Lesley Griffiths AC / AM Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services



Eich cyf/Your ref P-04-400 Ein cyf/Our ref LG/00304/13

William Powell AM Chair Petitions Committee

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Dear Bill,

Thank you for your letter of 23 January regarding an update on the work my officials are undertaking with NICE to enable to adoption of the NICE standard in Wales.

I anticipate the new Service Level Agreement with NICE will be formally signed in April, which will coincide with NICE being re-established as an Arms Length Non Departmental Public Body. I expect the NHS in Wales to take full account of all clinical guidance published by NICE when commissioning and delivering services, as it is based on the best available evidence. *Doing Well, Doing Better – Standards for Health Services in Wales'* also requires organisations to take account of NICE's clinical guidance.

NICE's Quality Standards, including those for Mental Health, reinforce recommendations made in previous NICE guidance and the NHS should already be taking account of them in the routine delivery of services to their patients.

In my previous letter I described the steps being taken to ensure that service users have effective care plans. The statutory requirement for all service users receiving secondary mental health care to have a Care and Treatment plan continues to be robustly monitored. Local Health Boards are required to provide regular updates on their compliance with the requirements of both the Mental Health (Wales) Measure 2010 (the Measure) and the associated Code of Practice. The University of Lincoln has provided additional training and produced web based resources in outcome and recovery focussed care planning to support this process.

There is a legal duty to review sections of the Measure and as part of this duty, I am commissioning independent research to consider, service user, carer and practitioner experience of all parts of the Measure including Care and Treatment Planning. Hafal, one of our third sector partners, are providing training directly to service users. Detailed work is also being undertaken with service users and the third sector to develop outcome measures through a service users lens and this will have the service users experience at its heart.

Part 4 of the Measure expands the provision of Independent Mental Health Advocates (IMHA) in Wales and we have invested £2 million in this service. As your petitioner states, this includes patients receiving treatment for their mental disorder in any hospital setting. It also includes those subject to the 1983 Mental Health Act who are living in the community, for example those subject to Community Treatment Orders. The IMHA service is also being monitored as part of the duty to review process.

The *Together for Mental Health* Delivery Plan (2012-16) sets out evidence-based outcomes and measurements and the responsibilities of statutory bodies to improve the service experience and prioritise safe, dignified, evidence-based interventions. As stated in my previous letter, the National Programme Board will keep me informed of developments and progress.

The improvement of mental health services remains a priority, and this continues to be demonstrated by commitments around mental health in our *Programme for Government*. Mental health accounts for the largest single area of health expenditure in Wales at approximately 12% of the NHS budget. Our continued commitment to mental health is demonstrated by ring-fenced funding (the minimum LHBs should spend on mental health services) which has increased year-on-year from £387.5 million in 2008-09 to £577 million in 2012-13.

I hope this information will be useful to the Committee.

Lesley Griffiths AC / AM

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