We're Mind Cymru, the mental health charity. We're here to make sure anyone with a mental health problem in Wales has somewhere to turn to for advice and support.



The Mental Health (Wales) Measure 2010

Primary Legislation made by the National Assembly for Wales, which requires Local Health Boards in Wales to provide:

- Local Primary Mental Health Support Services
- Care Coordinators and care and treatment plans for all secondary mental health service users
- Re-assessment for former users of secondary mental health services
- Statutory independent advocacy for informal mental health inpatients.



Part 4: Independent Mental Health Advocacy

This Part of the Measure ensures all inpatients in Wales who are receiving assessment or treatment for a mental disorder are entitled to request support from an Independent Mental Health Advocate.

It extends the Independent Mental Health Advocacy scheme. It covers patients subject to compulsion under the Mental Health Act 1983, and those in hospital voluntarily.



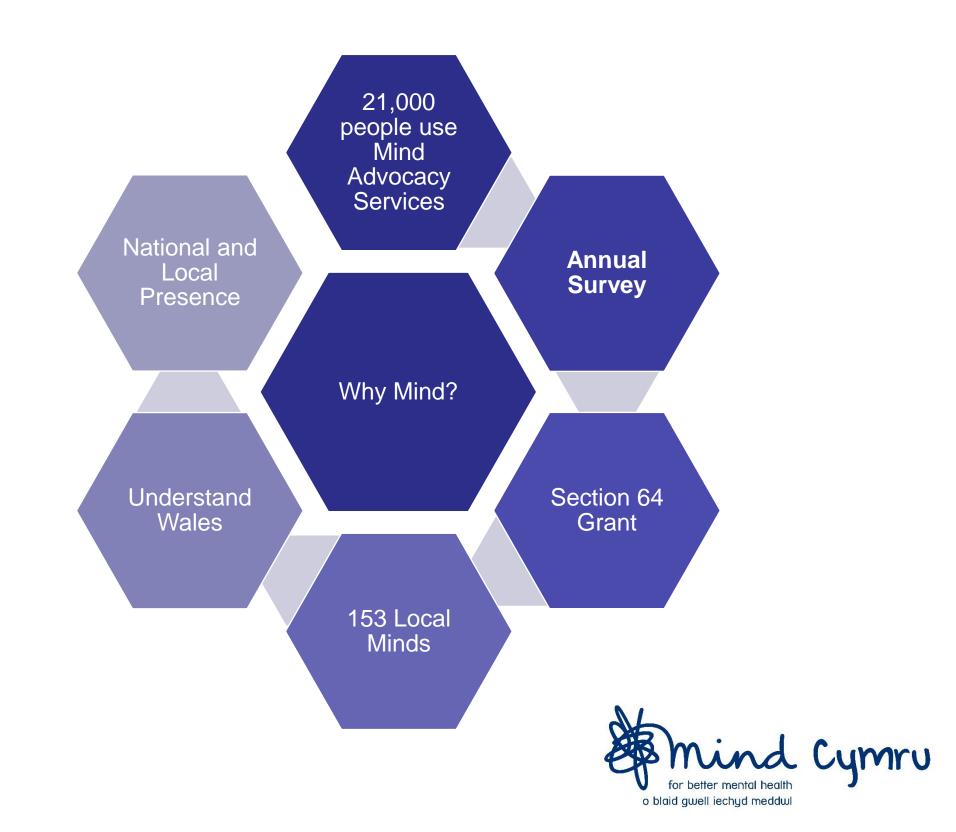
The Mental Health (Wales) Measure 2010

The Welsh Government has a duty to review the effectiveness of the implementation of the Mental Health (Wales) Measure 2010

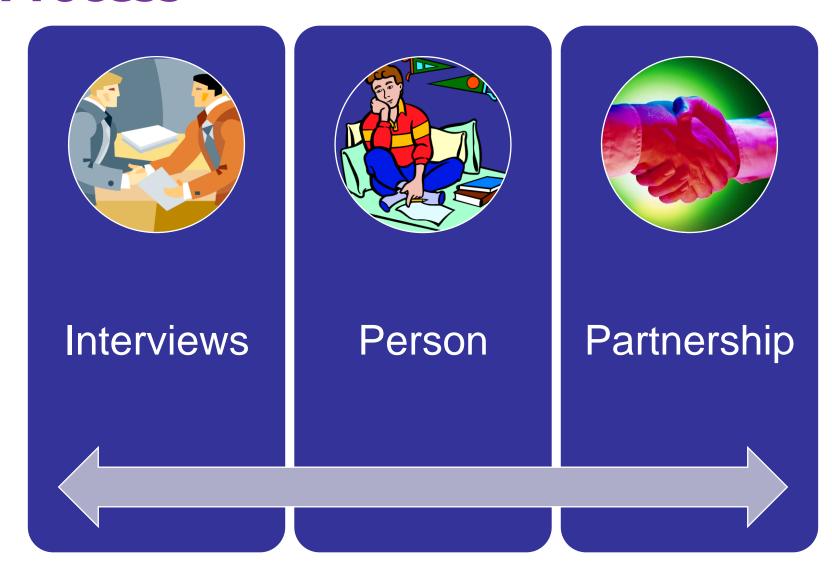
Why is it important to monitor this?







The Process

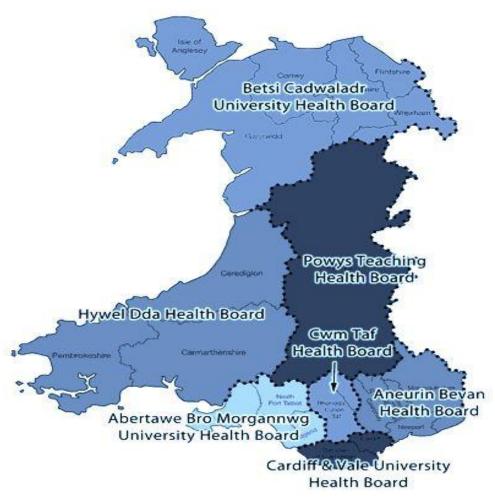




The Approach

- We engaged all Health Boards in Wales
- Mental Health Development Managers
- Mental Health
 Development Officers

 CVC's
- Ward Managers





Units / Wards engaged so far...

Cwm Taff UHB	RGH, Pinewood House & YGT
Aneurin Bevan	Maindiff Court, Ty Skirrid, St Cadocs, Talygarn, Ty Cafanol and Ty Siriol.
Hywel Dda	Cwm Seren, PICU, St Caradog & St Non's.
Betsi Cadwaladr UHB	Tryweryn, Dyfdwy, Llywedog, Heddfan, Maelor, The Hergest, The Ablett Unit, Bodelwyddan,
Powys Teaching Health Board	Bronllys Hospital
Abertawe Bro Morgannwg UHB	
Cardiff & Vale UHB	



Working with Health Boards in Wales – a practical approach

- Positively received by Ward Managers and their staff – welcoming and accommodating.
- Little disruption to ward life prior engagement.
- Inpatients / service users made aware in advance – promoting engagement.
- Various excellent advocacy practices positively promoted in some areas.
- Over 100 in-patients engaged so far.....



Next steps

- Report due June 2014
- Make recommendations
- Plan next phase of survey
- Consider three additional waves:
 - > Forensic Settings
 - Children and Young People
 - **≻ Older People**
- Follow up on recommendations



Part 2: Care and Treatment Planning

Ensures people of all ages within secondary mental health services receive an individual Care and Treatment (C&T) plan. Care co-ordinators, have been appointed, and will ensure that C&T plans are informed by the service user and their carers. Care Coordinators required to consider the '8 areas of life' when preparing and reviewing plans with services users.



CARE AND TREATMENT PLAN

Gall y cynllun hwn cael ei gwblhau yn y Gymraeg neu yn y Saesneg, neu yn rhannol yn y Gymraeg ac yn rhannol yn Saesneg

This plan may be completed in either the Welsh or the English language, or partly in Welsh and partly in English

Mental Health (Wales) Measure 2010 Section 18 - Care and Treatment Plan

This care and treatment plan has been prepared under section 18 of the Mental Health (Wales) Measure

	This is the care and treatment plan of					
Name of relevant patient						
Full usual address of relevant patient	who lives at					
	The care coordinator who has prepared this care and treatment plan is					
Name of care coordinator						
elephone umber, postal ddress, and	who can be contacted at					
here ppropriate, nail address f care						
oordinator						
me of Local alth Board or ral Authority t appointed the e coordinator	The care coordinator has been appointed by, and is acting on behalf of,					
	This plan was made on Date plan was made and					
	and is to be reviewed no later than date by which the plan must be reviewed					
	However, Name of relevant patient					
	his or her carer(s), or adult placement carer(s), may request a review of					
	this care plan at any time.					



This part of the care and treatment plan records the outcomes which the provision of mental health services are designed to achieve, details of those services that are to be provided, and the actions that are to be taken with a view to achieving those outcomes.

The planned outcome(s) included in the following part of the plan must relate to one or more of the areas listed, and include an explanation of how each outcome relates to each area. Outcomes also may be achieved in other areas, and are to take into account any risks identified in relation to the relevant patient. This part of the plan should also set out details of the services that are to be provided, or actions taken, to achieve the planned outcomes, including when, and by whom those services are to be provided or actions taken.

Outcomes to be achieved must be agreed in relation	Outcome to be achieved	What services are to be provided, or actions taken	When	Who by
to at least one of the following areas:				
a) accommodation				
b) education and training				
c) finance and money				
d) medical and other				
forms of treatment, including				
psychological				
interventions				



	Outcome to be achieved	What services are to be provided ,or actions taken	When	Who by
e) parenting or caring responsibilities				,
f) personal care and physical well- being				
g) social, cultural and spiritual				
h) work and occupation				
Outcomes to be achieved may also be agreed in relation to other areas				



So why is it important?





Key Findings so Far

- More people have Care and Treatment Plans than before (between 80 and 90% of those eligible)
- Quality of Care and Treatment Plans
- Outcome Focussed
- Training



Next Steps

- Improving quality and relevance
- Training
- Evaluating actual benefits and outcomes for the person



Thank you

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Contact: contactwales@mind.org.uk 029 2039 5123

