecessary medicalisation of mild to moderate-severity difficulties and the associated impact on GP services that are often challenged to respond to mental health concerns. If left untreated, many are likely to face addictions, suicidal ideation, negative impact on relationships, struggles with work or even face unemployment and long-term economic and social exclusion; this chronicity and additional complexity usually resulting in poorer outcomes and reduced 'flow' in psychological services. This is why we are calling for more support in early interventions.

We are pleased that the NHS Delivery Unit has conducted a comprehensive review into the provision of Psychological Therapies in Wales and that they report that the Welsh Government and health boards are working closely with the NHS Executive to improve service provision.

We urgently need assurance over how the Mental Health Workforce Plan is giving consideration for the ever-changing demand, as well as legislative and strategic changes that are occurring within our mental health services.

A well-trained, supported workforce that is fully equipped to meet the demands upon the mental health service is central to the future provision of mental health services for all ages. This must include professionals with specialist training and the mental health workforce must include the full range of professions, supported by a range of skill sets.

We commend the work of the National Collaborative Commissioning Unit in the implementation of the 111 press '2' service for mental health. It's an example of a national specification, and the importance of local implementation in delivering greater access to support, and more aligned services. Moving forward, we need a greater focus on refining our approach in Wales to nationally commissioning services, and in taking forward our learning.

Mental Health Inequalities

In our response to the Senedd, Health and Social Care Committee inquiry into its priorities for the Sixth Senedd; we called on the committee to scrutinise mental health inequalities in Wales. We welcomed the subsequent inquiry that followed, and issued our response.

Mental health inequalities are the result of a myriad of factors and meaningful progress will require coherent efforts across all sectors. There are a number of opportunities to address mental health inequalities, including through embedding cross-governmental focus, and priority within the successor Mental Health Strategy and through Health Education and Improvement Wales (HEIW) and Social Care Wales' Mental Health Workforce Strategy.

In our responses, we called on the Welsh Government to take cross-government action to tackle mental health inequalities by pulling together a delivery plan that outlines the action being taken across all government departments, how success will be measured and evaluated, and how individual organisations should collaborate across Wales to reduce health inequalities and tackle the cost-of-living crisis.

“

Inequality should be seen as a continuous variable; all sectors of society would experience tangible benefits from reductions in inequality

”

focus & activity

In December 2022, the Senedd's Health and Social Care Committee issued its 'Connecting the Dots' inquiry report. The report identified how mental health problems can affect anyone, but some groups or communities are disproportionately at risk. Such groups may also have the most difficulty in accessing services, and even when they do get support, their experiences and outcomes may be poorer.

Whilst we can commend the work of the Committee on what was a significant area of inquiry, we do feel that a greater focus should have been applied to the mental health inequalities of Children & Young People, people with a Severe & Enduring Mental Illness, and Children & Adults with communication and speech and language difficulties.

We are committed to continue to advocate and prioritise within our RCMHEAG work programme, and this has included raising with the Deputy Minister for Mental Health & Wellbeing, ensuring that mental health inequalities are a focus within ongoing strategy.

Mental Health Reform

As feared, reform of the Mental Health Act was not included in the recent King's speech, which means it will not be achieved before the next General Election, despite being promised by the UK Government in its last manifesto.

There is a desperate need to tackle the underlying causes of rising detentions under the Mental Health Act, with people from Black and racialised communities facing disproportionate rates of detention.

Whilst the Mental Health Act isn't a reserved matter, Welsh Government have been receptive to our requests for consideration for what it can reform under its strategic portfolio. This has been a fixture of our discussion, and we anticipate that reform will materialise in commitment within the forthcoming strategy.

We also believe the forthcoming Mental Health (Wales) Bill may present the opportunity to bring several key areas of anticipated reform into Welsh legislation, and believe that parties across the Senedd should give this opportunity necessary scrutiny.

We welcome an approach that looks to protect the dignity, autonomy and human rights of people subject to the Act.

For this reason, we would wish that Wales take forward the following principles that any person must have regard to, when powers are exercised under the Act. These principles were identified within the independent review of the Mental Health Act, and can serve to complement elements of the pre-existing Mental Health (Wales) Measure.

focus & activity

a. Choice and Autonomy: all practicable steps must be taken to:

- i. support a person subject to this Act to express their will and preferences;
- ii. have particular regard to the person's will and preferences, even where an intervention in the absence of consent is expressly authorised by this Act;
- iii. promote the person's dignity, and accord them due respect, including respecting their social and caring relationships; and
- iv. take steps to ensure that the person understands their rights and entitlements whilst they are subject to the Act

b. Least Restriction: The exercise of any power under this Act shall be done in the least restrictive and least invasive manner consistent with the purpose and principles of this Act.

c. Therapeutic Benefit: care and treatment must be designed to meet the person's needs in a timely manner within a supportive, healing environment with a view to ending the need to be subject to coercive powers under this Act.

d. The person as an Individual: care and treatment must be provided and commissioned in a manner that:

- i. respects and acknowledges the person's qualities, strengths, abilities, knowledge and past experience; and
- ii. In particular, respects and acknowledges person's individual diversity including any protected characteristics under the Equality Act

This development should also be complemented with Welsh Government taking forward amendments to regulations under the Mental Health (Wales) Measure, as set out in the Duty to Review. The regulations seek to extend the range of professions who can care-coordinate under the Measure, as well as improve upon the quality of Care & Treatment Planning.

Children & Young People

Children under the age of five in the UK are at risk of suffering from lifelong mental health conditions which could be prevented with the right care and support. Early action is vital, given half of mental health conditions arise by age 14 and many of these start to develop in the first years of life.

There are many risk factors which contribute to a child developing a mental health condition, such as smoking, alcohol or substance use during pregnancy, socioeconomic deprivation and adverse childhood experiences like domestic violence or physical and emotional neglect and abuse.

Most babies, under 5s and their parents do not receive the support they need to address these issues both during and after pregnancy. Mental health services are under-resourced and inconsistent commissioning is putting children's immediate and long-term mental health at significant risk.

Early interventions are critical to preventing mental health conditions, as well as stopping these conditions from becoming more severe and difficult to treat. By supporting babies and children in the first five years of life they will go on to become productive adults who can fully contribute to the wellbeing of our society.

It is crucial that this area is given its due focus in the upcoming mental health strategy.

We are also delighted to support the creation of a new and complementing group that will focus upon Children & Young People's Health. The Welsh Royal College Child Health (WRCCH) Collaborative will be hosted by the Royal College of Paediatrics & Child Health, and complement the work of RCMHEAG.

summary

Through positive discussions with Welsh Government, we know there will be much to commend in the forthcoming mental health strategy.

Whilst the strategy remains in development, we ask for a focus on the physical health of people experiencing mental health problems, and on the necessary mental health support for people with neurodevelopmental conditions, this is alongside areas that we have already been assured of inclusion.

In protection of dignity, we ask for assurance that people who are experiencing mental health problems aren't excluded from emerging strategy and work programmes on social prescribing, and on wellbeing, due to the severity of illness.

Alongside the forthcoming mental health strategy, we ask for assurance and support from Welsh Government that in meeting the challenges in service efficiencies at a health board level, the frontline workforce are given every opportunity to propose service improvements. Our forthcoming report with the Welsh NHS Confederation will serve to highlight what can be achieved when our frontline workforce is valued and supported in this way.

With thanks to the following organisations, who have presented to the group in the past 12 months;

Senedd Research Team, Canopi, Health Education & Improvement Wales, National Collaborative Commissioning Unit, NHS Delivery Unit and the Wales NHS Confederation.

royalcolleges.wales

