

No.	Action	Timescale	Led By	Outcome and output indicators
1	<p>Each Region to have a multi-agency protocol in place between health, local authorities, the police and the third sector, published (on partners' websites) and updated every year setting out:</p> <ul style="list-style-type: none"> • How the public should access care when in a crisis • Each agencies' role and responsibility relating to providing crisis care services • Criteria for accessing services in a timely manner • The arrangements in place for the appropriate and safe transfer of people between and across services • The service arrangements in place to meet the specific needs of people from minority and ethnic communities • How information will be shared across agencies, to help inform the delivery and improve outcomes for people presenting in crisis • Arrangements for how people affected by alcohol or drugs, and who have a mental health condition, will receive a timely and appropriate service 	By June 2022	Regional multi-agency crisis care boards/forums	<ul style="list-style-type: none"> • Each Region to have standardised multi agency working methods in place for providing crisis care services that is described in a multi-agency protocol • An agreed arrangement in place for the sharing of information between agencies. • When a person is in police custody, each police service to have in place, systems and processes that help inform on the early identification of mental health needs and the methods for timely referring /signposting of people to the appropriate support service. (Timescales should be included within the regional protocol) • Feedback systems in place that inform on the appropriateness of care and its timeliness from people who have used crisis care services, including specific feedback from people from ethnic communities and from people affected by alcohol or drugs
2	<p>Health Boards and local authorities develop joint plans, working with the third sector and other partners, to ensure that people of all ages who are experiencing early signs of a personal, emotional, or early-stage mental health crisis have 'out of hours' access to a 'safe place to go' service/facility, and an online or telephone based service, for respite, safety, or to help avert a crisis (Beyond the Call Rec.8)</p>	<p>Plan in place by March 2022</p> <p>Service in place October 2022</p>	<p>HBs and LAs report progress quarterly to regional multi-agency crisis care boards/forums</p>	<ul style="list-style-type: none"> • Each Region to have a plan in place that reflects local needs and informs on the services in place 'out of hours', and the model of delivery • Plans to include: <ul style="list-style-type: none"> ➤ How 'out of hours' service is shared/promoted ➤ How this provision fits in to wider local service models ➤ How service can be accessed

3	<p>All organisations to engage with the 111 pilots and ensure that people of all ages with an urgent need have 24/7 access to mental health support, and that clear referral/signpost pathways are available for people where required, e.g., out of hours social services, welfare support, finance/debt, domestic abuse support, etc.</p> <p>(Beyond the Call Rec.6)</p>	By October 2022	Unscheduled Care Board	<ul style="list-style-type: none"> • Reduction in number of people with mental health problems contacting emergency services through 999 • Reduction in the inappropriate use of s136 • 111 service in place with a single point of access across Wales with clear multi agency links to its method of working
4	<p>People of all ages receiving a secondary mental health service have a high quality 'Crisis Plan' in place, reflecting Welsh Government requirements, that includes a mutually agreed advance statement, and details of planned support to help prevent and/or mitigate any future potential crisis</p> <p>(Beyond the Call Rec.4)</p>	By June 2022	HBs report to regional multi-agency crisis care boards/forums	<ul style="list-style-type: none"> • Evidence through regular audit of crisis plans (as part of CTP audit) with findings reported quarterly to multi-agency crisis care board/forum • 'Service user' feedback at CTP review • Reduction in admissions to hospital • Reduced demand on 999 services for people known to mental health services
5	<p>'All agencies will ensure that those who are in contact with people in distress have the necessary knowledge, skills, and attitudes to ensure compassionate and supportive care is delivered' (<i>Talk2Me2 Objective 2vi</i>)</p>	By March 2022	Regional multi-agency crisis care boards/forums	<ul style="list-style-type: none"> • Agencies to have a training programme in place that reflects the 'Talk2 me2 Objective 2vi'. Uptake on training to be reported annually to regional multi-agency crisis care boards/forums • Post training, implement an evaluation process with: - The staff who have been trained People that have used the services
6	<p>People discharged from psychiatric in-patient care should be followed up by the service within 72 hours of discharge and a comprehensive care plan should be in place at the time of discharge and during pre-discharge leave</p> <p>(National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH report 2019 p6)</p> <p><u>display.aspx (manchester.ac.uk)</u></p>	By June 2022	HBs report to regional multi-agency crisis care boards/forums	<ul style="list-style-type: none"> • Operational working practices in place that reflect NCISH guidance • Information to be communicated to the individual and their GP within 24 hours following discharge and where appropriate copied to the community team and other specialist services • Revised CTP to be in place to reflect any change in a persons' care needs

7	Feedback and views will be systematically sought and captured from people of all ages who have used crisis care services, and acted upon, including specific feedback from people from minority and ethnic communities	By June 2022	All partners	<ul style="list-style-type: none"> • Service user feedback mechanism introduced and reported quarterly to multi-agency crisis care boards/forums
8	Public sector services that manage or commission facilities caring for vulnerable persons will have a robust 'missing person' protocol in place. These protocols should specify preventative measures to reduce missing person's calls to the Police, such as the proactive management of risk (Beyond the Call' Rec. 5)	By June 2022	All partners	<ul style="list-style-type: none"> • Missing persons protocol implemented in all Regions • Reduced number of people reported missing • Reduced missing persons calls to the police