Welsh Government
Consultation – Summary of response

Together for Mental Health  Delivery Plan 2019-2022

January 2020

Mae’r ddogfen yma hefyd ar gael yn Gymraeg.
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Consultation Summary Report – Mental Health Delivery Plan 2019-22

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Introduction

The consultation sought views on the 2019-22 Together for Mental Health Delivery Plan, the third and final plan implementing the 10-year cross-government strategy to improve mental health and well-being in Wales.

The consultation ran from 18 July – 30 August 2019 and was aimed at the general public and public services, including people with lived experience and carers, local health boards, local authorities, third sector providers, police and ambulance services, Public Health Wales and any other key stakeholders which may have an interest in this area.

This document provides a summary of responses to the consultation and shows how the Welsh Government is responding to them. It does not offer a detailed opinion on individual comments.

The Welsh Government is grateful to all those who took the time to submit their views.
Context

‘Together for Mental Health’, is the Welsh Government’s 10-year cross-governmental strategy to improve mental health and well-being across all ages. Published in October 2012, following significant engagement and formal consultation with stakeholders, the strategy has been supported by a series of detailed delivery plans.

The ‘Together for Mental Health Delivery Plan 2019-22’ builds on the progress made over the course of the previous delivery plans. The overall aim of the delivery plan is to improve both the quality and accessibility of mental health services, while promoting positive mental well-being, reducing stigma and discrimination, and emphasising that mental health is ‘everybody’s business’.

The plan also contains a number of proposed actions for Welsh Government and key partners. These actions have been developed following engagement with a wide range of internal and external stakeholders as well as taking into account relevant reports, National Assembly Committee recommendations and feedback from those with lived experience of mental health issues. The plan has also been informed by a review of progress towards the goals in the overall strategy.

The Together for Mental Health Strategy 2012-22

The Together for Mental Health strategy sets out a number of high-level outcomes aimed at achieving a significant improvement to both the quality and accessibility of mental health services for all ages. The strategy recognises that the causes and effects of poor mental health are complex, challenging and multi-faceted and therefore require an integrated, cross government and cross sector partnership approach if we are to achieve these outcomes.

Whilst the 2019-22 delivery plan outlines a number of new priority areas for the next three years, some of the actions represent a necessary continuation and investment in services. The delivery plan is also intended to drive a step change in service provision and/or additional government led activity to promote good mental health at a population level.

The priorities that will be delivered through the delivery plan continue to support principles of prudent healthcare and the vision outlined in ‘A Healthier Wales’ with its focus on integrated, person centred care delivered in a way that has been informed by service users and carers.

Delivery of the overall strategy and its constituent delivery plans is monitored and assured through the National Mental Health Partnership Board and local partnership boards.

The engagement/consultation process had two phases:
• Preparatory – review of progress and evidence, discussions across the sectors and in the National Mental Health National Partnership Board. This also included a review of related Assembly Committee reports.
• Pre-consultation – detailed discussions with those with lived experience and delivery partners, to agree to the priorities and actions in the plan. Engagement at this stage included a series of workshops held across Wales and facilitated discussions as well as informal meetings. This phase delivered a draft plan, which was reviewed by the National Partnership Board and others.

As a result of engagement activities the priority areas identified for consultation, were:
• Preventing poor mental health and maintaining mental well-being.
• Improving access to support for the emotional and mental health well-being of children and young people.
• Further improvements to Crisis and Out of Hours provision for children and adults.
• Improving the access, quality and range of psychological therapies across all ages.
• Improving access and quality of perinatal mental health services.
• Improving quality and access to services whilst developing recovery orientated services.
• Supporting vulnerable groups.

Formal Consultation


This document provides a summary of the consultation responses received through the online consultation and meetings / events with stakeholders.

Online Consultation

The online consultation received 240 responses, which included 23 blank responses. A full list of respondents is included at Annex A (minus individuals), with a number of respondents choosing to keep their response confidential.

A thematic analysis of the responses was undertaken. This categorised the opinions, comments, statements and issues raised by respondents into overarching themes, for each of the consultation questions.
Public Consultation Events

During the online consultation period, Welsh Government officials also carried out three events in North, South and West Wales, with over 150 people attending these events.

The events were held in the following areas:
- Cardiff – Friday 9 August 2019.

At these events, we asked the respondents three questions and in small groups to discuss each question and collaboratively provide us with their feedback. These were:

**Question 1** - Do you agree with the priority areas? Are they fit for purpose?

**Question 2** - Do you agree these are appropriate cross-cutting work streams to prioritise?

**Question 3** - In your view, which elements of the proposed delivery plan are likely to have the greatest impact? What effects do you think there would be? How positive effects could be increased, or negative effects be mitigated?

The events were split into morning and afternoon sessions with a broad range of stakeholders in attendance. Table discussions pulled out themes, which were then fed back and recorded to inform the consultation.

There were a number of themes where people felt a stronger focus should be made within the final delivery plan, these were:
- Addressing health inequalities.
- Children and young people/education.
- Crisis care and out of hours provision.
- Early intervention/prevention.
- Lack of third sector engagement in delivering services.
- Outcomes and impacts.
- Vulnerable groups – consideration of protected characteristics.

These themes mirrored those received through the written consultation responses.

Summary of written consultation responses

The consultation comprised a combination of multiple choice and narrative questions. Table 1 below summarises the questions and the number of responses to the multiple-choice questions. A further detailed summary of the comments received for all of the questions follow the table.

**Table 1 – Responses –Consultation questions**

<table>
<thead>
<tr>
<th>Question 1 - The delivery plan continues to place a strong emphasis on improving mental health and well-being across all ages, would you agree with this approach?</th>
<th>Options</th>
<th>Yes</th>
<th>Partly</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Responses</td>
<td>142 (74%)</td>
<td>47 (25%)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Question 2 - Could you please provide any further commentary on where you feel the approach works well or where alternative emphasis is required?</td>
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<tr>
<td>---------------------------------------------------------------</td>
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<td></td>
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<tr>
<td><strong>Options</strong></td>
<td><strong>Narrative response</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Number of Responses</strong></td>
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<table>
<thead>
<tr>
<th>Question 3 - Do you agree with the priority areas identified? Are they fit for purpose?</th>
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<tbody>
<tr>
<td><strong>Options</strong></td>
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<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 4 - Could you please provide any additional information to support your response, relating to why you consider the priority areas to be appropriate or suggesting additional key areas or changes you would wish to see?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Options</strong></td>
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<tr>
<td><strong>Number of Responses</strong></td>
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<thead>
<tr>
<th>Question 5 - Do you agree these are the appropriate overarching work streams to prioritise?</th>
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<tr>
<td><strong>Options</strong></td>
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<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Question 6 - Could you please provide any additional information to support your response, relating to why you consider these work streams should be prioritised or suggesting additional work streams or changes you would wish to see?</th>
</tr>
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<tbody>
<tr>
<td><strong>Options</strong></td>
</tr>
<tr>
<td><strong>Number of Responses</strong></td>
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</tbody>
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<tr>
<th>Question 7 - Within each key theme, we have identified a number of key actions and milestones. Do you feel these are the right ones?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Options</strong></td>
</tr>
<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 8 - If there are any key actions or milestones that we are missing can you tell us what you feel is missing and what you recommend we add?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Options</strong></td>
</tr>
<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 9 - In your view, does the proposed Delivery Plan link well with other relevant policy and service areas?</th>
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</thead>
<tbody>
<tr>
<td><strong>Options</strong></td>
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<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 10 - Please can you provide further commentary on where you consider the Delivery Plan to link well with other policy and service areas, and tell us how you think the Plan could link better with other areas?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Options</strong></td>
</tr>
<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Question 11 - In your view, which elements of the proposed delivery plan are likely to have the greatest impact?</th>
</tr>
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<tbody>
<tr>
<td><strong>Options</strong></td>
</tr>
<tr>
<td><strong>Number of Responses</strong></td>
</tr>
</tbody>
</table>
## Question 12 - What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?

<table>
<thead>
<tr>
<th>Options</th>
<th>Narrative response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Responses</td>
<td></td>
</tr>
</tbody>
</table>

## Question 13 - Please also explain how you believe the proposed delivery plan could be changed so as to:

- have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language,
- have no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.

<table>
<thead>
<tr>
<th>Options</th>
<th>Narrative response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Responses</td>
<td></td>
</tr>
</tbody>
</table>

## Question 14 - Do you think the actions contained within the delivery plan will provide a positive impact for people with the following protected characteristics:

- Disability
- Race
- Gender and gender reassignment
- Age
- Religion and belief and non-belief
- Sexual orientation
- Human Rights
- Children and young people

<table>
<thead>
<tr>
<th>Options</th>
<th>Yes</th>
<th>Partly</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Responses</td>
<td>60 (39%)</td>
<td>79 (51%)</td>
<td>15</td>
</tr>
</tbody>
</table>

## Question 15 - Please can you provide further information as to how the actions will provide a positive impact for people with protected characteristics or where you consider improvements could be made?

<table>
<thead>
<tr>
<th>Options</th>
<th>Narrative response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Responses</td>
<td></td>
</tr>
</tbody>
</table>

## Question 16 - We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:

<table>
<thead>
<tr>
<th>Options</th>
<th>Narrative response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Responses</td>
<td></td>
</tr>
</tbody>
</table>

### Overview of Written Response Numbers and Respondent Type

**Table 2 - Breakdown of individuals / organisations that responded.**

<table>
<thead>
<tr>
<th>Individuals</th>
<th>80</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Specified</td>
<td>14</td>
</tr>
</tbody>
</table>
Further detailed analysis of consultation responses key themes

Questions 1 and 2 – ‘improving mental health and well-being across all ages’

There were 191 responses to question one with 142 respondents (74%) saying they agreed that the delivery plan continues to place a strong emphasis on improving mental health and well-being across all ages. The remaining 47 respondents said saying they ‘yes’ partly agreed’ (25%) with only two respondents who disagreed with the approach.

Question 2 was a narrative response and a number of key themes were raised these are summarised below:

• Early intervention/Prevention
While there was widespread agreement that the emphasis on prevention and wellbeing was positive and important, some comments about further considerations were noted. Strong agreement on the focus on early intervention, prevention, resilience and the promotion of good mental well-being, as well as the focus on adverse childhood experiences, to ensure everyone has the best start in life

• Co-morbidities/complex needs
Respondents indicated the need to reflect those who have multiple or complex needs, such as co-occurring substance misuse problems or neurodevelopmental conditions. A few suggested avoiding separate categories or ‘silos’ for each, in line with the fact that individuals can have a combination of challenges that does not fit into boxes.

• Children and Young People/Education
There was strong agreement on having a focus on children and young people, with reference to needing the plan to reflect the needs of children in education settings as well as those not in formal education or training and the ‘missing middle’.

Some of the comments received made reference to perinatal services and suggested that there should be a greater focus on supporting parents / parenting to ensure that the first 1000 days of a child’s life are as positive as possible. Respondents supported the whole school approach (to emotional well-being and resilience) as being positive.
• **Integration and collaboration of services**
Strong agreement on a focus on integration, with a view that more emphasis on transitions between services is required.

• **Prevention/Community Services**
Respondents felt strongly that actions supporting population level well-being were very important. Some respondents felt a stronger emphasis on primary care was required.

• **All Age Focus**
Mental Health is an issue that effects people across all ages and many responses felt that whilst the plan was broad and covered all age ranges, there was a lack of emphasis on older people.

### Questions 3 and 4 – Priority Areas

There were 185 responses to question 3 with 99 respondents (54%) saying they agreed with the approach, 82 respondents saying they ‘partly agreed’ (44%) and only 4 respondents who disagreed with the approach. Again, there was a consensus agreement that early intervention/prevention particularly focusing on children and young people was one of the main themes for further consideration for questions 3 and 4.

Question 4 was a narrative response and a number of key themes were raised these are summarised below:

Additional comments reflected the following themes:

• **Crisis Care/Out of Hours**
There were several comments that strongly welcomed the focus on improving access to crisis care and out of hours support so that there is a 24-hour provision across Wales, in particular for children and young people.

• **Psychological Therapies**
Respondents felt that in order to improve the access, quality and range of psychological therapies there needs to be a provision of more training and accredited courses available to help improve outcomes.

• **Vulnerable Groups/Equalities**
Many respondents felt a stronger emphasis on vulnerable groups was needed, spanning all of the protected characteristics (romany/traveller communities, LBGT and deaf communities) to reduce inequalities for vulnerable groups with mental health needs, ensuring equitable access and provision of mental health services. Ongoing support to veterans was also referenced in some responses.
Questions 5 and 6 – Overarching Work Streams to be prioritised

There were 179 responses to question 5 with 92 respondents (51%) saying they agreed with the approach, 83 respondents saying they ‘partly agreed’ (46%) and only 4 respondents who disagreed with the approach.

Question 6 was a narrative response and a number of key themes were raised these are summarised below:

Although the responses discussed most of the themes that have been listed above, the following themes were also highlighted:

  • Co-Production
Several responses highlighted the need of co-production with service users and carers who have experience of using the mental health service when designing services. Some respondents also highlighted that there was not sufficient reference to carers in the draft plan.

  • Workforce
Many respondents felt more needed to be done to support staff delivering services, to ensure sustainability of the workforce, and to consider training arrangements in Wales.

There were also a number of suggestions to include actions and milestones to increase the number of mental health professionals within the NHS to reduce the waiting lists and to provide proper and thorough training in order to provide the best quality and care of services.

  • Data
There was a strong emphasis on the need to improve how data is used and the importance of recording outcomes with support for the development of the mental health & learning disability core dataset.

Question 7 and 8 – Key actions and milestones

Both questions 7 and 8 were narrative response questions. For question 7, we received 134 responses and for question 8 we received 166 responses. The majority of responses agreed that we had identified key actions and milestones that would need to be delivered as part of this delivery plan. However, there were concerns within some responses that the actions and milestones were not sufficiently innovative.

The majority of comments received for these two questions are included in the text above with a number of additional key points summarised below:
• **Integration and Collaboration of Mental Health Services**

Respondents felt that the delivery plan needed to focus on the development of integrated and/or collaborative working to service delivery rather than continue standalone specialist services. The use of integrated assessments and care planning processes should be supported to further improve access to and the quality of mental health services provision.

• **People in contact with the criminal justice system**

Overall, there was broad support for those in contact with the criminal justice system being identified as a vulnerable group within the delivery plan, recognising the inequalities faced by this group, their poorer mental health outcomes and specific health needs. At the same time, a small number of responses were critical that the focus on widening access was targeted at vulnerable groups and that there needs to be a separate section within the delivery plan for those in contact with the criminal justice system.

• **Data**

Specific reference was made to the importance of collecting data on the health outcomes of vulnerable groups (including those in prison) and those with protected characteristics.

• **Co-occurring mental health and substance misuse issues**

Strengthening action on co-occurring mental health and substance misuse was a common theme to emerge. Respondents to the Welsh Government’s consultation on the Substance Misuse Delivery Plan also raised this.

**Questions 9 and 10 – ‘links with other relevant areas’**

There were 154 responses to question 9 with 68 respondents (44%) stating agreement that the delivery plan links well with other relevant policy and service areas. 81 respondents stating they ‘partly agreed’ (53%) with only 5 respondents who disagreed with the approach.

Question 10 was a narrative response on where this plan linked well with other policy areas and where this could be strengthened. A number of key themes were raised these are summarised below:

• **Links to other relevant policy areas**

Some respondents made specific reference to the fact that the delivery plan in particular fits in well with the Future Generations (Wales) Act 2015 and the Welsh Government’s ‘A Healthier Wales’ agenda. Some of the responses suggested that the delivery plan could be improved through better linkages to other policies and services areas, which include the Nursing Staff Levels (Wales) Act 2016; Sensory Loss services, Third Sector services and the Additional Learning Needs Services. □

**Prevention/early intervention**
Comments received reiterated the importance of prevention and maintaining wellbeing and early intervention. The elements of the plan that focus on prevention of mental health problems are likely to have the greatest impact over the long-term.

- **Access to services**
A number of comments were also received about the importance of improving access to services which it was felt would have the biggest impact for everyone but in particular for children & young people, crisis and out of hours and vulnerable groups.

**Question 11 - which elements of the proposed delivery plan are likely to have the greatest impact?**

Question 11 was a narrative response on which elements of the proposed delivery plan are likely to have the greatest impact. The areas respondents felt would have the greatest impact has already been highlighted several times throughout this document in the summaries of previous questions, however, the following key themes were regularly highlighted as the most likely to have the greatest impact:

- **Prevention/early intervention**
- **Improving access to services (for children and young People, psychological therapies and crisis and out of hours)**
- **Workforce (Better funding and training for healthcare professionals)**

**Questions 12 and 13 – ‘Effects of delivery plan on the Welsh language’**

Both questions 12 and 13 were narrative response questions. For question 12, we received 107 responses and for question 13 we received 82 responses. A number of key themes were raised and these are summarised below:

- **Means of Communication**
Respondents felt that people with mental health have the same diverse language and communication needs as the rest of society, and ensuring good communication between those who plan/deliver services and those who receive them, will enhance the experience of the individual service user or carer.

Many of the comments received highlighted that mental health support/services should be delivered in the language people are comfortable with and reiterated the need to broaden the access of Welsh language services available.

- **Welsh Language**
Of those who responded, the importance of bilingual communication and information was recognised. A small number of responses stated that they had no specific views
on how the delivery plan could be changed to increase the positive effects on opportunities for people to use the Welsh language.

**Questions 14 and 15 – ‘Effects of delivery plan on those with protected characteristics’**

There were 154 responses to question 14 with 60 respondents (39%) stating agreement that the delivery plan links well with other relevant policy and service areas. 79 respondents stating they ‘partly agreed’ (51%) with 15 respondents who disagreed with the approach.

Question 15 was a narrative response on providing further information as to how the actions will provide a positive impact for people with protected characteristics or further improvements.

Respondents raised the need to consider including British Sign Language as well as interpretation services for those with sensory needs or first languages other than English and Welsh.

Respondents also raised the need to consider inequality of access across a number of vulnerable groups.

**Question 16 – Additional Information**

This question enabled respondents to provide any further information they felt had not been specifically addressed in other questions.

Respondents felt more emphasis on transitions (between child and adult services and between multiple teams for those with complex needs) would enhance the plan. Respondents also felt there was not enough focus on carers and families in the draft plan.

There were many comments that suggested that the document was hard to read, including the language used in the plan. Some commented that it was too complex and felt that there should be a plain English version.

**Changes in response to the consultation**

In the final iteration of the plan we have taken on board detailed editing comments received as part of the consultation and have reviewed and amended within the final document as appropriate. This included making explicit reference to older adults in a number of actions. We have also included a glossary within the document to take into account language and we will also publish a plain English version alongside the delivery plan.
Given the number of comments received, responses were themed into groups to identify key areas to strengthen the plan, these are summarised as follows:

- Prevention and protective factors – with a particular emphasis on housing
- Inequalities and social determinants of mental health and well-being
- Primary Care
- Workforce
- Outcomes and data
- Cross sector working

Key structural changes have also been made to reflect comments in the consultation. These include placing a greater emphasis on equality of access and inequalities through the inclusion of new overarching theme. The overarching themes have also been moved to the front of the plan to reinforce that they underpin wider actions. They include:

- Reducing health inequalities, promoting equity of access and supporting the Welsh Language.
- Strengthening co-production and supporting carers.
- Developing a workforce plan in partnership with Health Education and Improvement Wales (HEIW) and Social Care Wales (SCW) to work with third sector, local authority and NHS to support medium and longer-term service improvements and to ensure a stable and sustainable mental health workforce.
- Implementing the core data set to improve consistency, robustness and the focus on outcomes across all-age mental health services.
- Supporting the legislative context - making changes needed to implement known legal reform to the Mental Capacity Act 1983 and developing a strategic response to which changes to the Mental Health (Wales) Measure 2010 and the Mental Health Act 1983 are needed to deliver and drive our/the plan’s policy intentions and outcomes.

**Key changes under themes identified in the consultation, include:**

**Prevention and protective factors – with a particular emphasis on housing:**

- This section has been strengthened significantly with broader links to social determinants and environmental factors. In particular, the links between mental health and housing have been reinforced.

**Inequalities and social determinants of health:**

- This area has been made an overarching priority – ‘Reducing Health Inequalities, Equity of Access and Supporting the Welsh Language’ and includes a broader range of actions including ongoing work from the previous plans (veteran’s support, Diverse Cymru accreditation scheme, asylum seeker
and refugee guidance implementation, Treat me Fairly etc) to retain the focus on implementation.

**Primary Care**

- New actions have been included to reflect cluster milestones to improve support in primary care and to develop a crisis pathway for out of hours and 111 and specific reference is included regarding the mental health pathway in the National Clinical Plan. **Workforce**
  
- A new action has been included to develop a workforce plan for mental health, working with public and third sectors and aligned with the 10 year Health and Social Services Workforce Strategy being developed by Health Education and Improvement Wales. **Outcomes and data**
  
- This section was only partially complete for the consultation due to work being taken forward by KAS to review the current list of outcome measures in the Together for Mental Health Strategy. A full list of indicators is now included with a key indicator for each of the priority areas. We have also strengthened research elements, including links to learning from the mental health transformation projects. **Cross sector working**
  
- New actions have been included to reflect complex needs funding routed through APBs to support co-occurring mental health and substance misuse issues, with a focus on housing. It has also been strengthened with the inclusion of the Early Years Transformation pathfinders across Wales which looks at exploring options for how early years services can be delivered in a more integrated and systematic way. We have also been clearer in where actions are being delivered across multiple agencies, for instance crisis care.

There were also a number of comments received as part of the consultation that were considered out of scope for this piece of work. These fell broadly into the following areas

- Detail which would be included in operational plans, rather than a strategic delivery plan.
- Those, which although impacted on mental health but were considered to be more appropriate fitting in other work streams.

**Annex A**

Academics UK (MHNAUK)
Action on Postpartum Psychosis
Action on Smoking and Health Wales (ASH Wales)
AGE Cymru
All Wales Diabetes Patient Reference Group
All Wales FACTS - Forensic Adolescent Consultation & Treatment Service (Tier 4 Mental Health)
Aneurin Bevan University Health Board
Aneurin Bevan University Health Board Psychology Service
Armed Forces Covenant Regional Liaison Officer
Bangor University
Beat
Betsi Cadwaladr University Health Board
Betsi Cadwaladr University Health Board Child Learning Disability Clinical Psychology Department
Betsi Cadwaladr University Health Board Clinical Psychology & Psychological Therapies
British Society for Mental Health and Deafness
Caerphilly Homes, Caerphilly County Borough Council
Cardiff and Vale University Health Board
Cardiff and Vale Mental Health Forum (for third sector groups with an interest in mental health) Cardiff University
Carers Wales
Ceredigion County Council
Chartered Institute of Housing Cymru
Children in Wales
Children’s Commissioner for Wales
Colegau Cymru
Community Support Services
Conwy County Borough Council – on behalf of the Conwy Vulnerable Peoples Service
Crisis Resolution and Home Treatment Teams NPTH
Cwm Taf Morgannwg Mental Health Partnership Board
Cwm Taf Morgannwg University Health Board
Cymdeithas yr Iaith Gymraeg /The Welsh Language Society;
Cymorth Cymru
Denbighshire County Council
Diverse Cymru
External Affairs Officer, National Autistic Society Cymru
Farmers Union Wales
Forensic mental health services
Gwent Area Planning Board
Hafal
Her Majesty’s Chief Inspector of Education and Training in Wales
Higher Education Funding Council for Wales (HEFCW
HM Prison & Probation Service in Wales
Humans
Hywel Dda University Health Board
Llamau
Meddwl.org/ Model.org"
National Adoption Service for Wales
National Clinical Lead for Diabetes in Wales National Federation of Women’s Institutes-Wales
National Psychological Therapies Management Committee (NPTMC)
North Wales Together for Mental Health Partnership Board
NSPCC Cymru/Wales
NYAS Cymru (National Youth Advocacy Service)
Office of the Police and Crime Commissioner
Office of the Police and Crime Commissioner for Gwent
Older People’s Commissioner for Wales
Parent bereaved by suicide
Place2Be
Play Therapy Services
Police Liaison Unit following responses from Dyfed Powys Police, Gwent Police, North Wales Police and South Wales Police
Powys Association of Voluntary Organisations
ProMo-Cymru
PTHB on behalf of the Live Well – Mental Health Planning and Development Partnership
Public Health Wales
Rhondda Cynon Taf
Merthyr Bridgend.
Royal British Legion
Royal College of Psychiatrists
Royal Pharmaceutical Society in Wales
Samaritans Cymru
Sign Health Social Care Wales.
South Denbigshire Community Partnership
Swansea Bay Health Board
Swansea Council
Swansea Council (Social Services)
Swansea University
Tai Pawb
The Mental Health Foundation
THE NATIONAL MENTAL HEALTH FORUM
The Welsh NHS Confederation
Together for Children and Young People (T4CYP) - Programme Manager
UCAC (Undeb Cenedlaethol Athrawon Cymru)
United Welsh
University of South Wales
Vale of Glamorgan Council
Veterans' NHS Wales
Wales Alliance for Mental Health
Welsh Ambulance Service
Welsh Local Government Association
West Wales Action for Mental Health Wrexham County Borough Council
Y Fenter C.P.I. | The Venture I.C.C.
Youth Justice Board (YJB)