

STORY OF CHANGE TEMPLATE

Reporting Period	End of Quarter 2 - Financial Year 2022-2023
Strategic Partnership	West Glamorgan Partnership
Programme Name	Emotional Wellbeing & Mental Health Programme
Programme Reference	

Programme Overview

The Emotional Wellbeing and Mental Health (EWMH) programme was re-launched in April 2022. The **vision** for this programme is that **people with emotional wellbeing and mental health problems can access the services and support where, when and how they need it across health and social care across the region.** This vision has been created by the EWMH Board based on the key priorities of the Regional Partnership Board in relation to this cohort of the population.

The EWMH Programme is our mechanism for delivering regional transformation of emotional wellbeing and mental health, providing a clear direction of travel for partnership working and enhancing integrated services across health and social care that meet the needs of a wide range of individuals. The main **aims** of the programme can be defined as:

- 1) **To establish a regional strategic approach to improving the emotional wellbeing and mental health of our population.**
- 2) **To develop a consistent approach to how we deliver mental health services across the partnership.**
- 3) **To develop resilient communities who can access the right support at the right time.**
- 4) **To implement the transformational Strategy which sets out to lead to better outcomes for people with or at risk of mental health issues and illnesses.**

This last aim covers a wide range of transformational activities across services in health and social care within our partnership. We will implement these activities through a suite of projects and work packages that focus on achieving specific objectives that contribute to this important aim. Some of these projects will be delivered through specific funding streams such as the Regional Integration Fund.

To define this programme in measurable terms (so that we can measure how we are progressing in achieving the aims above) we will reference the following objectives throughout the life of the programme and its projects/work packages:

Objectives	
1	To define, plan and deliver a range of projects that will transform, modernise or improve mental health services in West Glamorgan.
2	To co-produce a Regional Mental Health Strategy which defines the long-term ambition for improving the emotional well-being and mental health of the population of West Glamorgan.
3	To implement the national strategies, policies and recommendations for mental health in the West Glamorgan region, including the findings of consultations and reports published by Welsh Government as well as national mental health organisations.
4	To co-ordinate common activities across the partnership that target people who have or are at risk of developing mental health issues, including communications, training, sharing of best practice and development of information, advice and assistance (IAA) resources.

5	To develop a regional approach to how mental health support services are commissioned, designed, and implemented across the partnership, including regional commissioning models and how statutory partners commission services with third sector organisations.
6	To explore the capital investment opportunities that can improve our regional capacity and capability to support the mental health needs of our population, including integrated community hubs and provision of suitable accommodation-based solutions.

The following list represents the initial definition of what is considered within the scope for this programme:

- 1) People who experience, or are at risk of developing, mental health problems or issues.
- 2) People who have been diagnosed with, or are at risk of developing or deteriorating, mental health conditions or illness.
- 3) Mental health services provided by statutory and voluntary sectors.
- 4) Mental health services for adults (including older adults).
- 5) Mental health issues relating to isolation (e.g., loneliness).
- 6) Mental health issues relating to issues with substance misuse.

The following list represents the initial definition of what is considered **not** within the scope for this programme:

- 1) Mental health services for children and young people – *this will be taken forward under the Children & Young People Programme*
- 2) Mental health issues relating to transition into adulthood (e.g., young people who move between CYP services and adult services due to their age) - *this will be taken forward under the Children & Young People Programme*
- 3) Emotional Wellbeing needs of people with a Learning Disability – *this will be taken forward by the Emotional Wellbeing & Learning Disability Programme*

At this time, there are some items of scope that are unclear or require further consideration as to whether they should be in scope or out of scope, including:

- 4) Mental health services provided by private sector – *although there is nothing preventing private organisations from being involved in this transformation journey, it is not our intention to direct investment into private organisations to deliver health and care services directly to individuals (e.g., independent care home providers, private Domiciliary Care providers, etc.).*

Some transformational changes will be locally delivered under the governance of the relevant partner organisations but due to their impact on the wider regional programme, will be reported against through this programme. In these cases, delivery of the change will remain the responsibility of the partner but reporting on the impact of the change will come under the reporting of this programme.

By delivering the actions required to achieve our programme aims and objectives, we intend to deliver the following outcomes for the people of West Glamorgan across the programme:

Population Outcomes	
1	All people have access to information, advice and assistance about mental health and wellbeing resources.
2	All people have access to primary mental health services in their area based on their assessed need.
3	All people have access to secondary mental health services in their area based on their assessed need.

4	All people have a single point of contact in relation to enquiries about local mental health services.
5	All people can access information signposting them to mental health support in their communities.
6	All people who are in a mental health crisis can be referred to the Sanctuary Service for support.
7	All people who require psychological therapy receive the support they need.
8	All people who use mental health services receive a person-centred response from their service providers.

We also know from our programme planning that there are a number of important service-related outcomes that we wish to achieve (i.e., better outcomes for the partner organisations who support people with their mental health):

Business Outcomes	
1	All mental health services are commissioned with a flexible contract arrangement designed to meet unplanned changes to service provision.
2	All mental health services are commissioned with clearly defined outcomes.
3	All mental health services meet the principles and requirements of the Together for Mental Health strategy.
4	Our services are consistent in the advice and guidance provided to communities regarding support for mental health.
5	Our services are migrated to provide more services in local areas and more integration between services.
6	Our services work collaboratively to share access to specialist resources where it is efficient and effective to do so.

A predominant focus for this year continues to the delivery of the programme via the following workstreams which all report to the Emotional Wellbeing & Mental Health Board.

No.	Workstream Title	SENIOR LEAD
1	<p>Single Point of Access [SPOA] – This workstream will implement a Single Point of Access for direct people to access mental health services, including the alignment with the national 111 Press 2 service being implemented by Public Health Wales. Additionally, a digital platform will be developed to host information on services available across the region and advice for the public.</p>	Malcolm Jones
2	<p>Dementia and Older Person’s Mental Health [DOPMH] - This Workstream will define a strategic approach to transforming mental health services for older people with a particular focus on dementia (all ages). This will include reviewing pathways and service standards to implement changes that make a difference for people, their families and carers.</p> <p>In relation specifically to dementia, this will include the creation of a Regional Dementia Strategy which will underpin our efforts to introduce the All-Wales</p>	Vacant

	Dementia Care Pathway of Standards. It will be delivered through subgroups which feed into the national groups to implement the tasks to achieve this strategy. These developments are reported in a separate Story for Change report	
3	Modernising Mental Health Support Services (Strategy Development) - This workstream will develop existing mental health support services to be more responsive to the changing needs of the population, developing greater independence and resilience of individuals. This will include transforming the planning and commissioning of mental health support services.	Vacant
4	Dual Diagnosis Strategy - This workstream will co-produce a regional strategy and action plan for co-ordinating service provision for people with both mental health and substance misuse issues in West Glamorgan. It will be a joint project in partnership with the Area Planning Board [APB] which is responsible for the substance misuse element of this work.	Richard Maggs

Each workstream has been established and is being delivered as a part of the programme governance.

A key action for the Programme, as part of the workstream ‘**Modernising Mental Health Services**’, has been to develop a new Emotional Wellbeing & Mental Health Strategy to redefine the direction of travel for services across the West Glamorgan region. The new Strategy has been completed and was ratified at Regional Partnership Board in August 2023. The key message from the strategy is that we must strive to deliver more preventative solutions which will support a reduced focus on the delivery of statutory partners services. The Strategy strives to develop community resilience, building support services around people, within communities which ‘hold on rather than refer on’. The strategy has been built upon feedback received during engagement sessions with wider public including unpaid carers, mental health service users and those with lived experience of poor mental health and emotional wellbeing is that support received or offered by primary care was either offered too late or not adequate to individual needs. It has been highlighted that a person-centred approach and non-medical solutions are what residents would welcome to see. It is anticipated that as the implementation plan is developed workstreams will be set up to focus on delivering the key themes within the strategy. These Key themes are: -

1. **Joining it up** – developing joint commissioning models, multi-agency teams, pooled budgets, building multi-agency services around the community with shared priorities and skills, developing a ‘chambers model’ to deliver services to communities.
2. **Cementing it Together** – developing what is already in communities which support existing community anchor structures. This workstream would aim to understand what is already on offer and enhance what is working well and ensure that communities are able to develop their emotional wellbeing and mental health resilience.
3. **Filling in the Gaps** – targeted projects which seek to address specific needs which cannot be met by generic, lower tier services or enabling existing statutory services to be delivered in a more transformative way.

We can look at the experiences of people with mental health problems as being part of a journey or person-centred pathway which covers the following four stages:

1. Prevention & Early Intervention
2. Assessment & Diagnosis
3. Treatment & Care
4. Discharge & Ongoing Support

Depending on what stage of the journey, an individual would need different types of help and support. For example, with a focus on prevention, an individual may need help to regulate their emotional well-being

and improve their positive attitudes and behaviours. However, further down the path, the help that the individual needs may change to include solutions like acute treatment and medication. Embedding this model and the four key stages in the person-centred pathway into our thinking will help us to deliver the right changes at the right time in the right way. Therefore, we have aligned funded projects to the following headings, in order to mirror the pathway and the vision of the new Strategy:

- 1. Building Resilient Communities** - raising community awareness and support for those experiencing low level emotional wellbeing and mental health, as well as improving social value and building supportive, resilient communities. Supporting people to live as well as possible for as long as possible, receiving the right support and the right time. Offering prevention and early intervention solutions.
- 2. Providing Community Care & Support** – ensuring the correct level of seamless wraparound support is available at home or as close to home as possible.
- 3. Specialised/ Targeted Services** – services which offer specific support for specific issues such as Eating Disorder, Bereavement or Near Miss Suicide.

As the new strategy develops towards implementation, we will be undertaking a mapping exercise to identify what is on offer across the region (this mapping will include statutory and non-statutory services) and identify where there are gaps in demand v capacity. Therefore, over the forthcoming years where we target funded services may alter.

There are **13 RIF Projects** run by different Third Sector organisations across our region. These schemes all support the Regional Partnership’s Strategic Priority ‘**Transforming Mental Health Services**’ and Model of Care 1 & 3; ‘**Community Based Care – Prevention & Community Coordination**’ and ‘**Promoting Good Emotional Health & Wellbeing**’.

The total investment of Mental Health Projects is £877,599.00. 13 of the 24 Projects were **funded by the RIF totalling £485,552.00**, 11 were funded by the Mental Health Improvement Funding (MHIF) totalling **£392,047.00**.

A total of **1,387** individuals have been supported from April to September 2023 (RIF funded project only).

Please refer to attached infographics which provides a summary of the performance measures for all the funded projects as part of the programme.

Priority Population Group

The population group supported by this programme are all adults (including older adults) across the region with low to moderate mental health issues. The Programme affects people living with Dementia, Learning Disabilities, and unpaid Carers although specific actions around these cohorts may be delivered via the specific programmes. Adults with emotional health and well-being needs are also supported by this Programme.

This Programme works alongside the West Glamorgan Carers Partnership Programme and Emotional Wellbeing & Learning Disabilities Programme. This Programme also links with the Children & Young People’s Programme – Emotional Health & Wellbeing Planning Group.

Delivery Partners

The programme brings together statutory services such as Swansea Bay University Health Board, Swansea Council and Neath Port Talbot Council with non-statutory services, people with lived experience and carers across the region.

The Emotional Wellbeing and Mental Health Programme Board, Workstreams and Task & Finish groups all have Chairs/ Leads from partner organisations and membership reflects the partnership working and engagement taking place. We endeavour to include people with Lived Experience and carers in all levels of our governance as we believe their voices need to be integral to the work we deliver.

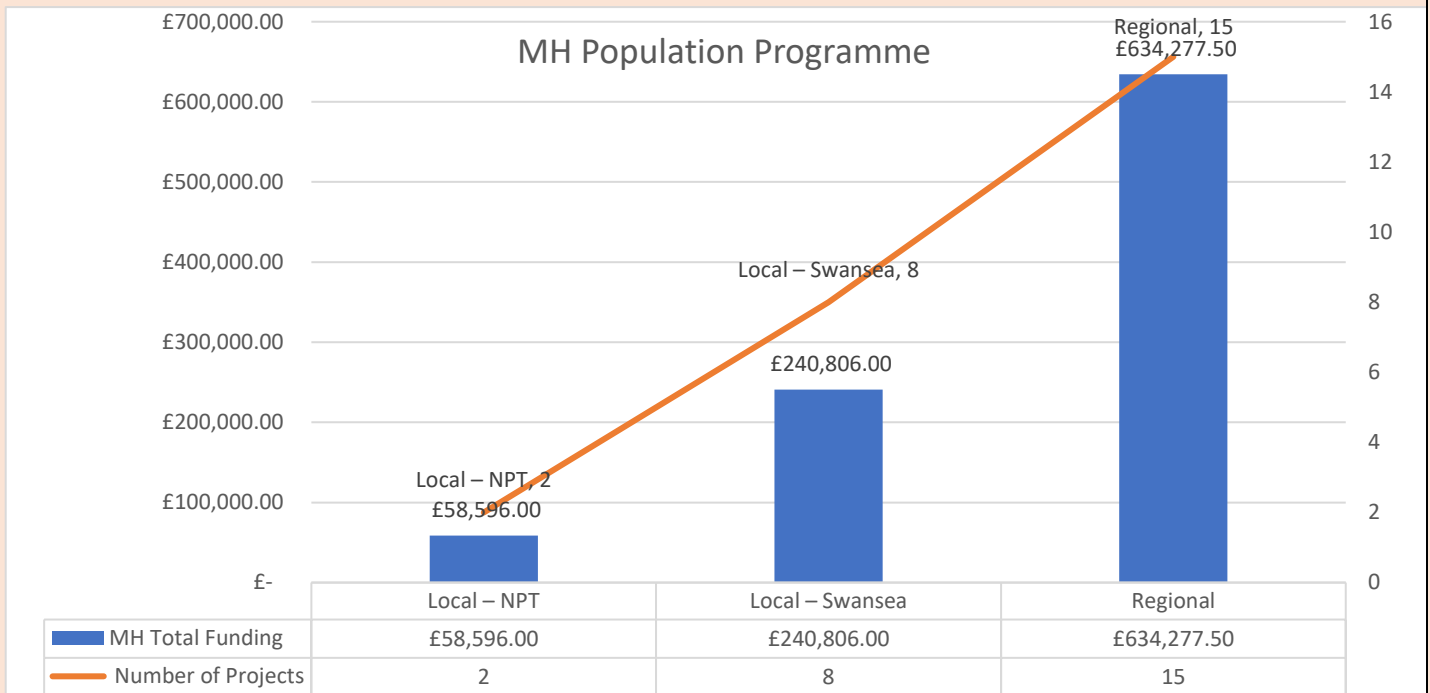
We promote partnership working, and independent working where required.

Funding Utilisation

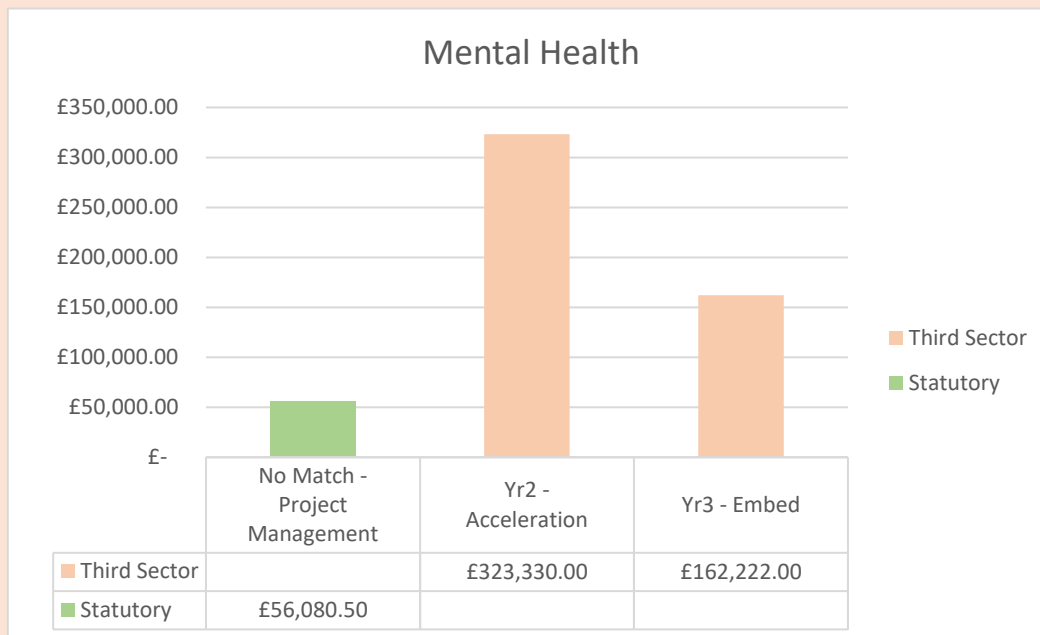
The RIF funding has been amalgamated with the Health Board mental health improvement funding in order to ensure a wider reach for mental health provision across the region, as follows:

RIF MH Funding	£455,522
Health Board MH service improvement funding	£392,077
Total MH Funding 23-24	£877,599

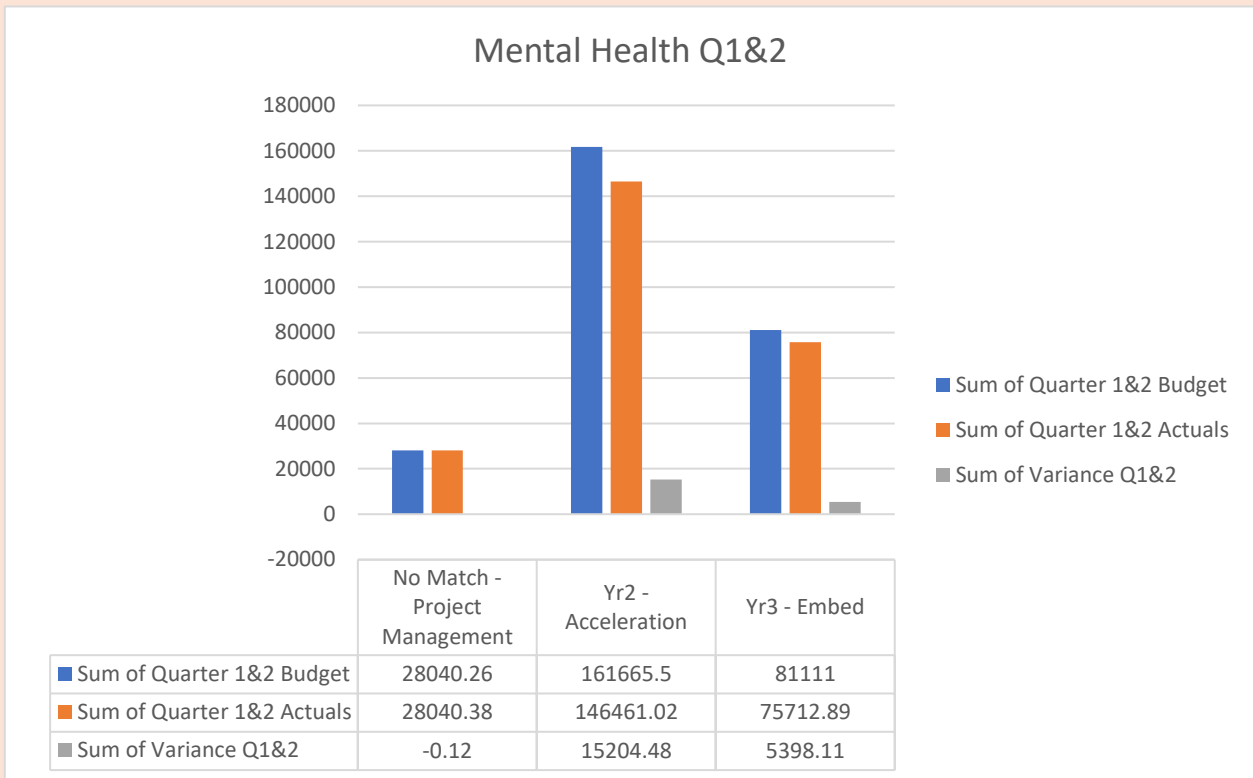
The below chart depicts the number of local and regional projects and the RIF and Health Board Service Improvement funding allocated in 2023-24. In summary there are 25 third sector projects, 15 regional projects, 8 local Swansea projects and 2 local NPT projects.



Mental Health RIF Allocations 23-24 - (excluding Health Board MH Service Improvement Funding)

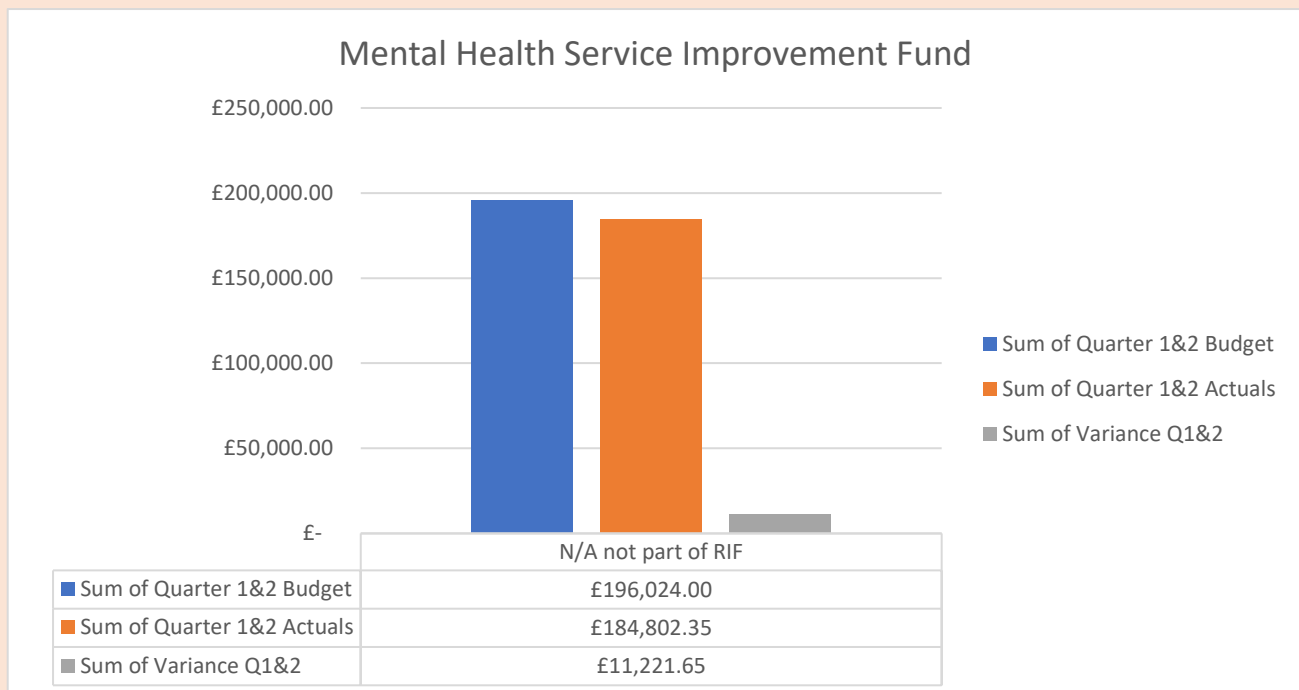


RIF Budget/Spend Position at end of Quarter 2 - (excluding Health Board MH Service Improvement Funding)



For the RIF funding in quarter 1 and 2, £250,214 has been spent out of the projected budget of £270,816.

For the Health MH service improvement funding in quarter 1 and 2, £184,802 has been spent out of the projected budget of £196,024.



Assessment of Delivery

The new EWMH Strategy is currently at pre- implementation stage. We are in the process of facilitating an engagement roadshow across the region to share the Strategy and its Key Themes with stakeholders in order to generate support and interest in how this new and innovative strategy will alter the way emotional wellbeing mental health services are offered. As we progress in forthcoming years there will be a shift in the

way we fund and deliver services to ensure we are building resilient communities, that offer support around the citizen which then enables statutory organisations to focus on the tier 3 – 4 services.

The **Single Point of Access Workstream** is responsible for developing and improving access to existing services. This was established prior to the launch of the new strategy but aligns with its principles. The following two projects are being delivered as part of this workstream:

- **Call 111 Press option 2:** This project delivers a single point of access for mental health assessment for both service users and professionals. There are two phone lines, one, which can be access by the public, by those seeking mental health support for themselves and the second phone line is open to the professional's requiring information and advice. At the point of contact a professional triage takes place and the caller is signposted to other services/ organisations and given information, advice, and assistance. There is a view to progress this to service to a point where a caller is referred directly into service rather than signposted.
- **Sorted:Supported:** is a website, which aims to provide 'easy to find' information on common mental and emotional health issues. This website also includes fact sheets which contain information on symptoms, behaviours and different mental health conditions. This is a digital self-help platform which has been developed regionally, led by Swansea Bay University Health Board professionals and includes local, regional and national resources. It is aimed at the public and professionals. It is anticipated at this will be launched during this financial year.

The **Dual Diagnosis Workstream** has recently published a regional Dual Diagnosis Strategy aimed at those with dual diagnosis of co-occurring mental health and substance use. The strategy has been agreed on in beginning of the year and the work on the implementation work stated. A detailed action plan has been developed which is being implemented by two subgroups:

- **Subgroup 1: Training & Workforce:** Focuses on developing a training pack for workforce supporting those with co-occurring needs all across partner agencies. To map and gap current training needs professionals from each team has been involved in provided information and discussion. Further on a survey activity took place to gather feedback and comments from wider workforce members. All comments have been collated and analysed, which resulted in preparing a recommendation document. Currently the group is working on preparing a training pack, which will be share with the Steering Group for approval and comments.
- **Subgroup 2: Pathways and Model of Care:** Focuses on developing access to both mental health and substance use services for those with co-occurring needs. The main issue which has been raised is barrier in accessing mental health services if a service user is actively using substances. This subgroup has developed an understanding of the current situation, mapped the gaps across all partner organisations and based on this data a new pathway has been drafted. The proposed pathway is being discussed currently within the Dual Diagnosis Steering Group and further changes are being applied to this model. Once agreed it will be presented to Western Bay Area Planning Board and to Emotional Wellbeing and Mental Health Board for approval and final sign off before it will be taken through the Regional Partnership governance process.

The **Dementia and Older People's Mental Health Workstream** is being reported in a different Story of Change report.

Key Enablers

Integrated planning and commissioning

The supporting programme, Commissioning Processes for Complex Care ensures partners work together to take forward jointly agreed priorities. This commitment is informed by the findings in the Regional Market Stability Report for 2022.

Technology and Digital Solutions

This work sits under the Digital and Data Programme. One of the aims will be to consider technological developments to enable people to live within their own homes with increased independence.

Promoting the Social Value Sector

A number of RIF projects are from third sector organisations. Given the strategy is focussed on prevention, investing in the voluntary sector will be crucial. The approach outlined in the MH strategy is around how we join up the third sector services within our communities, together with the statutory services that they are supporting. There is a risk however in relation to the current financial pressures. Inflation and the cost-of-living crisis are impacting voluntary organisations that support the most vulnerable in society. Partners who need to make difficult decisions in order to balance the budgets, could result in local funding being cut which will impact on the overall service offer across the region. This will then impact on those service users who rely on these essential community services, which could result in escalating needs, which in turn impacts on the statutory services. At the same time some of these voluntary organisations are seeing record high service demand together with escalating complexity of service user needs. This will need to be considered as part of the strategy going forward.

Integrated Community Hub

The development of Hub's is being led by the Regional Strategic Capital Group.

Workforce Development and Integration

One of the supporting programmes is Workforce.

Successes and Progress

1. The Programme developed and launched the **Emotional and Mental Wellbeing Strategy** in July 2023. This is an innovative and ambitious strategy which will look to completely transform the way tier 0/1 services are delivered across the region. This Strategy will see:
 - A shift from illness to wellbeing by building resilient communities, which are armed with the right tools and knowledge to maintain good emotional wellbeing.
 - A shift in focus from treating people with developed conditions to prevention and early intervention.
 - Building stronger communities which harness dynamic solutions which build on everybody's strengths, holding on to people and treating them in the community rather than referring on to isolated services.

We are currently in the pre-implementation phase, which involves facilitating an engagement roadshow which is open to (at this stage) paid professionals working across the region. The aim of the roadshow is to make as many people aware of the new Strategy as possible and start to think about how the Strategy's implementation will affect services, services users and staff. At the first engagement roadshow in November 2023 the Strategy was well received with attendees engaging in discussions around the key themes. Further sessions have been diarised with a view to pull this together in a day-long event in March to take a deeper dive into the key themes, the Strategies priorities and implementation plan which will be open to all partner agencies, members of the wider public, service users, those with lived experiences, carers and 3rd sector organisations.

2. The digital platform **Sorted:Supported** has been developed and is anticipated to be launched in April 2024. This web site includes specialist information written in collaboration with professionals from Swansea Bay University Health Board, as well as tier 0 information and resources sourced from partners within the 3rd sector. The content has been purposefully curated to include information about particular issues which can exacerbate or cause poor wellbeing, symptoms people can experience and how these can be managed as well, as local/national services and self-help materials. All of which aim to support adults to gain a better understand of how to identify, manage, and sustain their emotional health and mental wellbeing, as well as avenues to access more specialist intervention. This platform has been modelled on the TidyMinds website, which has been developed by the Children & Young People Programme and has been shared by Welsh Government as a best practice example. Sorted;

Supported has received a considerable amount of support from professionals and citizens alike and aligns to the new Emotional Wellbeing & Mental Health Strategy.

During the recent RIF evaluation panels one of the consistent themes that was highlighted by panel members was around the promotion and communication of some the RIF projects, some panel members felt that demand for the RIF projects (and other services and projects) would be much higher if they were better advertised. This digital platform will help to address this point.

If the partnership wants to move towards a more preventative approach to mental health, then visibility of all the voluntary sector schemes is vital in order to ensure people are able to access these vital services.

The information held on the website can support the mapping work which will be required to support the implementation of the Strategy.

3. Launching **Single Point of Access** service “call 111 choose option 2”, which offers triage service and advice around emotional wellbeing and mental health. This service hosts two lines, which one is open to the public with easy access to information and advice around emotional and mental wellbeing. Second line is open for professionals to allow better triage process and signposting to the right services to ensure the needs of a service user are being met.

Challenges

1. **Short Termism Funding** – feedback we have been receiving from the 3rd sector is that many organisations are facing short term funding contracts which is leaving them unable to plan for the longer term. It is difficult to attract the right people into posts, meeting the cost-of-living crisis needs and being able to deliver transformational change against an insecure funding landscape is a significant challenge. This is leaving the 3rd sector in a precarious position, with many organisations facing serious difficulties. The risk is that if the 3rd sector should collapse the resulting impact on services users would be catastrophic, leaving many without support, and leaving statutory services unsupported.
2. Previous lack of Strategy however this has been addressed and going forward the new Strategy will provide strategic direction
3. **Communication** - we have faced some challenges in communicating the services which are on offer across the region to provide support to those experiencing poor emotional and mental health. Services do a huge amount of work in attempting to reach those at the point of need, but often services are still not reaching the right people. The development of Soretd:Supported will assist in improving this issue however there is more to be done, and we

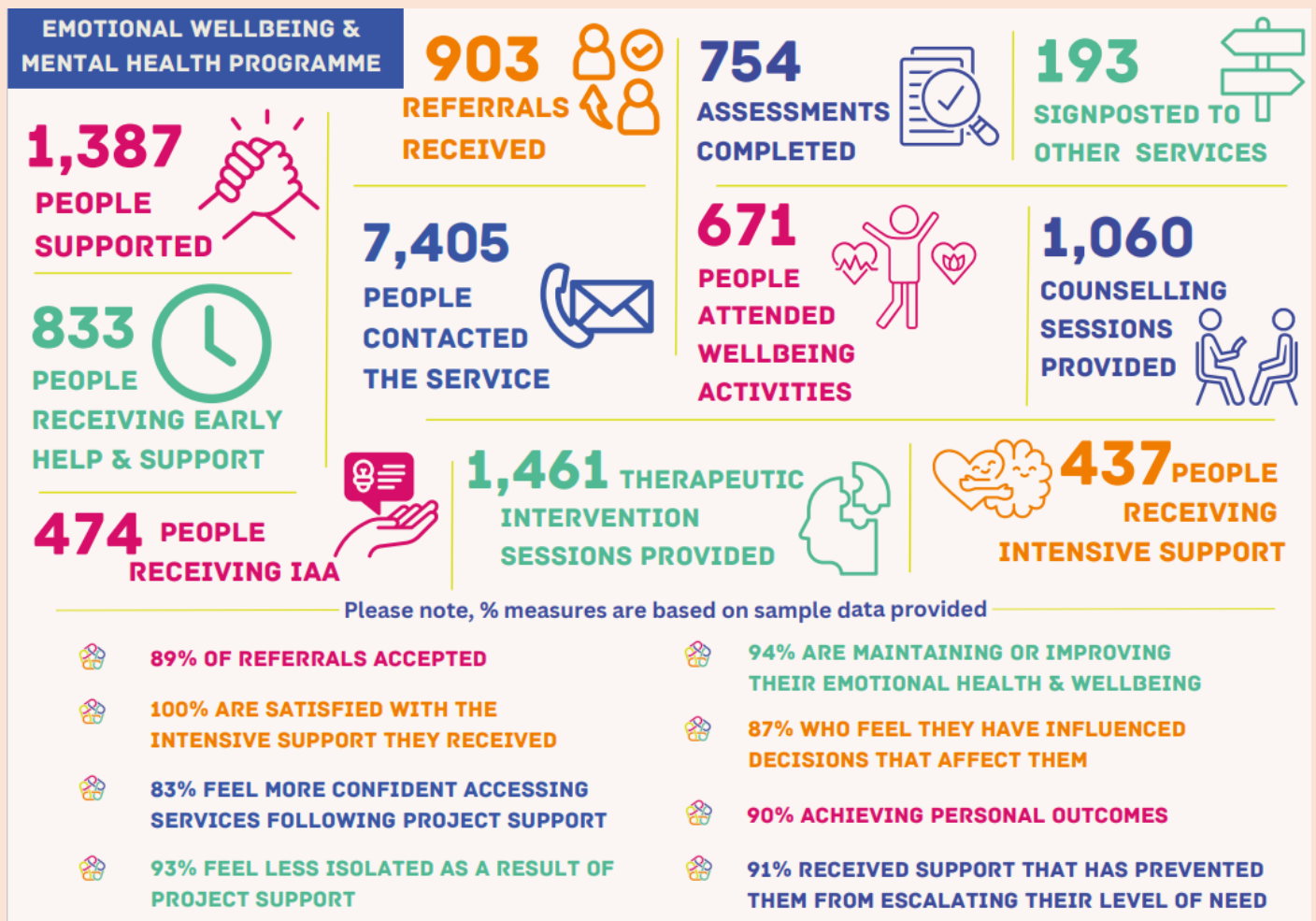
Quantitative Measures

There are **13 projects** delivered by Statutory and Third Sector organisations across the region which have supported approximately **1,387** people. These projects have been grouped into **2 themes** which support the **Models of Care ‘Placed Based Care – ‘Prevention and Community Coordination’ and ‘Promoting Good Emotional Health and Wellbeing’** as outlined below (please note that many of the Projects can be aligned to more than one theme and all are aligned to both Models of Care, for the purpose of this report we have placed the projects where they fit best). We have aligned the funded projects to the following headings, in order to mirror the pathway and the vision of the new Strategy:

1. **Building Resilient Communities** - raising community awareness and support for those experiencing low level emotional wellbeing and mental health, as well as improving social value and building supportive, resilient communities. Supporting people to live as well as possible for as long as possible, receiving the right support and the right time. Offering prevention and early intervention solutions.
2. **Providing Community Care & Support** – ensuring the correct level of seamless wraparound support is available at home or as close to home as possible.
3. **Specialised/ Targeted Services** – services which offer specific support for specific issues such as Eating Disorder, Bereavement or Near Miss Suicide.

The total investment of all Emotional and Mental Wellbeing Projects for the **whole financial year** £485,552.00.

Please refer to attached infographics which provides a summary of the performance measures for all the projects.



Theme 1 – Building Resilient Communities

A key priority for the region is to support those experiencing and those, who are at risk of developing poor emotional and mental wellbeing. However, the region, as part of the new Strategy, is committed to providing the right support at the right time within communities which in turn will not only develop stronger, more resilient communities, but will also alleviate the pressure on statutory services freeing up resources to support those in greater need.

To achieve this, there needs to be a complete change in how we provide support to people across the region. There needs to be a shift in focus from medicalisation to wellbeing. The region therefore promotes options available for those struggling with their emotional and mental wellbeing and their cares, and they need to be fully aware of the options available to them and empowered to make decisions about their lives at every stage of their journey. Increasing awareness and improving access to low-level support services, making sure that IAA is more widely available and accessible is a key. **3 RIF funded projects provide** support to people living across the region, to remain as well as possible for as long as possible. These 3 projects have supported **126** individuals so far in this financial year, **85** people have been signposted to other services and **100%** of people who were surveyed stated that they received the right support and reported that this prevented them from escalating their level of need.

The “**BAME Mental Health Awareness**” project provides the much-needed support for adults living with or experiencing border line of mental health issues as a result of the impact of COVID19, and those whose mental health has worsened due to COVID19. The objective of this project is to improve understanding of

mental health issues among BAME communities/individuals; increase knowledge of trigger points and how to manage them appropriately at home and identify episodes of mental health and develop strategies and skills to address them immediately instead of ignoring the signs and thereafter needing NHS services later in life. This project has delivered:

- **45** individuals supported.
- **32** individuals attending wellbeing support sessions.
- **22** adults received therapeutic intervention.
- **100%** of all attending wellbeing and counselling sessions reported better understanding of MH and where to search for support.

Theme 2 – Providing Community Care & Support

Another key priority for our region, which is embedded in the new Strategy is Providing Community Care & Support. The aim of projects grouped under this theme are to support existing structures already present within communities and develop services further. Promoting community support services which provide support to people from within the community. There are **8 projects** under this theme, which supported **1,216** people in this financial year, receiving **793** referrals and making **6,817** contacts. **402** individuals received early help. A total of **570** assessments have been completed. **569** individuals attended wellbeing activities and **772** people access counselling sessions. **645** people out of 690, who completed a survey, report feeling less isolated, **584** maintaining improving emotional health and **596** of those who received support and took part in the survey report that support received has prevented them from escalating their level of need.

The '**Tier 0 Mental Health Support and Wellbeing Intervention**' is an example of a project which delivers within this theme. This project aims to provide a preventative, recovery-based approach to supporting adults with early signs of developing emotional, psychological and/or social difficulties. The aim is to support individuals to develop a range of holistic strategies to reduce the need for more specialist mental health support. The project delivers individual/group counselling sessions, facilitates coping skills training, holds a weekly men's mental health support group, and also holds a walking group. During this period this project has delivered:

- **472** Counselling sessions
- **1326** contacts made.
- **285** people attended wellbeing sessions.
- **400** new referrals
- **380** individuals received intensive support.
- **361** individuals' report maintaining and improving emotional health.

One specific project within this theme is the '**You Matter 2**' project. This project aims to promote positive mental health and prevent mental ill-health for ethnic Chinese residents coming out of the pandemic, focusing on older people with complex needs and adults experiencing poor mental health. The project organises regular social and physical activities to promote positive well-being. The project produces bilingual information to raise awareness of common mental health issues, such as depression, anxiety and promote self-help techniques. Group and 1:1 sessions are offered. The project has delivered:

- **3480** contacts made.
- **93** individuals supported.
- **60** individuals attended wellbeing activity sessions.

The '**You Matter 2**' project has worked closely with Swansea Council Ageing Well, and Action for Elders. The Dementia Hwb and Care & Repair Cymru have attended awareness raising sessions to enable people to live

independently. **100%** of the service users completing a survey reported a feeling less isolated as a result of receiving this service.

Theme 3 - Specialised Targeted Support

The third theme 'Specialised Targeted Support' captures a set of projects which are aimed at targeting specialised areas, or specific gaps across the region. There are currently 2 projects grouped under this theme. One project has been established to support those at risk of becoming homeless and the other project supports the BAME community, who either are dealing with loss and bereavement or one of their family members is recognised as missing. The total investment for those projects is **£86,563**, with **53** individuals supported and **40** new referrals received. **170** counselling sessions have been provided.

The **Llamau Counselling** project aims to proactively identify and address emotional well-being issues amongst homeless young people at the earliest stage, reducing both existing and emerging inequalities for them and the demand on already stretched statutory services. This project has provided:

- Counselling to **12** young people
- **17** new referrals received.
- **98** counselling sessions
- **75%** of young people reported achieving their personal goals since their first counselling session.

Another project "**Ethnic Minorities Bereavement Support**" provides support to BAME members of the community, also in their native language around loss and bereavement support. Further support is being offered in form of group or individual counselling sessions, via peer support or friendship groups. If an individual will require specialist support, this will be referred accordingly. This project has delivered:

- **41** individuals supported.
- **23** new referrals received.
- **480** contacts made.
- **72** individuals received counselling sessions.
- **100%** of individuals supported reported that the service they received prevented their needs from escalating.

Qualitative Indicators

What we did and why (Input and Outputs in the last 6 months)

- 1. Building Resilient Communities** - raising community awareness and support for those experiencing low level emotional wellbeing and mental health, as well as improving social value and building supportive, resilient communities. Supporting people to live as well as possible for as long as possible, receiving the right support and the right time. Offering prevention and early intervention solutions.
- 2. Providing Community Care & Support** – ensuring the correct level of seamless wraparound support is available at home or as close to home as possible. Delivering services which support community anchor structures in communities and
- 3. Specialised/ Targeted Services** – services which offer specific support for specific issues such as Eating Disorder, Bereavement or Near Miss Suicide.

Theme 1 – Building Resilient Communities:

One of the regions very successful initiatives in reducing barriers to accessing mental health support is the "**West Glamorgan Mental Health Hub**" project which is run by the Jac Lewis Foundation. This project offers a safe place

within the Hub to those experiencing poor emotional and mental wellbeing, this could include issues like anxiety, depression, suicidal ideation, self-harm, or neurodiversity. The Hub is open every Friday and offers support and advice of partner agencies from all across the region including more than 20 organisations of which some examples are: Citizens advice bureau, drug and alcohol services, local area co-ordinators, community groups, safeguarding team from Swansea Council and many more. Apart of support around emotional and mental wellbeing the Hub offers practical support, lunch and some additional activities like art and wellbeing workshops or wellbeing training courses.

This online article provides more information about the reasons for starting work on the project and what different this has made to the co-founders and people supported. For more information, please open the link below:

[World Mental Health Day 2023: Swansea City drop-in centre helping mental health charity - BBC Sport](#)

Another project “**Swansea Carers Mental Health and Wellbeing Support**” is designed to help those with caring responsibilities, who are looking after their family members, spouses, neighbours, or friends. This project provides support by understanding the complexity of each individual and signposting them in the right directions, whether this will be for welfare check/benefits, supporting their caring needs, addressing issues with housing or their mental, physical health or emotional wellbeing. During recent COVID19 pandemic it has become even more visible that carers are struggling not only with their caring role but more often with their own mental health. The lockdown made them feel more isolated and not able to access help and support they need. Results of the Carers UK report “Caring behind closed doors” reveals that 64% of carers said that their mental health has worsened, over 50% felt overwhelmed and were worried they burn out, 87% were worried about what will happen to the person or people they care for if they, as their carers, had to self-isolate or became ill. 58% of carers have seen their physical health impacted by caring through the pandemic and 78% reported that the needs of the person they are caring for has increased as a result of the pandemic.

In reply to the above this project developed a list of services to improve carers wellbeing. Some are directly linked with mental health and emotional wellbeing via the Wellbeing Worker, who provides trainings for those with lower level mental health issues and those who finished counselling sessions, however require more support to maintain their mental wellbeing. Other services focus on carers wider needs, where carer can contact the help line or visit the Centre and describe their need and worries. This could be related to the financial situation, practical support, housing issues or short break in caring role. Every individual has different needs, and this project makes it possible to assess and address those individually. In a result a carer receives well needed support in one place, within their community-based setting, which prevent carer from needed further interventions.

Theme 2 – Providing Community Care & Support

The **Farming for Wellbeing project** is a project which seeks to provide support to those experiencing low wellbeing and low-level mental health issues by offering time at a local farm. People who take part in the project are encouraged to come along and spend time outside in the fresh air, working with animals and alongside others. They are encouraged to take part in light farm duties. The project also offers IAA and signposting to other services. This is a positive example of how the region is making use of the structures and strengths we have on offer and opening these up to the community. The farm is based in Swansea but is very popular attracting people from across the region.

The Project Lead has provided following information: *“The Cost-of-Living crisis has had a huge impact on our volunteers’ lives and mental health. People who were struggling financially before are finding everything twice as hard, and for some, the increase in the costs of basics has tipped them over the edge into financial instability. The housing crisis exacerbates this, with volunteers struggling to find affordable housing. For people living with mental health challenges, these issues are extremely difficult to cope with. At volunteers’ requests, we have expanded our Community Pantry to include basic items including toiletries and sanitary products.”*

The Project Lead provided also further information on current situation Service Users/Volunteers are facing and how this project adapted to offer better support: *“The lack of funding in social care means that we are seeing more volunteers attending who would previously have had 1-2-1 support. This can be challenging, as we need to offer a quality volunteer experience to all who attend, even when some people have higher support needs. Due to our flexible staff team and supportive volunteer groups, we are able to adapt tasks to ensure everyone is included in the day, and feedback from new volunteers and their families has been consistently good.”*

This project received a visit from WGRP team. It was a great opportunity to understand how important this project is for volunteers actively involved in this piece of work but also to the staff members. For more information, please watch this short digital story by opening the link below:

“Tier 0 Mental Health Support and Wellbeing Intervention” project provides a great example of how “what matters” conversations with Services Users are being used to prepare and deliver an effective support service. The Project Lead describes it as: *“At the Centre we are a point of need service, where we strive to respond to individual referrals within 24 hours. The Project offers access to counselling if appropriate or engagement with other supportive interventions to minimize potential crises and deterioration in mood and mental state. Evidence from this project has shown that a combination of clinical and therapeutic help along with social support and reducing stigma around mental health demonstrate how prevention is possible. The warm welcoming environment of the centre offers a community-based solution to support people in thriving and meeting their full potential.*

Within the Tier 0 Mental Health Support and Wellbeing Intervention, each therapeutic practitioner assesses the presenting issue, with a focus on enhancing self-management, personal choice, reducing blocks to well-being and personal control through individualized treatment. One of the significant benefits of offering counselling services at the Centre is that we are able to support and signpost individuals to other wellbeing and holistic support which enhances well-being and self-management, based on individual motivation and goals.”

It has been recognised that working with other organisations in our regions can offer a better support and enable a better outcome for supported individuals. To that end this project works with other agencies like: Local GP practices, Social Prescribing Team, Local Area Coordinators, Social Services, Swansea Council, other 3rd sector organisations including: WCADA, Crisis, The Sanctuary, Barod, Cyfle Cymru, Llamau, Women’s Aid, Swansea Council for Voluntary Sector, Stori Cymru, mental health link workers, health visiting team, local pharmacists, Neath Port Talbot hospital and many more.

This project aims to provide a preventative, recovery-based approach to supporting adults with early signs of developing emotional, psychological and/or social difficulties. The aim is to support individuals to develop a range of holistic strategies to reduce the need for more specialist mental health support. The project delivers individual/group counselling sessions, facilitates coping skills training, holds a weekly men’s mental health support group, and also holds a walking group.

Theme 3 - Specialized Targeted Support

The project **“Ethnic Minorities BAME Support”** was established due to the impact the COVID19 pandemic had on Black, Asian, and Minority Ethnic groups. Members from ethnic minority communities were disproportionately contracting and dying from the COVID19 disease, with available statistics suggesting that British Black, Asian and Minority Ethnic groups are up to two times more likely to die from the disease than their white counterparts. The main aim of the project is to make bereavement support accessible to people from diverse communities across the region. It has been recognized that there is an increased demand for culturally competent service delivery, and this project intends to build on their success of providing culturally relevant mental health support over the years and to improve service access and integration with a strong focus on preventive activity through the recognition of anticipatory grief and support for families, friends, and carers.

This project provides a great example of a “what matters” conversations, which have taken place during this period. The Project Lead describes it as:

“Initially, our project operated on the assumption that individuals without access to public funds had limited avenues for financial assistance. To better understand the primary needs of bereaved community members, we conducted a survey, which revealed that over 50% of respondents expressed a requirement for financial support. Consequently, we embarked on researching how to address this need.

We are pleased to report that a UK government initiative offers support to bereaved community members lacking recourse to public funds. We were able to guide our service users through the application process, ensuring they provided all the necessary documents, including the death certificate. As a result, service users unexpectedly benefited from a sum of £2500, which was made available to the bereaved.”

One of this project Service Users describes his experiences as follow: *“The bereavement service has been an unwavering source of comfort and strength during the most heart-wrenching period of my life. Their compassion and guidance were my lifeline, helping me find the strength to both carry the memory of my beloved and forge ahead. With their support, my two sons have found a community and trusted adults to speak with and we have also managed to alleviate the burden of our overdue rental expenses, all thanks to the bereavement grant we received through the invaluable assistance of BMHS.”*

What is being done differently?

The new strategy will drive forward significant transformational change across the region in how we meet the emotional wellbeing and mental health needs of the population. It will also seek to support the change in demand on statutory services. This will take time and therefore we need to ensure that we are moving incrementally towards achieving the outcomes of the new strategy but ensuring RIF projects are providing continuous improvement to this sector. The 13 schemes which are currently in flight across the region all adopt different mechanisms and techniques for delivery.

As part of the implementation of the new strategy we will be reviewing these schemes to ensure their purpose meets the strategic outcomes. We will aim to strengthen that 'golden thread' between the Strategy, the programme and the funded projects to ensure they all align. We will be challenging projects to ensure that they frame how their proposed project delivers against specific strategic outcomes and how the project will impact people accessing it. The new strategy reflects a step change for the way emotional wellbeing and mental health services are delivered.

Below is a sample of how the RIF funded projects are making a change to people across the region:

Theme 1 – Building Resilient Communities:

All examples used in below paragraphs are projects in year 2.

In our region the **“BAME Mental Health Awareness”** project has been developed to address the need of reducing stigma attached to mental health within BAME communities. The stigma is still very much present, and many people will not speak about their mental health needs and issues even with their family members due to fear of being abandoned in a result of it. This project uses flexible approach to reach as many people as possible. Following support services are being offered: group sessions – mainly for women, who experience anxiety, depression or PDST, individual one-to-one therapy, awareness raising sessions and other activities like art-workshops. These are offering a safe space to meet others with similar experiences, to talk about it or just to sit and listen. Feedback received from beneficiaries is very positive and reassuring that the service provided by BAME Mental Health Awareness project is well needed: *“When I started, I had no confidence very low self-esteem and didn't really like myself very much. I didn't think I had much to OFFER but after doing this course, learning to look at things in a different way giving me an insight to the way people think about me and the way they see me has given me a huge confident boost things are not always black.”*

The group sessions are being reported as more effective in addressing issues with shame, stigma, or feelings of isolation than individual therapy. On of the beneficiaries said:

“I've had my case rejected by the home office several times, and I have no access to public funds. My solicitor gave up on my case, and I felt marginalised and unsafe. I then struggled to meet my needs for food and other things, but I was also continually depressed and lonely. Asifiwe (name changed for confidentiality purposes) said, “When a friend introduced me to the Congolese Development Project and I approached one of the staff and started being guided, I was able to be provided with support by first referring me to Asylum Justice and getting supported regularly on different projects making me feel part of the community again.”

It has been discovered that those who received therapy and support would like to give something back to the community to feel appreciated for helping. This project offers volunteering opportunities for those within their own office space. These might include accomplishing small office tasks like photocopying or preparing coffees – as this is what current beneficiary have asked for. They say the activities engage their minds and take their mind from over-thinking. These also make them feel good that they are doing something and are being useful. They feel appreciated for their assistance and are able to build positive relationships.

Another example of doing things differently is the **“Swansea Carers Mental Health and Wellbeing Support”** Project which focusses on providing well needed emotional and practical support for carers in a very flexible way. It allows carers to contact a Family Worker by phone, online or face-to-face to talk about carers needs

and issues linked directly with their caring role. The Family Worker can provide advice and signpost carers to other organisations providing further information if required. Contingency planning for carers is being offered. Support to carers experiencing stress related to their caring role is being addressed by the Mental Health Worker. Carers are supported to learn and develop skills to manage their own wellbeing by creating a mental health toolkit/resource to help manage and maintain their own mental health. Carers are supported and empowered to identify their own needs and take charge of their own wellbeing. In addition to the toolkit, the worker can support the carer to identify other things that positively impact the carer from other community interest groups.

Theme 2 – Providing Community Care and Support

“Farming for Wellbeing” Project offers a different approach to supporting emotional wellbeing and improving mental health. This project seeks to utilise the countryside surrounding us in Wales by encouraging people to volunteer to work on the Farm, thus achieving physical exercise and spending time outdoors which has been proven to improve emotional wellbeing and mental health. All volunteers taking part in the project have gained knowledge and new skills by working on the Farm. In the animal house, volunteers have learned how to care for goat kids and chicks, wormed sheep and carried out chicken health checks, and run donkey behaviour sessions. In the allotments, volunteers learned how to sow seeds, grow cutting flowers, manage different composting systems and harvest fruit, vegetables and seeds. Across the site, volunteers have worked on woodworking projects, planted up a green wall with native wildflowers, helped install swift nest boxes and learned how to survey and manage for wildlife across the Farm and Cadle Heath, including Bee Walks and Butterfly transects.

As well as learning from staff, the project has given volunteers the opportunity to share skills they learn at the Farm with new volunteers. One young volunteer, who says that coming to the Farm is the only day she socialises, has passed on her new skills in goat hoof care and milking. Struggling with family issues and a recent autism diagnosis, she says the Farm is the only place she can be herself, that she appreciates the therapeutic side of working with animals, and that working with people has boosted her confidence. N, who attends the Farm to combat his social isolation, has begun looking after small groups of volunteers, and finds great joy in sharing his love of what he calls ‘the small things in life’ (invertebrates). He has developed his own project in order to apply for Wales Biodiversity Partnership Bee Friendly Farm accreditation. He was overjoyed to show the assessor around the site and talk through plans for invertebrate-friendly planting.

8 Volunteers attended a two-day accredited Mental Health First Aid course, during which they learned skills around recognising signs of mental health problems in themselves and others, and courses of action they could take, including who to talk to and which organisations to refer on to. Feedback included ‘Makes me feel better able to deal with family problems.’ and ‘Helped me to understand my own mental health issues better.’ 34 Volunteers attended Farm safeguarding training, which taught them to recognise signs of abuse, and who to talk to about it. We have a high number of young neurodiverse volunteers, and those with ASD asked for a session around the condition. This session, facilitated by the NAS, was extremely successful, with all 9 participants contributing and comfortable talking openly. Several commented that it was the Farm atmosphere which gave them this confidence, a comment echoed during our wellbeing workshop (run during our solstice event), when several participants said that they would not feel comfortable talking so openly about their wellbeing in other groups. Day to day work at the Farm, combined with these targeted courses and sessions, creates an open and welcoming atmosphere where people feel comfortable talking about mental health issues, and where they learn to recognise their own wellbeing needs and support each other.

Recent consultation with volunteers highlighted their interest in having the kitchen and café reopened. This would give volunteers the opportunity to learn how to cook healthy, nutritious meals on a budget, including using food from our FareShare delivery. Volunteering in the kitchen would offer all of the wellbeing benefits of Farm volunteering, plus skills around cooking and food and hygiene qualifications. We would need further funding including an extra staff member to manage this part of the project.

The **“Tier 0 Mental Health Support and Wellbeing Intervention”** project has a consistently high referral rate with appropriate referrals connected to the well-known and well-respected accessible project. The project is offered encourages people to take more responsibility for their wellbeing and improving their own mental health by exploring new opportunities in an environment where the aim is ‘wellbeing for all’.

The team has capacity to upscale the whole project to meet increasing demand by adding support groups and increase counselling provision further. The project focuses on preventative work to reduce escalation to statutory services which are under great pressure. The project intends to could be to expand the existing support offered, add additional neurodiversity support, anger management support, and increase counselling provision. The project would expand in the way the community has reached out for support so it would be meeting the needs of referrals.

Reach: Who we worked with (priority population groups – older people including people with dementia, children and young people with complex needs, people with learning difficulties and neurodevelopmental conditions, unpaid carers, people with emotional and mental health wellbeing needs).

The programme seeks to work with people from across the region in improving emotional wellbeing and mental health. The programme is designed to support and provide improved services for those across the region who are currently living with poor emotional wellbeing and low mental health, and their carers and families. The Programme also seeks to raise awareness of emotional wellbeing and mental health, how we can live well with low level mental health issues and how we can improve our emotional wellbeing, how to access support and information and how to live as well as possible for as long as possible, at home and in the community. The Programme also seeks to look to the future and transform how we deliver mental health services to meet the anticipated needs of the future population.

In the main the cohort of the population for this programme are adults and their families, however the new strategy is a life-span strategy as emotional wellbeing and mental health is something that affects all ages, either directly or indirectly. Therefore, this programme dovetails into other programmes across the region such as Children & Young People’s Programme to ensure a consistency in the approach.

People with Lived Experience are invited to participate in the region’s workstreams as both people with lived experience and carers. A Mental health Forum is currently being established in the region which will seek to engage people with lived experience in the regional transformation of services.

BAME Mental Health Awareness project works with members of BAME community to support them in understanding, recognizing signs of bad emotional and mental wellbeing and empowering them to make informed choices to improve their wellbeing. The group of people this project is designed for represents mostly women from BAME communities, who are experiencing anxiety, panic, depression, PDST, loneliness and isolation, and low self-esteem. This project relies on volunteers, who can help with translation tasks. Many of the service users, can not speak English and struggle in day-to-day situations or while dealing with various authorities. Having volunteers on board makes communicating and working with this minority groups easier and more effective.

Another project **“Swansea Carers Mental Health and Wellbeing Support”** is designed to support unpaid carers from Swansea area, who have caring responsibilities for their family member, neighbours, friends or spouses. Through ongoing discussions and feedback local carers reported that they need support on following areas: maintaining their physical, mental health and emotional wellbeing, knowing where to get support to better juggle caring responsibilities with their own lives, getting key financial help/advice, post-caring support and information, to rebuild a life of their own, opportunities to meet other carers/access activities/support groups. One of the services uses Sian, who self-referred into this services cares for both parents (mother with life threatening heart condition & confusion, father with dementia who is hospitalised & immobile due to an accident whilst under the care of hospital). Sian has just been through a breakup of a long-term relationship and was finding it difficult to cope with her caring role and a very demanding full time professional role. Sian also has health issues which impact on her own mental health.

Project **“Swansea Carers Mental Health and Wellbeing Support”** has been developed in response to the growing service demand for family mental health support. Many carers struggle to fulfil their responsibilities toward the cared for and to look after themselves the same time. The current COVID19 pandemic stressed growing needs for mental and emotional wellbeing support, as those with mental health issues felt even more isolated with many reporting reaching the crisis point. Many people living with mental illness are finding it hard to cope and get the support they need. Older adults, especially in isolation and those with cognitive decline/dementia have become more anxious, angry, stressed agitated, and withdrawn during the pandemic. As a response to these comments this project has been designed, which offers personalized and flexible support, which can be accessed on one-to-one, face-to-face level, or via using telephone or online support helping to improve vulnerable carers’s wellbeing in Swansea. Mindfulness, stress control courses are being offered but also tools to improve happiness and wellbeing including yoga and tai chi. This project offers opportunity for carers to speak up about issues they are coping with and about their needs. The Family Mental Health Workers work on one-to-one basis with clients caseloads, some needing one off support information or guidance with others requiring ongoing support, onward referral to other services or access the telephone support or befriending service. It was also recognized that Emergency Planning should be addressed as majority of cares were worried about what will happen to the people they care for if they, as their carers, had to self-become ill.

Another project **“A better welcome to Swansea”** aims to support a newly arrived asylum seekers in Swansea, many of whom are isolated and are unfamiliar with the city and what services and social networks are on offer. Every individual is being assessed and presented with options as to how best to integrate into the Swansea community – both within mainstream services and also within services designed specifically for sanctuary seekers. This project works closely with other organisations within a network of sanctuary seeker support agencies – each organisation has its own area of expertise. Being part of the network further broadens the options available to the people this project supports, improving integration, participation and wellbeing.

Below case study brings more light into effect this project had:

“AB arrived in the UK from Central America with no understanding of English. She came alone with her 4 year old daughter, who is non verbal due to her downsyndrome, and 14 year old daughter. On arrival in Swansea, the older daughter spoke a little English that she had learnt during her stay in a hotel in London where she lived with numerous other asylum seekers. The older daughter now speaks fluent English.

Through A Better Welcome, AB came to the Morriston drop in group and met staff who were able to assess her needs and meet her children. AB was very isolated because her daughter demanded a lot of attention and she didn’t feel confident to go to parent and tots groups with her limited English. Staff were able to make AB feel welcome and trusting towards us, we communicated through a combination of google translate, body language and language line and were able to understand her priorities. In time, we matched AB with an experienced Spanish speaking volunteer, who has been meeting with her a Morriston Library to work through the English learning application ‘Transparent’ which is offered free of charge through the library. Through this weekly meet up, the volunteer has come to learn that the older daughter is not happy in her school, we have been able to reach out to the school and learn about their well being facilities and share this with AB. We are in the process of linking AB with ‘Hands up for Downs’ an organisation who offer support and well being opportunities to children and their families in Swansea in support of down syndrome – the organisation has a Spanish speaking volunteer who will guide them through what is on offer there. Similarly, we have identified the older daughter as being carer, given that she is often called on to translate complex information on behalf of her mother and younger sister, so we have made a referral to the YMCA young carers project who will enable her to go on trips and outings the family could otherwise not afford, and to meet other young people with big responsibilities within their families.

This support is complimentary to the additional more formal case work type support AB receives from EYST around her Asylum case, housing and other more specialist advice.

Through the course of our interactions with AB, it became clear that she hadn’t had the usual input from health visitors so project staff made this connection. The health visitor, AB and project staff discussed how

their interaction would be best translated – using Language Line or a volunteer interpreter – AB has settled on using her project volunteer to do the translation as she has a good relationship with him and trusts him; this community based solution shows how impactful the project has been for AB in her feeling of well being within the city of Swansea.”

How have people felt about what has been delivered

We are continuously working to improve the life of people living with low emotional wellbeing and mental ill-health and their carers across the region. The projects which currently receive RIF Funding need to evidence that they deliver against the Programme Objectives. The new Emotional Wellbeing and Mental Health strategy aims to develop resilient communities which are able to provide support to and for those that need them. Feedback we have received from funded projects indicates that we are making improvements to the quality of life of those who access the services, however there is still much to do.

One of the regions very successful initiatives in reducing barriers to accessing mental health support is project **“West Glamorgan Mental Health Hub”**. Those who received support have told us:

“Without the foundation I wouldn’t have a life. Other services were useless, this service was quick, services should look at what JLF do and try and introduces similar things. “

“Having someone to talk to, definitely helped things that could be improved upon, identified things that could be fixed and how to do it. “

“I knew I needed counselling and felt better afterwards.”

“Things were bleak and now I feel more optimistic about things.”

To the question “What would it have meant for you if you would not have been able to get support from the charity?” service users provided following responses:

“I wouldn’t have had anywhere else to turn to.”

“Wouldn’t have been able to have asked for help if I hadn’t been able to speak to people first in person, the hub was easy to go to. “

“Wouldn’t have been able to improve myself in the ways that I have done. “

“Things would have stayed as they were, very difficult to get support from the NHS, I carried on getting very dark mood.”

The project **“Swansea Carers Mental Health and Wellbeing Support”** aims to improved carers mental health, emotional wellbeing, family relationships, increase resilience and prevent ill health and enable carers and their family members to keep themselves well and independent for as long as possible, to be more able to manage their caring role safely. Beneficiaries supported by this project share their comments about the service they received, explaining what this mattered to them:

“The support really helped me to take stock and get things in perspective. I've made some positive changes as a result and started re-evaluating my priorities. I feel calmer and better able to cope with stressful situations.”

“The project is a gateway to numerous activities which enhance my well-being. I feel valued as a carer – somebody recognises our worth!”

“My life had been and continues to be in pieces after coping with someone with severe mental illness in my immediate family. Without the care and understanding given to me by the centre I shudder to think what would have become of me and my family. A wonderful service and I’m still standing!”

The **“Better Welcome to Swansea”** is another project, which contacts people (asylum seekers) within the first month of their arrival where possible, this allows for best identification and intervention where a potential crisis emerges. In the first instance, skilled staff make an initial assessment of individuals needs to establish fundamental needs such as clothing or a need for food; they also are being then referred to

English classes where needed. Next, staff will refer to social activities, sport and libraries which impact a person's ongoing social, educational, and psychological needs. In many cases, people are also matched with one of the projects trained volunteer mentors who will show them around and show them all the important places they can use, this mentoring is tailored to individual need and interest and the volunteer's continuous communication with project staff, avoids escalation of any crisis that might emerge.

These are few comments made by people supported by this project in the last few months, including some comments from a volunteer, who are supporting this project:

"Yes, they helped me a lot to learn about things going on in Swansea, how to live and eat with a limited budget healthily, and more importantly helped me to feel I'm at home or motherland. I couldn't thank you enough and thanks a lot for all your support, advice, hospitality and kindness. I'll never forget throughout my life all your hospitality and want to thank the people of Swansea since I hadn't any problem while I lived there more than a year. I always thank you all and your organization A Better Welcome to Swansea!"

"Volunteering with asylum seekers has been an eye-opening experience, offering valuable lessons that have enriched my personal growth and community involvement. I've witnessed the remarkable resilience and strength of individuals navigating the asylum-seeking process. Their determination in the face of daunting challenges has been a powerful source of inspiration, highlighting the importance of perseverance and hope in the most challenging circumstances. This experience has cultivated in me a heightened sense of cultural sensitivity and empathy. Interacting with asylum seekers from diverse backgrounds has deepened my understanding and appreciation of various cultures and perspectives. It has also fostered a profound empathy for the struggles faced by those seeking refuge, driving home the significance of compassion and support in our community."

Feedback from the **Farming for Wellbeing** Project:

J has been volunteering at the Farm for the past year and says, *"Since I have been at the Farm, I'd say primarily I have learnt social skills. Naturally, I'm quite introverted and because I was quite isolated doing work online all the time. I feel like I'm part of the community more and not just isolated on my own. My self-confidence has increased a lot, like imposter syndrome I had. I feel like I'm a part of something and not just on the external all the time. I'm proud of just coming here."*

Volunteer P who took part in Mental Health First Aid training says: *"Working at the Farm makes me more able to handle some of the issues in my life with my family which can be very challenging and very stressful. So, I think the sort of organisation skills you learn at the Farm it actually helps me a lot. Handling problems, dealing with professional people and then passing them down through the family."*

David SW., one of the service users taking part in the **"Ethnic Minorities Bereavement Support"** project, who tragically lost his wife merely half a year after their arrival in the UK, described support received as:

"The bereavement service has been an unwavering source of comfort and strength during the most heart-wrenching period of my life. Their compassion and guidance were my lifeline, helping me find the strength to both carry the memory of my beloved and forge ahead. With their support, my two sons have found a community and trusted adults to speak with and we have also managed to alleviate the burden of our overdue rental expenses, all thanks to the bereavement grant we received through the invaluable assistance of BMHS."

There were multiple referrals to this project received from other organisations, who deal with individuals terminally ill, or their family members. After receiving support for grief Jumoke A. stated:

"I don't know how I would have coped with my father's terminal illness without the bereavement service. They provided invaluable support, guiding me through the difficult journey and helping me prepare for the

inevitable loss. Their care allowed me to cherish every moment with my dad, and their counselling has been a lifeline in my grieving process. I will forever be grateful for their compassion and understanding."

What is different about this project is the population group it is targeted at, and the way support is being delivered, for example based on culturally competent emotional support to anyone from a Black, Asian or other Minority Ethnic background experiencing bereavement and loss due and offer therapeutic support in different languages.

Adekunle, another beneficiary of this project wrote:

"I can't express how grateful I am for the bereavement support that helped our family stay together during the most challenging time in our lives. The counselling and guidance we received not only helped us individually with our grief but also strengthened our bonds as a family. We learned to communicate better, support each other, and honour our loved one's memory together. The bereavement support was a lifeline that kept our family united and moving forward. We were continually reminded to stay united as a family".

What have we learned about things that went well? What have we learned from any challenges that occurred?

Challenges

It has been a challenging period for this programme as we have been eagerly waiting the new Strategy. Now that it has been agreed and is in the process of developing an implementation plan more structure to the future journey and direction of the programme will become evident.

We will continue to engage with all stakeholders identified with an interest in the programme to ensure we include as many voices as possible. The establishment of the regional Mental Health Forum will assist with this. To date the programme has faced criticism for not engaging more widely, but with the same faces attending the consultation and coproduction events it has been difficult to capture new voices. We have noted this as a challenge and intend to change how we make links with those people with lived experience in the future.

A considerable challenge so far has been the competing priorities faced by the professionals involved in the work. Diaries are full months in advance which is impacting the pace at which work can be delivered. Paid professionals are facing ever increasing demands from employers and are always being asked to do more for less. These are challenging times to work in.

We have also noted that many funded projects have noted that the number of people they have supported is lower than originally planned. This has been due to the projects not being publicised as consistently by statutory and non-statutory services as was previously hoped. Going forwards we will support project leads to make better connections across the region to ensure the projects/ services are promoted in the best way.

The current financial climate could impact on both statutory and third sector services going forward which could result in the overall service offer being reduced if statutory services have to be cut and third sector organisations result in folding due to the growing financial issues due to budget cuts, inflation, cost of living crisis, increase in minimum wage etc.

Successes

We have completed and agreed a new and innovative strategy for the region. This has been well received to date and recent engagement events were well attended. With a well-planned approach to implementation, we will expect to see some changes in the next financial year, although this strategy sets out a different way of life, not just a different way of service delivery.

From digesting the feedback provided by Project Leads across the region we have learned that providing as much information, advice and assistance as possible, as early as possible is key to unlocking the right services at the right time. We feel we have a clear view on where there is a demand for services and where things

need to be done differently. This will be proven/ disproven as progress with the new strategy. There are strong projects delivering services in this theme and we intend to continue to strengthen this area.

There is a drive across the region to build resilient communities and there is an appetite from professionals and service users to commit to this agenda. This is evidenced in the enthusiasm of those involved in the programme and workstreams.

Changes to System

System Outcomes/Benefits

One of the most significant outcomes for the Programme in this financial year is the Strategy. The Emotional Wellbeing and Mental Health Strategy is now in the process of being shared and discussed across the region with Stakeholders and an Engagement Roadshow is set to take place in November/ December to share the objectives of the strategy. By March 2024 the Programme will be developing an Implementation Plan with our regional partners.

The new Strategy will focus heavily on Prevention (how to prevent or delay the need for any services using community interventions), and early intervention (to ensure that needs are met quickly and efficiently at an early stage to prevent escalation of need/demand on services). With a strong emphasis on building community resilience. The strategy will seek to better support individuals and communities by bringing services to them, to bolster anchor structures which are already in place and facilitate focussed projects to meet any gaps or specialist services required.

As a Region we recognise the importance of working together and overcoming the barriers already existing like lack of information sharing, lack of knowledge about services that are available, lack of joined up working between all partners and lack of awareness regarding the impact a good, healthy lifestyle can have on our mental health. Although this Programme supports two primary Models of Care, all six will be considered during the development of the Strategy, where relevant anything identified that sits in the scope of a different programme will be shared with the relevant Programme Board.

There is currently a review of service mapping underway across the region to allow better understanding of existing services, easier signposting and to identify any gaps in services provision to better inform future decision making. This mapping is currently being reviewed and expanded to map all services available across the region. We will look to share this in a way whereby we can understand what services are available geographically, by tier, from statutory/non-statutory services etc.

Future planning in the region needs to reflect the rising number of ethnic minorities, the cultural and language requirements of these communities will need to be planned for to ensure all residents can access the best possible care and treatment.

Ensuring we provide the right services throughout the continuum of need is essential. Providing people with the right support at an early stage will promote positive emotional wellbeing and mental health for as long as possible. Traditional care homes are not always suitable. There is a Capital Programme delivered by a Capital Programme Manger which will lead on any schemes identified as part of this Programme.

Programme Progress

This will be updated as we progress with the Programme going forwards.

Lessons Learned

1) *Prevention/ EI/ Strengthening Communities*

There is a real need to continue to develop services which provide support to people living with emotional and mental ill-health and their carers as early as possible to prevent the escalation of need. The more we are able to provide communities with the right tools, at the right time the more demand will be reduced further along the continuum. This will free resources which will be better allocated to bolster stretched tier 3 – 4 services.

Strengthening the knowledge of and provision of support available in communities will build community resilience enabling people to be supported in their community, by their community, which is what people want.

Feedback from those using services which are currently available indicates that there is still demand there for services in this area, and there are still many that are not being supported, such as those in more rural places.

2) *Communications and promotion of services*

The projects have all detailed in their original bid for funds how they would promote the project and reach the targeted cohort. Unfortunately sharing the information of the projects has not been consistent across the region which has meant there are many, professionals, and volunteers which are not aware of the projects on offer and how they can underpin the statutory services. Work needs to be done to ensure the reach of these schemes are pitched appropriately across the region. The launch of the Sorted:Supported website will assist with this issue.

3) *Collaborative Working & Rethinking Commissioning*

We are already seeing many examples of paid professionals working closely together to share skills and experience where there are shared priorities. The 3rd sector are well versed in joining up the way they work, offering stronger services and jointly supporting the public. We recognise that we need to be promoting this way of working across the region, sharing examples of good practice. Similarly we have noted that the move to joint commissioning of services will enable a better use of public funds.

System Constraints

- 1) *Competing priorities* – The workforce across the region are managing increasing conflicting priorities with diaries being inaccessible for months in advance which impacts the pace of the work.
- 2) *Workforce pressures and short termism* – there is a difficulty in attracting people to posts across the region, particularly where the roles are short term/ temporary positions. These vacant posts as impacting service and project delivery.
- 3) *Complexity of people coming into the preventative schemes* – people are displaying more and more complex as accessing commissioned service at the point of need is not always possible.

National Models of Care (NMoC)

Depending on regional structure, include reporting NMoC relevant to the programme (maybe single NMoC Contribution or multiple) For each NMoC section you complete you must consider:

- *How is the project meeting the outcomes of the Model of Care to which it is aligned?*
- *The activities you have delivered which you think could be important 'ingredients' (e.g., specific activities/components) of a national Model of Care, and explain why you think this is so*
- *What have been the gains / advantages for people brought about by those activities or components?*
- *If you were looking to help another team provide a service similar to yours, what would be the important things that you would want them to include?*
- *What advice would you give them about this? What might they avoid?*

NMOC: Prevention & Community Co-ordination NMOC – Outcome Statements:

1. People's well-being is improved through accessing co-ordinated community-based solutions

2. Local prevention and early intervention solutions support people to avoid escalation and crisis interventions

Programme Contribution

As documented throughout the report, a priority for the region is to develop Resilient Communities which can provide prevention and early intervention information, advice and assistance to those living with emotional and mental ill-health and their families. The purpose of this is to promote how people can take control of their own emotional wellbeing and mental health.

People want to remain in their own homes, with their families, and living as independently as possible for as long as possible. The services which are being funded by RIF and supported by this Programme all work to achieve this. Feedback indicates that these objectives are being achieved although there is still much to do.

NMOC: Emotional Health and Wellbeing

1. People are better supported to take control over their own lives and well-being
2. People have improved skills, knowledge and confidence to be independent in recognising their own well-being needs

Programme Contribution

As documented throughout the report, a priority for the region is to develop service which promote good emotional health and wellbeing. The purpose of this is to empower emotional and mental ill-health and their families to make decisions about their lives that enhance their emotional wellbeing and mental health. The programme focuses on developing services which lead to better emotional wellbeing. The services which are being funded by RIF and supported by this Programme all work to achieve this. Feedback indicates that these objectives are being achieved although there is still much to do.

Financial and Economic Data

There are a number of third sector projects that support people so that their mental health issues have either de-escalated or avoided escalating further. This will have resulted in cost avoidance given these people have not then required more intensive statutory type services.

For example, Llanmau Counselling project noted: *The counselling service reduces the strain on statutory health and social care services including admission to hospital, or where this is necessary, have a positive impact on the level of need and the young person's ability to engage appropriately with further support.*

Further work is required to cost out the provision of statutory services in order that cost avoidance costs can be estimated for these projects.

Work is underway to consider how we can develop return on investment. This is more challenging for preventative type work.

It is worth noting the cost of the MH residential provision, given it is significant: £2,298 per week, £119,496 per year. Ensuring the appropriate third sector and statutory services are available to support people at the right time when they need support is vital to ensure that their needs don't escalate further, which results in someone requiring a residential care placement.

Programme Case Studies

In the last reporting period project **Farming for Wellbeing**, which supports people, who struggle with mental health issues, with long-term unemployment, have learning disabilities or ASD diagnosis to improve their emotional and mental wellbeing by utilising 5 Ways for Wellbeing principles and work at the community Farm. Information about this project and people it is supporting can be find in this short digital story:

<https://vimeo.com/885418451/f8adcd2c6b?share=copy>

Another example is the digital story of one of the volunteers at the **West Glamorgan Mental Health Hub** project, who explains how being involved in this piece of work is making positive changes in her life.

<https://www.facebook.com/watch/?v=543602544529330>

Further volunteers and Service Users of **West Glamorgan Mental Health Hub** provide more insight to help they received via the Hub. Each of them highlighted how important it was for them to access support when they needed it most and how much they would like to give back to community to improve someone else's situation.

<https://www.facebook.com/watch/?v=1159774848066304>

One Service User of the project **Tier 0 MH support and Wellbeing Intervention** described what difference attending in this project made to her life and why it was important to have this support available in this given time.

It worked well being able to get help as soon as i needed it i have had times in the past where my mental health has deteriorated badly having Helen's support made me start to find a sense of control again. I have felt very isolated and also had a terrible counselling experience in the past - coming to the wellbeing centre I was met with a team of kind caring professionals, and I really felt safe. Feeling safe is a very big thing for me due to experience. being able to go directly to my counsellor, not via a receptionist or barrier helped a lot. Having counselling at the centre which was place of trust and safety for was very important for me. This created a sense of being cocooned. The issue that brought me was mainly bereavement and there was no waiting list this was important. In that time following my loss I went from an emotional wreck to someone who was able to function adequately and more balanced. The pressure cooker release without resorting to drink drugs or self-harm or eating. I would consider myself to have a drink issue on the past and drug use but I didn't turn to any of these strategies. Seeing Helen prevented me from those things.

...wanted to feel better and happier and more hopeful about my future-

I was able to move from overwhelm to a place of trust and I learnt to detach myself from other people's issues and focus my own wellbeing and i was able to approach my situation in more rational and calm way.

The project improved my life, it felt like a safe home space at the centre i felt nurtured and it felt a very holistic approach to supporting me. My emotional needs were held in a way that really supported me and i know if I needed more help I would know to go back again.