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Introduction

The Strategic Mental Health Workforce Plan for Health and Social Care (SMHWFP) was commissioned by Welsh Government in April 2020 as a key action in the delivery of the [Together for Mental Health Delivery Plan 2019-22](#) (T4MH: the third and final plan). Together for Mental Health sets out to achieve a significant improvement to both the quality and accessibility of mental health services for all ages and the Strategic Mental Health Workforce Plan is a key component in ensuring its success. The implementation of the plan aligns with the national health and social care workforce strategy and National Workforce Implementation Plan. It will also help inform future policy around mental health for NHS, Social Care and the Welsh Government.

[Strategic Mental Health Workforce Plan for Health & Social Care](#)
[National Workforce Implementation Plan](#)
[A Healthier Wales – Our Workforce Strategy for Health & Social Care](#)

The SMHWFP was published in November 2022 and launched by the Deputy Minister for Mental Health. Since then funding has been secured to support delivery of the actions over the next 3 years. The purpose of this document is to set out a high level implementation plan that will be used to communicate with stakeholders and to monitor progress through the new governance arrangements that have been put in place.

The implementation of the plan is being overseen by an implementation board including representation from stakeholder organisations and patient groups. The Implementation Board reports into HEIW and Social Care Wales Boards and the Together for Mental Health Ministerial Delivery and Oversight Board as a key priority workstream. The CEO of HEIW is the nominated chair of this implementation group. In addition, highlight reports and updates will be provided to the Mental Health Network Board.

Fundamental Principles

The Workforce Strategy for Health and Social Care took the opportunity to identify three fundamental principles – wellbeing, inclusion and the Welsh language, which, instead of forming separate themes, underpinned each of the seven themes, with an expectation that these would be woven through all of the implementation plans. We have followed the same approach with this plan.

Wellbeing

There is a compelling body of evidence linking compassionate leadership, wellbeing, capability and engagement of the health and social care workforce to improved outcomes for the people to whom we provide health, social care and support and so we want our mental health workforce to be happy, healthy and supported, so that they in turn support the wellbeing of the people in their care. In our work to develop the Workforce Strategy, we heard that the lack of parity of esteem between health and social care workforce impacted on the wellbeing of our workforce, and this has continued when developing this plan. Promoting and supporting the wellbeing of all of our workforce across health and social care must be at the forefront of all that we do to take forward the actions identified in this plan.

Welsh Language

This workforce plan builds on the foundations of the Workforce Strategy for Health and Social Care, in creating a workforce that is reflective of Wales' diverse population, Welsh language and cultural identity. The evidence of better clinical outcomes, and outcomes for people accessing care and support through the language of their choice is clear and highlights the vital importance we place on the delivery of health and social care in the language of Wales. For example, from 2022 new education contracts have set clear expectations of the education provider in relation to 16 the Welsh language support that all students can expect to see. This includes accepting written work as part of assessment or examination in Welsh, assessment of skills at beginning of course, providing opportunities to learn Welsh or develop existing skills. We aim to meet the Welsh language needs of our students, workforce and ultimately patients and people who use our services, as supporting our workforce to deliver care using the Welsh language where needed, is a fundamental principle which underpins every area of this plan and builds on the legislative frameworks relating to the use and delivery of services in the Welsh language, to create our workforce for the future that is reflective of Wales' diverse population, Welsh language and cultural identity.

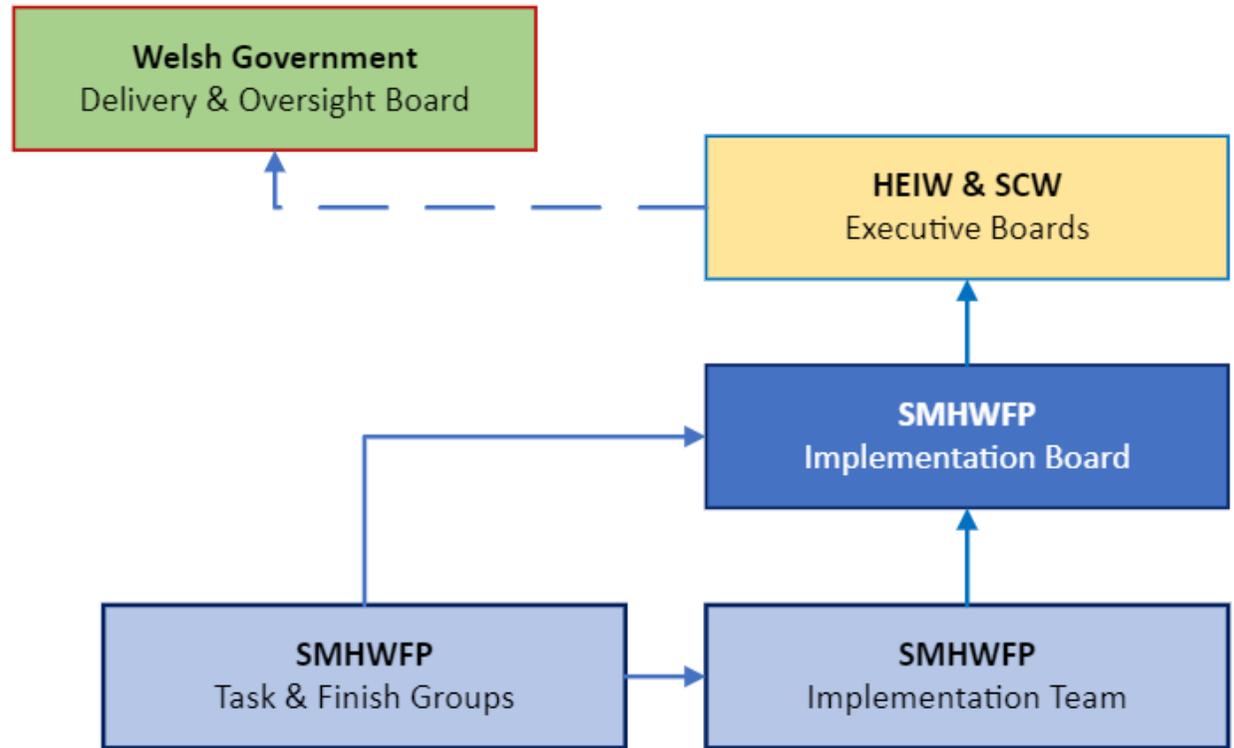
Inclusion

Creating a culture of true inclusion, fairness and equity across our workforce is central to this plan. There is clear evidence of deepening poverty and growing gaps in experience and opportunities for people born into different socio-economic backgrounds and protected characteristics and to ensure equity and fairness, co-production with those most affected will be at the core of the implementation of this strategy. This will be taken forward through all of the actions within this strategy, and will reflect strategic equality plans, taken forward with strong compassionate inclusive leadership ensuring a clear focus on engaging and addressing inequalities for people from differing socio-economic circumstances, including those who share the same protected characteristics and those who do not.

The implementation board meets bi-monthly to oversee implementation.

There are 33 actions in the SMHWFP, which seek to improve the following areas:

- Workforce Supply and Shape
- An Engaged, Motivated and Healthy Workforce
- Attraction and Recruitment
- Seamless Workforce Models
- Building a Digitally Ready Workforce
- Excellent Education and Learning
- Leadership and Succession



The high level plans and milestones are set out in the action tables on the following pages.

The implementation team can be reached through HEIW.MentalHealthWorkforcePlan@wales.nhs.uk

Workforce Supply & Shape

1 Increase the annual commissioning of education and training numbers related to the specialist mental health workforce for the next three years.

Current undergraduate and postgraduate education and training plans for mental health nursing, psychiatry, psychology, and other relevant professions will be reviewed over three years to ensure that they support the need to grow the workforce. This will include plans to develop a dedicated cohort of Physician Associates for mental health. This work will take into account programme capacity in Higher Education Institutions, clinical placement capacity across Wales, fill and attrition rates, and infrastructure support.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 – Dec 24	Phase 5 Jan 24 – Jun 25	Phase 6 Jul 25 – Dec 25
Launch of Clinical Associates in Applied Psychology programme						
Increases in education places for Mental Health Nurses, Psychiatrists and MH Occupational Therapists						
Establish centrally funded programme of contracts for Cognitive Behavioural Therapy and for Clinical Associates in Applied Psychology						
Readiness activities to be explored locally and national guidance to be developed for mental health Physician Associates						

Approach

- Increase university places for a number of key mental health roles
- Develop Clinical Associate Applied Psychology (CAAP) programme
- Work alongside health boards and local authorities to support embedding new roles such as Physician Associates

How will we know our actions have been effective?

- Increased pipeline to address current vacancies plus supporting new or expanded models and long-term sustainability, adequate supply of trained professionals by 2025
- There will be fewer vacancies reported by mental health services
- More teams will employ clinical associates in applied psychology and physician associates

Responsible Officer (s) Martin Riley (Health Education Improvement Wales)	Allocated Spend (23/24) £133,000 (Education & Training)
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2 Undertake scenario planning to inform robust workforce planning assumptions for the core mental health workforce in nursing, psychiatry, social work, psychological therapies for the next 10 years.

Over the course of three years and following a similar pattern to the England 'Future of the Mental Health Workforce' report a comprehensive repository of mental health workforce data will be collated and analysed within HEIW in order to measure the effectiveness of current workforce planning initiatives and to inform future workforce planning. This dataset will enable us to take account of the new service vision, the impact of Covid-19, and broader factors that could impact on people's mental wellbeing such as environmental concerns, as well as to measure the impact of new professions and roles within the workforce and to plan for the impact of new legislation.

	Phase 1 Jan 23 -Jun 23	Phase 2 Jul 23 -Dec 23	Phase 3 Jan 24 -Jun 24	Phase 4 Jul 24 -Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope the current landscape of mental health workforce data						
Collate data into a useful format for ongoing measurement						
Scope the possibility of moving ongoing management of data within HEIW digital infrastructure						

Approach

- Map landscape of mental health workforce data
- Investigate possibility of HEIW taking ownership or having constant access to MH workforce data

How will we know our actions have been effective?

- We will have a published report about the future of the mental health workforce in Wales
- We will have created a mental health workforce core dataset
- We will use data to strategically plan for the future

Responsible Officer(s) Data & Digital Task & Finish Group	Allocated Spend (23/24) £160,000 (Implementation – spread over actions 2&3)					
3 Ensure that data quality improvement projects under the workforce strategy address the needs of the mental health workforce.						
<p><i>The mental health workforce spans a broad continuum of services, some working solely in mental health services and others working in general services. This creates additional challenges for workforce intelligence which is often a barrier to effective workforce planning. Improving the data around the mental health workforce will be part of a wider initiative to improve workforce data and analysis being taken forward as part of the workforce strategy actions. It will be linked to the scenario planning work in Action 2. This will be essential to fill gaps in current data to enable us to set a clear baseline and to measure and monitor progress, including key information about Welsh Language skills and diversity and equality.</i></p>						
	Phase 1 Jan23 –Jun23	Phase 2 Jul23 -Dec23	Phase 3 Jan24 -Jun24	Phase 4 Jul24 -Dec24	Phase 5 Jan24 -Jun25	Phase 6 Jul25 -Dec 25
Establish business rules and minimum standards within mental health workforce datasets						
Establish ongoing cycle of data collection for mental health workforce datasets						
<p>Approach</p> <ul style="list-style-type: none"> • Establish a dedicated resource for MH workforce data within HEIW • Encourage uniformity amongst MH workforce data holders so that data can be regularly collected <p>How will we know our actions have been effective?</p> <ul style="list-style-type: none"> • We will understand current capabilities to collect mental health workforce information in more detail • We will be working with regions to improve data quality 						
Responsible Officer(s) Data & Digital Task & Finish Group	Allocated Spend (23/24) See Action 2					

4 Review workforce planning tools and resources being developed under the workforce strategy implementation to ensure they are fit for mental health purposes.

Tools and resources for local organisations and systems will be adapted to be appropriate to support mental health services to plan their future workforce requirements in a highly complex system which contains multi-disciplinary teams and multiple employers including the third sector and volunteers

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Scope currently available workforce planning resources to establish best approach						
Provide and promote suite of workforce planning tools to mental health workforce leads						

Approach

- Establish a dedicated resource for workforce planning within mental health
- Scope the current landscape of workforce planning within mental health teams
- Showcase available resources and investigate effectiveness in context
- Provide a gap analysis to see if there are any development opportunities

How will we know our actions have been effective?

- Mental health teams will routinely use workforce planning tools to plan their future recruitment
- Workforce planning tools will have been assessed in their effectiveness within a mental health workforce environment

Responsible Officer(s)

Ruth Tofton (Health Education Improvement Wales)

Allocated Spend (23/24)

£60,000

5. Develop and implement plans to ensure that there is an appropriate supply of trained professionals to undertake new and existing legal roles.

This action will focus on increasing the numbers of mental health professionals who are able to participate in work often in relation to serious mental illness requiring a specific skill set, including Approved Mental Health Professionals (AMHP), Section 12 doctors, and other duties under the Mental Health Act (1983), and Liberty Protection Safeguards.

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Commission a survey of Approved Mental Health Practitioners, Section 12 doctors and GP/SAS doctors who could take on these legal roles in future						
Using the surveys and wider research to inform targeted work to increase the attractiveness of legal roles in mental health						
Using the surveys and wider research to investigate opportunities to improve the effectiveness of legal roles and to support evolving their infrastructure						
<p>Approach</p> <ul style="list-style-type: none"> • Convene a Task & Finish Group • Survey the workforce to establish current viewpoints • Investigate best practice and analyse results of surveys • Investigate innovations that could assist the field such as digital innovation <p>How will we know our actions have been effective?</p> <ul style="list-style-type: none"> • Section 12 doctors and AMHPs will report higher job satisfaction • The process to undertake a specialist role will be better understood • The uptake of training to undertake specialist roles will increase • More people will be acting as s12 doctors and AMHPs • We will have identified actions to support legal reform for the mental health act • Improved process for MH Act assessments, timely assessment and positive outcomes 						
Responsible Officer(s) Ainsley Bladon, Jim Widdett (Social Care Wales)				Allocated Spend (23/24) £375,000		

6. Commission a programme of work to identify and define impactful volunteering roles which will help to inform workforce planning, education and training.

Volunteers play important roles across the continuum of mental health services, but this can be difficult to quantify and plug into workforce planning. This action will build on work that is being progressed through the workforce strategy, to understand the contribution of volunteers. This will specifically include looking at work in other parts of the UK such as the programme being led by Helpforce. It will take account of the volunteer framework published in 2021 and provide an opportunity to achieve clearer definition of the roles of the volunteer workforce in mental health services. This in turn will inform how we make the resources established through the plan available to the voluntary sector and to volunteers themselves.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul23 - Dec 23	Phase 3 Jan24 - Jun 24	Phase 4 Jul24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Facilitate regional events targeted at volunteers and the voluntary sector in order to gain buy-in for the implementation of the plan						
Host an event to promote and celebrate the role of volunteers and the wider voluntary sector within the mental health workforce						
Establish ongoing data collection around the role of volunteers and the voluntary sector within the mental health workforce						
Evaluate current training, guidance and resources to ensure that they can be made accessible to the volunteer workforce where appropriate						

Approach

- Engage with voluntary sector through hosting and attending events
- Engage with organisations that manage volunteers
- Scope the volunteering types that support the MH workforce

How will we know our actions have been effective?

- A showcase event will be held celebrating the contributions of the voluntary sector
- A range of resources will be available to support volunteers and the voluntary sector in the same way that NHS and social care staff are supported

- Training for the mental health workforce will recognise the importance of volunteers and the voluntary sector within the modern health and social care system
- Volunteers will report feeling recognised as an essential component of the mental health workforce
- Volunteering will be recognised as a valuable contributing factor within mental health career pathways

Responsible Officer(s)
Tom Narbrough (Health Education Improvement Wales)

Allocated Spend (23/24)
£30,000

7 Develop and implement a specialist mental health Allied Health Professional (AHP) model as a pathfinder for rollout across Wales.

Access to specialist AHP support in mental health services is varied and inconsistent across Wales, despite evidence that this can make a positive contribution to quality and outcomes. This action will build on the good practice that has been developed in individual AHP professions and will be used to evaluate and shape a workforce model to support in primary, community, and hospital settings.

	Phase 1 Jan23 –Jun23	Phase 2 Jul23 -Dec23	Phase 3 Jan24 -Jun24	Phase 4 Jul24 -Dec24	Phase 5 Jan 4 -Jun25	Phase 6 Jul25- Dec25
Identify a pooled fund and advertise for Allied Health Professionals to suggest innovative pathfinder pilot projects across Wales						
Evaluate and award funding to successful projects						
Utilise project management resources to monitor projects and to make links between similar initiatives across Wales						
Utilise project management resource to plan for the integration of successful projects within future mental health workforce						

Approach

- Allocate funding to innovative pathfinder projects across Wales
- Provide ongoing project support and link projects in with other areas

How will we know our actions have been effective?

- We will have undertaken pathfinder project(s)
- We will have evaluation and learning reports to share more widely

- Supporting top of license working
- Increasing pipeline to address current vacancies plus support new or expanded models for long term sustainability
- Supporting workforce redesign, recruitment, and retention
- Supporting long term horizon scanning to develop sustainable workforce models and inform development of robust Education & Training commissioning plans.
- Improved understanding of workforce patterns that will enable specific initiatives to be targeted to improve recruitment & retention
- Supporting workforce sustainability by embedding workforce planning tools and expertise across health & social care
- Ensuring the workforce has right skills to comply with legislative requirements
- Consistent use of volunteers & peer supporters within MH settings
- Supporting Mental health services role development

Responsible Officer(s)
Ainsley Bladon, Tom Narbrough

Ongoing monitoring
Helen O'Hara

Allocated Spend (23/24)
£450,000

Engaged, Motivated & Healthy Workforce

8. Commission a mental health workforce survey across health and social care, to assess staff engagement, experience, and wellbeing.

This action is to contribute towards a collaborative approach to using surveys within our workforce to assess wellbeing in their roles and to establish a baseline. This is an opportunity to develop actions that support an engaged, motivated and healthy workforce as well as collecting key information around equality and diversity.

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Roll out staff surveys across NHS and social care mental health workforce						
Analyse results of surveys to determine whether there are any further areas where data collection is needed						
Analyse results of surveys to identify baselines and trends within workforce composition and structure and where improvement activity might be needed						

Approach

- Contribute towards structure of staff surveys by working with relevant NHS and SCW staff
- Provide resource to analyse staff surveys and identify future data collection exercises

How will we know our actions have been effective?

- We will have a clear baseline about how our staff report they are doing with their wellbeing
- We will have identified actions in place to improve staff wellbeing
- Subsequent surveys identify improvements in staff wellbeing

Responsible Officer(s)
Ainsley Bladon, Jim Widdett

Allocated Spend (23/24)
£75,000

9 Establish a National Support Function for the mental health workforce

To support MH employees through challenging circumstances such as attendance at Coroner's Court, patient suicide and the pressures associated with practicing in the current MH environment.

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Conduct a scoping exercise to ascertain what resources are currently out there to support staff and if there are any existing initiatives						
Provide project support to pilot psychiatry mentorship throughout 2023 to ascertain demand						

Approach

- Scope current landscape of support for frontline mental health staff that are dealing with difficult situations
- Collate information about any initiatives operating across Wales and perform gap analysis
- Investigate current supervision and mentorship programmes to see if they can be better supported and rolled out further

How will we know our actions have been effective?

- Employees report feeling better supported through challenging circumstances
- Evidenced uptake of mentoring opportunities

Responsible Officer(s)
TBC

Allocated Spend (23/24)
£45,000

10 Identify, train and support a network of mentors which will be hosted on 'Gwella' to provide consistent and agreed standards for mental health staff mentoring.

Mentors play a key role in personal and professional development and we have heard that this support can be lacking in mental health services. This action will invest in a development programme for mentors in mental health services to improve access for potential mentees. Being a mentor can itself provide personal development and can be a rewarding activity for staff. Creating this approach, will ensure that the mentors receive ongoing support in their mentoring role and that mentoring becomes an accepted and expected part of the culture within the workforce. Gwella is the national leadership portal hosted by HEIW and already hosts a range of other professional and leadership networks.

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Ensure that a network and range of resources are available through the Gwella portal – including repurposing existing documents						
Publish a revised set of mentoring standards and engage with the workforce to promote						
Map the current resources in the wider workforce and encourage mentors to bring their work into Gwella						

Approach

- Recruiting resources to focus on mentorship and leadership within mental health
- New resources to design ongoing engagement work programme across all mental health workforce areas
- Developing CAMHS training pilot approach to match mentors with students

How will we know our actions have been effective?

- Mentor standards will be updated and published
- A thriving community of mental health leaders and mentors will be supported to engage through Gwella
- CAMHS mentors will be working together to support roll out of CAMHS modules and will be working with mentee students on the course

Responsible Officer (s)

Helen Thomas (Health Education Improvement Wales)
Programme Team TBC

Allocated Spend (23/24)

£115,000 (also covering actions 31 – 33)

11 Use best practice and evidence to establish standards for supervision across the wider mental health team

Supervision is an essential part of practice for all health and social care professionals and can have a positive impact on wellbeing as well as on performance. Although most organisations provide a level of supervision, we have heard that there are significant variations in terms of understanding, roles, arrangements, effectiveness and access to protected time. This will clarify the definition and standards for supervision based on research and best practice for staff involved in mental health services.

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Scope the current landscape of supervision across the mental health workforce						
Collate examples of successful supervision and investigate wider rollout						
Conduct gap analysis on where supervision is lacking and could be improved						
Compile a framework for supervision and roll out either nationally or in pilot form						

Approach

- Establish a resource with clinical experience to bring together various workstreams around supervision
- Investigate global best practice for supervision both within mental health and further afield
- Collate research into a viable proposal for future supervision standards

How will we know our actions have been effective?

- Supervision framework developed and published
- Commitment from NHS and LA teams to embed the standards into practice – evidenced by protected time in job descriptions and reported implementation of regular supervision across teams in Wales

Responsible Officer(s)

TBC

Allocated Spend (23/24)

£45,000

12 Building on the Social Care Wales Team Manager Approach, implement an accredited team manager development programme across mental health services.

Effective and compassionate managers at team, service, ward or department level play an essential role in ensuring that our staff are motivated, engaged and want to stay with us. We need to support our managers to develop their knowledge and skills, and in particular to ensure that they can respond to changes such as the increased focus on flexible working. This action will ensure there is a sustained and consistent approach to developing our managers who have a critical role in supporting the workforce.

	Phase 1 Jan23 - Jun23	Phase 2 Jul23 - Dec23	Phase 3 Jan24 - Jun24	Phase 4 Jul24 - Dec24	Phase 5 Jan24 - Jun25	Phase 6 Jul25 - Dec25
Social Care Wales to establish a working group and series of workshops						
Commission experienced consultancy to facilitate workshops and bring suggestions together						
Consultants to produce engagement report and draft structure of Team Manager programme						
Consult on programme with wider workforce and roll out nationally						

Approach

- Establish a Task & Finish group to bring together existing Team Manager development work across Wales
- Ensure that organisations across Wales release staff time and dedicate resources to the working group
- Commission a private organisation to document working groups and produce proposal for accredited plan

How will we know our actions have been effective?

- Team managers report feeling better supported in their roles
- Giving insight into the specific issues within MH services to enable targeted action to support staff well-being and retention
- Dedicated service for MH professionals that is appropriate to the need and avoid duplicating local provision
- Rapid access to support to help retain people in workforce and reduce sickness absence and attrition rates
- Personal and professional development to support retention within the workforce
- Increase in skilled mentors in the workplace
- Supporting attraction, retention and recruitment and reducing absence rates

- Improved quality & safety leading to improved patient outcomes
- Improved management of staff leading to better engagement and reduced absenteeism and presenteeism

Responsible Officer(s)

Jim Widdett

Allocated Spend (23/24)

£50,000

Attraction & Recruitment

13 Develop a targeted attraction campaign programme for the mental health workforce, supported by Train Work Live and We Care Wales.

Effective recruitment is predicated upon a number of the actions in this plan such as CPD opportunities, support for wellbeing, effective leadership. However, investing in high quality, professional attraction campaigns is also essential to promote the value of these professions and roles, and the opportunities of working in Wales. Train Work Live and We Care are well established and well evaluated national campaigns. Phase 1 will commence with psychiatry, nursing and social work campaigns. We will develop a longer term (Phase 2) campaign plan which will be informed by the scenario planning outcomes.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Develop and run campaigns through TWL and We Care Wales targeting increased uptake of mental health careers for particular professional groups						

Approach

- Engage various professional groups with the production of media to incorporate within various campaigns
- Priority cohort of staff groups established to begin designing targeted campaigns
- Ensure that new roles are represented within campaigns
- Conduct interviews, produce videos and create dynamic online content

How will we know our actions have been effective?

- Mental Health workforce more widely represented within Train Work Live recruitment campaigns
- A wider range of mental health careers are actively promoted
- Uptake and interest in these campaigns is increased and measured

Responsible Officer(s)

Kay Wilkinson (Health Education Improvement Wales)

Allocated Spend (23/24)

£150,000

14	Use the Careersville platform to promote mental health careers across health and social care through a marketing campaign
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To use the Careersville platform to encourage young people to consider careers in mental health.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope the current resources that are in use to promote mental health careers to younger audiences						
Develop the content for a mental health building in Careersville						
Implement the MH building and begin to promote across various formats, events and groups						

Approach

- Establish a resource to work alongside the TWL and Future Workforce team in order establish a mental health presence within Careersville and appropriately integrated existing resources within a dedicated MH Careersville area
- Ensure the full range of mental health roles are appropriately represented within the platform
- Promote the platform and engage with both staff and prospective staff so that it can continually evolve and improve

How will we know our actions have been effective?

- Tracking website footfall Careersville and Train Work Live
- Monitoring interest in media campaigns
- Monitoring fill rates for educational programs

Responsible Officer(s)

TBC

Allocated Spend (23/24)

£60,000

15 Implement recommendations relating to careers pathways for the mental health workforce, including opportunities relating to research, academic, leadership and improvement as described in the Centre for Mental Health’s “Future of the Mental Health Workforce” Report

This will result in the development of clear career pathways which are able to adapt to the changing needs of both the services and our workforce. This will support the creation of career routes which are cross professional and incorporate portfolio models as well as flexible working and flexible retirement options, which encourage staff retention.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope the current recommendations within the Health Education England report and provide an analysis on implications for Wales						
Engage with the HEIW Digital team to develop careers pathways resources for mental health						

Approach

- Review the England report and consider the recommendations – furthermore if a similar report would be of use to Wales
- Provide initial analysis as to where the actions are being addressed within Welsh policy and activity and where any gaps are
- Scope if any of the actions would benefit Wales to be implemented as-is
- Scope the current landscape of career pathways for mental health and work within HEIW workforce and digital teams to ensure these can be promoted accessibly

How will we know our actions have been effective?

- A comparison between the report and Wales will be made available
- Career pathways will be available through the HEIW and Social Care Wales websites
- Universities and other training providers will share career frameworks with students considering future career opportunities
- Pathways will be used by mental health services to support ‘grow your own’ models and professional development opportunities

Responsible Officer(s)
Ainsley Bladon/Tom Narbrough

Allocated Spend (23/24)
£75,000,000

16 Develop guides, tools and resources which help managers to facilitate improved work-life balance and increase staff retention across health and social care.

This could include flexible working approaches, job planning guidance, how to increase/enable access to remote working, ‘stay’ interviews, flexible approaches to retirement and retire and return opportunities. This action links closely to action 12.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope the current landscape and uptake of flexible working within the mental health workforce						
Scope the current approach to supporting improved work-balance within the mental health workforce and how significant flexible working is considered as a supporting factor						

Produce analysis on how to move this work forward into the future across the mental health workforce						
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Approach

- Establish a dedicated resource to investigate the current landscape for flexible working and work-life balance planning within mental health
- Gather best practice from across other geographical and workforce areas in order to provide recommendations
- Produce an analysis of current situation alongside how to develop potential resources for the future and how to be integrate within policy

How will we know our actions have been effective?

- Resources will be published
- Better understanding of pressures on organisations
- Increasing recruitment into vacancies
- Increasing recruitment into higher education
- Future recruitment into undergraduate pre-registration training
- Supports career pathways by improving retention
- Improve future recruitment into service

Responsible Officer(s)

Jane Rees (Health Education Improvement Wales)

Allocated Spend (23/24)

£45,000

Seamless Workforce Models

17 **Develop and roll out mental health literacy training for the health and social care workforce, to provide more seamless support for physical and mental health**

A three-level training programme delivered via a digital platform will be developed which will include a mandatory mental health 'level 1' - awareness programme for all health and social care workforce, including third sector, independent contractors and volunteers.

	Phase 1 Jan23 -Jun23	Phase 2 Jul23 -Dec23	Phase 3 Jan24 -Jun24	Phase 4 Jul24 -Dec24	Phase 5 Jan24 -Jun25	Phase 6 Jul25 - Dec25
Scope the current availability and quality of mental health literacy training						
Commission an external digital provider to work with professionals and provide a new integrated mental health literacy curriculum available through y Ty Dysgu						
Develop and launch a foundation mental health curriculum from within Y Ty Dysgu						

Approach

- Investigate existing offer with respect of foundation mental health training (pharmacy, WAST, FACT 111 training etc)
- Scoping meetings about existing content - reviewing existing modules to consider whether these could be adapted for 'foundation level 1'
- Market research into providers that are able to adapt modules working within the Y Tysgu learning management system

How will we know our actions have been effective?

- Development of training at foundation level accessible via the Y Ty Dysgu platform
- Roll out of training (monitoring numbers accessing and basic demographics)

Responsible Officer(s)

Ainsley Bladon

Allocated Spend (23/24)

£240,000

18 Building on the work developed by Health Education England (HEE) design an All-Wales resource for implementation of new, expanded and extended roles into mental health multi-disciplinary teams.

This will ensure the availability of clear guidance for managers and individuals to support planning, implementation, and utilisation of new, expanded and extended roles within the mental health workforce. It will be multi-professional and include but not limited to Physician Associates, Mental Health Social Workers, Pharmacists and Pharmacy Technicians, Clinical Associates in Applied Psychology (CAAP), Emergency Mental Health Practitioners and Peer Support Workers as a specific action, Improved recognition of how people who use our services are able to inform and contribute into the way we shape and develop our workforce as well as the roles of some of our smaller therapy professions such as arts therapists, which are not always visible. This will also inform a consistent and quality managed approach to education and training, and consistent job descriptions.

	Phase 1 Jan23 -Jun23	Phase 2 Jul23 -Dec23	Phase 3 Jan24 -Jun24	Phase 4 Jul24 -Dec24	Phase 5 Jan24 -Jun25	Phase 6 Jul25 - Dec25
Development of resources to embed new roles among MDT teams and the wider mental health workforce						
Work with local areas to embed peer workforce, along with new roles such as CAAPs and PAs						
Develop overview of readiness within local areas for the uptake of new roles						

Approach

- Establish resource to develop the approach to peer workforce across Wales
- Establish resource to begin working on guidance to integrate new roles within the workforce
- Convene an ongoing peer support engagement group for roles across Wales
- Work with local health boards and mental health teams to establish readiness for the use of peers and other new roles in their workforce

How will we know our actions have been effective?

- HEIW and Social Care Wales will work with mental health teams around the introduction of new roles
- New roles will be embedded within MDT working with effective and accessible guidance
- Mental health teams will become increasingly multidisciplinary, with new roles such as peer support workers, physician associates and CAAPs employed on

teams

Responsible Officer(s)
 Hannah Morland-Jones (Health Education Improvement Wales)
 Helen O'Hara

Allocated Spend (23/24)
 £45,000

19 Initiate a project to capture the experience of people with lived experience including carers to inform the development of seamless care

This will capture and bring to life the impact of how we work from the perspective of the people at the center and to assist the development of skills, competences and ways of working.

	Phase 1 Jan23 -Jun23	Phase 2 Jul23 -Dec23	Phase 3 Jan24 -Jun24	Phase 4 Jul24 -Dec24	Phase 5 Jan24 -Jun25	Phase 6 Jul25 - Dec25
Develop business case around the creation of an All-Wales Recovery College including readiness activities with regions						
Facilitate Co-Production events in Wales to engage with local workforce leads						
Scope the potential for a co-production framework approach						

Approach

- Engage with health boards across Wales to see their current readiness with respect of peer workforce and see if there is any planning towards a recovery college model
- Set up communities to share best practice around lived-experience and the peer support workforce
- Build in scoping activities to a wider engagement analysis around the potential rollout of recovery colleges across Wales

How will we know our actions have been effective?

- A business case will be established for a national rollout of the recovery college model
- Detailed information will be available as to how regions are currently using lived-experience as part of their approach to mental health services

Responsible Officer(s)
 Hannah Morland-Jones

Allocated Spend (23/24)
 £75,000

20 Increase the capacity of community and primary care teams to support mental health services

There are opportunities to develop resources (e.g., job roles/specifications) to improve consistency of approach across Wales and to invest in levelling up the availability of this service at a cluster level.

	Phase 1 Jan23 -Jun23	Phase 2 Jul23 -Dec23	Phase 3 Jan24 -Jun24	Phase 4 Jul24 -Dec24	Phase 5 Jan24 -Jun25	Phase 6 Jul25 - Dec25
Support the strategic program for primary care and identify opportunities to increase capacity within primary care service models						

Approach

- Engage regularly with the Strategic Programme for Primary Care with the lead sitting on the implementation Board
- Support the ongoing development of MDT models which are based within or heavily supported by primary care
- Support the ongoing increases in mental health roles within primary care settings

How will we know our actions have been effective?

- Improved capacity in community and primary care teams
- Fewer inappropriate referrals into acute care
- Consistent training for all staff in health and social care leading to improved awareness of mental health issues and ability to signpost
- Improved recognition of mental health alongside physical health
- Consistent roll out of new roles in Wales in line with good practice to support recruitment & retention
- Improved recognition of how people including carers are able to inform and contribute into the way we shape and develop our workforce
- Equitable local service access across Wales aligned with primary care model
- Improved access to mental health services

Responsible Officer(s)
Martin Riley, Julie Denley

Allocated Spend (23/24)
£1,338,000

Digitally Ready Workforce

21 Assess current digital capability in the mental health workforce, against the national digital capability framework to inform training needs.

The development of the digital capability framework is an action within the Workforce Strategy for Health and Social Care. Plans for this assessment will be developed as more information becomes available on the wider work, and implementation timescales. The assessment will take place once the capability framework is launched.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Support the national rollout of the HEIW digital capability tool within the mental health workforce						
Work with the capability tool project team to analyse if there are any gaps or opportunities for mental health from the results						
Develop a long-term plan for improving the digital capabilities of the mental health workforce						

Approach

- Support the rollout of the national assessment tool for digital capabilities within the health workforce
- Consider how the principles of the tool can be adapted to wider parts of the mental health workforce
- Establish a resource to coordinate digital activities within the mental health workforce plan

How will we know our actions have been effective?

- Increased digital literacy among mental health teams
- Increased uptake of digital solutions within the approach to mental health models of care
- Increased engagement of mental health workforce leads with the overall digital scene underpinning public services

Responsible Officer(s)

TBC, Data & Digital Task & Finish Group

Allocated Spend

N/A

22 Create a network of digital champion roles to influence and lead digital workforce transformation (to be discussed with Digital Health Care Wales and other partners).

Effective leadership will be essential to combat the lag referred to above and to ensure that mental health workforce models embrace the positive opportunities and benefits of digital technology, coproducing this with people with lived experience. This action proposes investment in a network of digital champions across health and social care organisations to lead digital innovation in our mental health services and influence and inform future changes to workforce models. These will be supported as a joint initiative by Digital Health and Care Wales and Health Education and Improvement Wales.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Design and implement engagement events to facilitate involvement with the mental health workforce						
Scope the ongoing need for roles to support digital improvements within mental health as well as reconfiguring mental health data architecture to support futureproofing						

Approach

- Establishment of digital and data task and finish group to drive forward all four digital actions
- Working with national digital capability project to rollout to scope potential future digital improvement projects within mental health
- Establishment of a national network of digital champions in mental health through targeted engagement

How will we know our actions have been effective?

- Mental health services will be brought to the foreground for the testing of innovative digitally supported models of care
- Increased use of digital technology to deliver patient care embracing potential for more efficient and effective service delivery
- Improving awareness of digitally supported models of care within mental health workforce
- Delivery of a ‘once for Wales’ approach and methodology to how digital improvements interact with mental health

Responsible Officer(s)

TBC, Data & Digital Task & Finish Group

Allocated Spend (23/24)

£375,000

Excellent Education & Training

23 Work with partners to develop proposals to redesign education and training programmes for psychiatry.

There are longstanding difficulties recruiting to training programmes in psychiatry and a demand for greater flexibility from trainees. Innovation in the design of these programmes is crucial to respond to the needs of our future workforce as well as the people at the centre of our services. The Royal College of Psychiatrists and HEIW have key roles, aligned with implementing the recommendations of the Future Doctor Report.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope recommendations of Future Doctor report for any implications for the Welsh medical workforce						
Establish a Task & Finish group to drive forward any identified improvements from the report						

Approach

- Engage with HEIW colleagues and the Royal Colleges in order to scope any potential improvement opportunity
- Identify where additional project resource may best support rolling out improvements identified for the mental health workforce in the Welsh context

How will we know our actions have been effective?

- Greater uptake of clinical roles following training
- Improved satisfaction rates for clinical (F1 and F2) placements
- Better support provided to international graduates and recruits
- Better fill rate of higher training

Responsible Officer(s)

Action 23 – Future Doctor Task & Finish Group

Allocated Funding (23/24)

£65,000

24 Review quality frameworks for commissioned education and training programmes relating to mental health.

Quality of education and training experience has a direct impact on retention of graduates into the workforce. As commissioners, we will work with HEIs, NHS organisations and providers to ensure high quality, education programmes, including clinical placements and to include the role of people with lived experience in contributing to the delivery of programmes. We also need to ensure that a broader range of health and social care professional students have access to multi-disciplinary training and clinical placements in mental health settings.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Conduct a review of commissioned education programmes to capture the widest possible view						
Use results of review to conduct analysis and make recommendations for improvement						

Approach

- Scoping for a process to review and develop education and training programmes that captures the view of students, educators, commissioners and employers
- We are working with HEIs, NHS organisations and providers to ensure ongoing feedback is incorporated into high quality, education programmes, including clinical placements

How will we know our actions have been effective?

- People with lived-experience begin contributing to the widest range of educational programmes
- A broader range of health and social care professional students will have access to multi-disciplinary training and clinical placements in mental health settings
- Students will report satisfaction with graduate training programmes and there are concomitant improvements with attrition rates

Responsible Officer(s)

Martin Riley

Allocated Funding (23/24)

N/A

25 Consider how pre-qualifying training for social workers can be adapted to encourage greater specialism and take up in mental health, alongside how the new post qualifying framework can be developed to include opportunities for newly qualified and experienced social Workers in mental health specialists.

Through holding discussions with university providers to explore scope for developing elective modules in mental health as part of an extended curriculum for degree students. Scope the potential for accessing and funding specialist mental health modules available for social work students and newly qualified social workers. Understand the current uptake of mental health placements amongst social work students across health and social care including levels of unmet demand.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope the landscape for current mental health resources that can be adapted for the social work curriculum						

Engage with students and educational institutions to identify opportunities to improve access to mental health specialist qualifications within social work						
Research the current uptake of mental health specialism for social workers and identify any opportunities for improvement						

Approach

- Work with universities to scope the development of elective modules for mental health
- Work with students and universities to identify how to improve the offer for mental health specialism within social work
- Work with commissioned providers and education groups to make mental health specialist material as accessible as possible for social work students

How will we know our actions have been effective?

- Improved access to career pathways leading mental health social work
- Increased uptake of mental health social work as a specialist career
- Increased ability for universities and other organisations to facilitate mental health specialism

Responsible Officer(s)

Jim Widdett

Allocated Funding (23/24)

N/A

26 Commission professional bodies to assess interprofessional education and training opportunities for the specialist mental health workforce.

Working in partnership with Royal Colleges and Professional Bodies, this work will identify commonalities within current professional education and practical options to develop inter-professional learning opportunities to support our mental health workforce.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Review modules available and liaise with groups around suitable inter-professional learning opportunities						

Approach

- Scoping conversations with specialist groups such All Wales Senior Nursing Advisory Group and the Royal College of Psychiatrists

How will we know our actions have been effective?

- All suitable opportunities will be made available and accessible to a wider range of professional groups
- The wider mental health workforce will be broadly upskilled and better capable of treating patients

Responsible Officer(s)

Martin Riley

Allocated Spend (23/24)

N/A

27 Commission evidence-based, multi-professional education and training frameworks in priority and specialist areas.

This action will require a review of key documents such as that completed by HEE and the All-Wales Senior Nurse Advisory Group to inform and agree frameworks for adoption across health and social care workforce, with specific regard to the Welsh language needs of the population.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scope the development of a strategic approach to psychological therapy infrastructure within Wales to replicate best practice from other areas						
Scope the installation of a senior professional role to drive forward the development of psychological infrastructure in Wales						

Approach

- Scope best practice from other areas e.g. Higher Education England, NHS Education Scotland and Northern Ireland
- Develop training frameworks aligned to with delivery such as Matrics/Matrics Plant in Wales
- Identify opportunities for bespoke training frameworks

How will we know our actions have been effective?

- Frameworks developed and published across a number of key areas
- Psychological infrastructure in Wales reflects best practice from across the UK

Responsible Officer(s)

Lisa Llewellyn

Allocated Spend (23/24)

£90,000

28 Establish a national investment fund for post-qualifying education for the mental health workforce

This will create a new approach to the commissioning and funding for post-qualifying education across mental health services. It will also enable us more readily to ensure the quality of funded training and allow us to evaluate the outcomes of our investment through talent management approaches.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Scoping potential for national investment funds within post-qualifying mental health education						
Establish centrally commissioned contracts for a range of post-qualifying education that supports implementation of Matrics Cymru (such as EMDR, Systemic family therapy, DBT etc.)						
Identify a mechanism to support providing the widest possible range of essential training across mental health teams						

Approach

- Scope approaches across the four nations to establish the best approach to strategic commissioning of essential mental health training
- Develop a more strategic approach to commissioning training over the medium to long term in Wales, working alongside stakeholder groups
- Allow for central commissioning of essential psychological therapies aligned with Matrics/Matrics Plant

How will we know our actions have been effective?

- New training models will help to ensure the future successful roll out of 'All-Wales' training for mental health
- Mental health services will be offering the best possible breadth of interventions
- Better and timelier access to appropriate interventions for service users

Responsible Officer(s)

Martin Riley

Allocated Spend (23/24)

£1,029,000

29 Provide targeted national continuing professional development programmes to support priority areas across the mental

health workforce.

This will enable investment to be focused on strategic priorities which will alter over time. Education will need to be delivered in supportive working environments, where practitioners can implement their new skills and knowledge. Early priorities will be the design and delivery of a bespoke multi-disciplinary CPD programme to support integrated working and coproduction across mental health services in Wales, and a physical health CPD programme for mental health specialist.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Support outcomes training implementation through tests of new approaches						
Support psychologically informed practice by commissioning foundation training for all mental health staff						
Commission an external digital provider to work with professionals and provide a range of distinct 'bitesize' CPD modules available through y Ty Dysgu						

Approach

- Scoping work to understand need for psychologically informed training – showed very high demand across local authorities and health boards
- Developing CAMHS and Perinatal training modules
- Supporting Improvement Cymru’s implementation of outcomes measures training through secondments that enable clinical leads to work directly with teams to embed into practice – 3 approaches being trialed in 3 health board regions
- Mapping existing training in development and partnering with organisations to ensure compatibility with Y Ty Dysgu
- Working to support pilot / roll out of CAMHS and perinatal modules

How will we know our actions have been effective?

- Improved access to psychological therapies for service users
- Improved consistency in service delivery across health boards, supporting a move towards a ‘common offer’ in mental health services
- There will be an established mental health space on the Y Ty Dysgu digital platform, with dedicated access to training and resources accessible to employees across health, social care and the voluntary sector

Responsible Officer(s)
Ainsley Bladon, YTD Project Team

Allocated Spend (23/24)
£200,000

30 Building on Social Care Wales Qualification Framework, develop a mental health support worker education framework.

This would set common standards across health and social care employers and inform the development of defined criteria within support worker education including apprentice education programmes which support mental health multidisciplinary team approaches. This would also involve work with Higher Education Institutions to review current entry criteria, recognise prior learning and provide enhanced career pathways directly into university under-graduate education in health or social work.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Publish a qualification framework for social workers						
Investigate and adapt resources that could support an education framework for support workers in mental health						

Approach

- Published a [Qualification Framework](#) for social workers
- Scope approach to support workers across all mental health organisations and providers

How will we know our actions have been effective?

- Common standards are established across health and social care employers and inform the development of defined criteria within support worker education including apprentice education programmes which support mental health multidisciplinary team approaches.

Responsible Officer(s)
Jim Widdett

Allocated Spend (23/24)
£50,000

Leadership & Succession

31 Develop and implement an inclusive and targeted talent management pipeline for mental health leadership roles at organisational level, recognising the unique context and challenges of mental health services.

The quality of senior leadership is essential to the positive culture and working environment in mental health services. Targeting support at senior clinicians and managers working in mental health services to ensure that they are prepared and equipped to fulfil these roles, is a priority.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Targeted promotion of national multi-disciplinary mental health leadership programmes						

Approach

- Establish a dedicated project team to support mental health leadership and succession development
- Initial scoping conversations and engagement over 18 months
- Scoping of team manager needs in relation to development program

How will we know our actions have been effective?

- Multi agency leadership development opportunities will be available and accessed by the MH workforce
- Infrastructure developed and resources available

Responsible Officer(s)
Helen Thomas, Project Team TBC

Allocated Spend (23/24)
See Action 10

32 Promote and positively target places for mental health clinicians as part of the wider national multi-professional clinical leadership programme.

Effective leadership at team/ward/department and service level is essential to the quality of mental health services and can be provided by a range of professionals. The nature of the challenges affecting mental health services have similarities and differences to those affecting general health services. Whilst we need to avoid a silo approach in the development of our leaders there is an argument to suggest that we need to increase momentum in the roll-out of leadership development where the specialist mental health workforce has historically been less visibly represented, to cope with the transformation that needs to happen.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25
Identifying areas for ringfenced mental health places on existing leadership programs						

Approach

- Developing mental health presence on Gwella
- Share Gwella network with health board strategic leads
- Considering best approach to ring-fenced places

How will we know our actions have been effective?

- Mental Health Professionals actively participating in national leadership programmes (registration rates)
- Infrastructure developed with clear signposting to relevant leadership resources available
- Targeted promotion of national multi-disciplinary MH leadership programs

Responsible Officer(s) Helen Thomas, Project Team TBC	Allocated Spend (23/24) See Action 10
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33 Establish a mental health leaders’ network on Gwella, to improve access to the compassionate and collective tools and resources for all staff.

Setting up a Mental Health Leadership and Talent Community of Practice on Gwella, would allow us to make targeted resources widely available and would allow us to monitor which resources are best used.

	Phase 1 Jan 23 - Jun 23	Phase 2 Jul 23 - Dec 23	Phase 3 Jan 24 - Jun 24	Phase 4 Jul 24 - Dec 24	Phase 5 Jan 24 - Jun 25	Phase 6 Jul 25 - Dec 25

Gwella Infrastructure developed and resources available						
Pilot communities of practice on Gwella with CAMHS training leads						

Approach

- Develop a dedicated mental health space within the Gwella platform to host communities of practice and leader/mentor networks
- Engage with professionals and existing networks as to the functionality of new leadership resources

How will we know our actions have been effective?

- Priority MH leadership roles identified, Success profiles developed and leadership gaps
- Increased uptake of leadership opportunities by mental health professionals
- Improved recruitment and retention within leadership roles
- Improved quality and patient experience through better informed and supported leaders and mentors representing services on the ground
- Creation of robust mental health leadership pathways
- Develop leadership capacity within the wider (including third sector) mental health workforce

Responsible Officer(s) Helen Thomas, Project Team TBC	Allocated Spend (23/24) See Action 10
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Programme Management Resource

Programme Management Resource	
Health Education & Improvement Wales	
Programme Team <ul style="list-style-type: none">▪ SMHWFP Implementation Lead 1.0 WTE Band 8b (Ainsley Bladon) – In Post▪ SMHWFP Programme Manager 1.0 WTE Band 8a (Thomas Narbrough) – In Post▪ Lived Experience Lead 0.6 WTE secondment for 1 year (Hannah Morland-Jones) – In Post▪ Project Support officer 2.0 WTE Band 5▪ Secondment Opportunities at Band 6 and 7 to support delivery of actions▪ Psychological Infrastructure Lead (recruitment Q2 23/24)	RAG
Social Care Wales	
<ul style="list-style-type: none">▪ SMHWFP Improvement & Development Manager 1.0 WTE – Jim Widdett – In Post - permanent	RAG