

NCMH

National Centre for Mental Health
Canolfan Iechyd Meddwl Genedlaethol



Ymchwil Iechyd
a Gofal Cymru
Health and Care
Research Wales



Ariennir gan
Lywodraeth Cymru
Funded by
Welsh Government

2017-18 Annual Report



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Foreword



It has been another exciting and rewarding year at the National Centre for Mental Health (NCMH), with us making excellent progress in each of our core areas of work.

We were delighted to secure additional funding from Health and Care Research Wales, which means we can continue our research until at least March 2020.

It was also a successful year for recruitment into our cohort, as we recruited our 10,000th participant - a significant milestone for our project.

This is testament to the hard work of our phenotyping, laboratory and administration teams who are responsible for the day-to-day recruitment and processes that make it possible to collect the data.

Our work with the Swansea University's Secure Anonymised Information Linkage Databank (SAIL) data bank has helped us secure new grants from the Medical Research Council and MQ to harness the power of big data to further mental health research.

Similarly, our partnership with Bangor University's Centre for Mental Health and Society has allowed our work to take on a global perspective with new projects in South Asia focused on reducing rates of self-harm and suicide.

The Engage to Change project, which is led by Learning Disability Wales, has gone from strength to strength and provided paid work placements for over 160 young people with a learning disability or on the autism spectrum across Wales.

Lastly, it's been another successful year for our involvement, engagement and knowledge transfer activities, with the launch of a new podcast series exploring different areas of mental health and the re-launch of our public involvement group, PÂR.

I hope you enjoy reading this report and if you have any questions about our work, please feel free to contact us.

Professor Ian Jones
Director, National Centre for Mental Health

Introduction

The National Centre for Mental Health (NCMH) is funded by Welsh Government through Health and Care Research Wales, bringing together world-leading researchers from Cardiff, Swansea and Bangor Universities to advance mental health and learning disability research in Wales.

We aim to help improve diagnosis, treatment and support for the millions of people affected by mental ill-health every year, as well as tackle the stigma faced by many.

Key to achieving these aims is to engage with services and their users, the third sector and the wider public to increase understanding of mental illness, and by supporting and undertaking mental health research.

Our work is organised into six core areas, called work packages:

- NCMH cohort
- Bio-sampling and genetics
- Social care and social research
- SAIL data bank
- Learning disabilities
- Involvement, engagement and knowledge transfer

This report will highlight our key achievements in each work package between April 2017 and March 2018 and lay out our plans for the next twelve months.



Championing the expert voice

At NCMH we recognise the importance of public involvement, participation and engagement in our research.

In year three we commissioned an illustrator to outline how people affected by mental health conditions can get involved, participate and engage with us.

This image will be displayed at our public events, on our website, in our literature and at the clinics where we work and recruit participants.

In addition, it will be used to enable researchers and health care professionals to understand how the expert voice, from people with lived experience, can enhance future mental health research and services.

We hope that this illustration will support us to achieve our aims, which we have outlined in this report.



Who's who

The NCMH team is made up of academics, clinicians and professional support staff from three of Wales' leading universities - Cardiff, Swansea and Bangor.



Professor Ian Jones
NCMH Director



Professor James Walters
NCMH Deputy Director

NCMH Board

- Professor Sir Michael Owen
- Professor Keith Lloyd
- Dr Michael Jackson
- Professor Mike Kerr
- Professor Debbie Cohen
- Professor Nick Craddock
- Professor David Ford
- Dr Elizabeth Forty
- Professor William Gray
- Dr Stephen Beyer
- Professor Jeremy Hall
- Professor Peter Holmans
- Professor Ann John
- Professor Meng Li
- Professor David Linden
- Professor Michael O'Donovan
- Professor Catherine Robinson
- Professor Anita Thapar
- Professor Rob Poole
- Professor Marianne van den Bree

Administration Team

- Dr Laura Bunting
- Janet Robinson
- Mark Coles
- Jessica Pickin
- Rebecca Lynch
- John Tredget*
- Paul Gauci*
- Catrin Hopkins*

Laboratory Team

- Božo Lugonja
- Ganna Leonenko
- Craig Joyce*
- Dr Alex Evans

SAIL Team

- Marcos del Pozo Banos
- Niren Basu

Phenotyping Field Team

- Dr Catrin Lewis
- Dr Lawrence Raisanen
- Natalie Richards
- Christine Fraser
- Holly Pearce
- Elen Thomas
- Lowri O'Donovan
- Ella Lonnen
- Rhiannon Phillips
- Dr Jess Hall
- Emma Liddiard Williams
- Rachael Adams
- Sophie Andrews
- Amy Lynham*
- Dr Katie Lewis*

* Not directly employed by NCMH, but part funded in some cases



I'm part of the NCMH field team. I spend a large part of my week visiting people who have volunteered to help in our research.

Holly Pearce
Psychology Assistant

I'm based in the lab where I coordinate all the samples that the psychology assistants, like Holly, collect from our volunteers.

Božo Lugonja
Research Coordinator



My colleagues and I in the admin team are the first point of contact for our participants and the general public who want to learn more about NCMH.

Janet Robinson
Clerical Assistant

I'm also part of the field team and in my role I coordinate and manage all research data collected as part of NCMH.

Lawrence Raisanen
Data Manager



NCMH cohort

One of our main purposes is to recruit thousands of people to help with our research. Our participants also agree for us to contact them again about future research opportunities.

Highlights

- Exceeded 10,000 participants in the cohort
- Recruited over 3,000 participants through our online signup
- Opened additional recruitment sites in England

We have built the NCMH cohort as a world-leading resource for mental health and social care research, underpinning our research programmes aimed at understanding biological, psychological and social factors in mental health.

Our team of psychology assistants is at the forefront of this work package, attending NHS clinics to recruit participants and visiting people in the community to undertake interviews and collect biological samples.

The advent of our online recruitment tool has given our psychology assistants the time to conduct more in-depth assessments with participants.

These assessments allow the team to collect more detailed information on peoples' experiences of mood disorders and psychosis and post-traumatic stress disorder (PTSD).

In addition to the in-depth assessments, we are also running a number of other projects to collect more detailed clinical and psychological data.

Neurocognitive assessments

Some people who have experienced mental health problems have difficulty with concentration and memory, which we know can impact on their day-to-day life.

We are investigating whether these difficulties are linked with conditions like bipolar disorder, schizophrenia and major depression.

To do this, we invite people who have participated in our main study to complete a series of online tasks allowing us to assess their concentration and memory.

In the last year 630 have people have participated in this study and we plan to design a mobile app to make the tasks more user-friendly in the future.

Impact of sleep disruption

We have also been recruiting participants with bipolar disorder to take part in a separate study aiming to better understand the impact of sleep disruption on mental health.

The study uses actigraph watches that record activity. This allows us to estimate the sleeping patterns of people with bipolar disorder for up to eight weeks.

Volunteers are also asked to keep a sleep diary and self-report on their mood. This data is combined with the actigraphy to help us learn more about the link between sleep loss and the symptoms of bipolar disorder.

Over 100 people have participated in this project to date and we are in the process of analysing the results.



Professor James Walters
Work package lead

Using our cohort data for new research

Led by Dr Catrin Lewis, we used data from 2,001 of our participants to examine the prevalence of undetected post traumatic stress disorder (PTSD) in adults with a history of mental disorder and to establish associated factors that may help predict the likelihood of undetected PTSD.

Our main findings revealed that 40% of participants reported exposure to a traumatic event that could result in PTSD. Also, the prevalence of participants screening positive for current PTSD on the Trauma Screening Questionnaire was 22%.

Further analysis revealed that 13% of our participants had probable undetected PTSD. This suggests PTSD is commonly missed by health services and may be indicative of events that individuals are reluctant to share and that clinicians are wary to ask about.

There was strong evidence that undetected PTSD was more common in women and that those with a younger age of contact with services were more



likely to have undetected PTSD.

The most commonly reported traumas were childhood abuse, transportation accidents and sexual assault.

Our findings show the need for routine assessment of trauma histories and symptoms of PTSD among people with any mental health problem, offering appropriate evidence-based treatments and improving patient outcomes.

This study was published in the journal *Depression and Anxiety*.

Our online cohort



3000 people have taken part in our research online. This is what we have learnt:

Experiences



64% have been diagnosed with, or received treatment for, a mental health problem



Depressive disorder is the most common diagnosis (75%), followed by anxiety (57%), PTSD (10%), postnatal depression (10%) and bipolar disorder (7%)



70% are currently receiving treatment - either medication, talking therapies or a combination of both

Demographics



78% identify as female



45-64 is the most common age range



51% are employed, 17% are retired and 11% are students

Bio-sampling and genetics

Collecting biological samples from our participants, and curating samples collected in previous studies is a core activity.

Highlights

- Collected samples from more than 7,000 NCMH participants
- Granted approval to collect samples from children recruited via Cardiff University's Neurodevelopmental Assessment Unit



Professor Mick O'Donovan
Work package lead

the Neuroscience and Mental Health Research Institute.

This support includes managing processes to ensure compliance with the Human Tissue Act (HTA) and curating and genotyping samples for the psychosis study as well as large collaborative projects like IMAGINE ID.

IMAGINE ID

IMAGINE ID stands for Intellectual Disability and Mental Health: Assessing the Genomic Impact on Neurodevelopment.

The project is a collaboration between Cardiff University, University of Cambridge and University College London.

It aims to collect information about a large group of children with intellectual disability and investigate how genetic changes affect children and young people's behaviour.

Our support has been acknowledged in a number of papers published in the past year.

Our laboratory team are responsible for receiving samples collected by our psychology assistants and sent to us from our remote recruitment sites.

As well as the day-to-day work this entails, our recent focus has been on genotyping our samples from participants with bipolar disorder.

We have also developed a method of using blood samples to develop human-induced pluripotent stem cell (iPSC) lines.

These cell lines allow us to model the genetic contribution to psychiatric disorders and can provide access to patient-specific cells for drug discovery and personalised medicine in the future.

Infrastructure support

As well as curating and genotyping samples from the NCMH cohort, we provide infrastructure support to other research studies at Cardiff University's MRC Centre for Neuropsychiatric Genetics and Genomics and

What is genotyping?

Genotyping is the process of determining differences in the genetic make-up of an individual by examining their DNA sequence and comparing it to another individual's sequence or a reference sequence.



Social care and social research

Research which considers the social determinants and social effects of mental health play an important role in our work.

Highlights

- Awarded grant from the Global Challenges Research Fund
- Published a chapter on training hospital doctors in India in mental health assessment as part of a suicide prevention strategy



Two of our Principal Investigators are based at Bangor University's Centre for Mental Health and Society.

This burgeoning partnership has allowed us to include questions around social determinants of mental health into our assessments, including questions on work and employment, religious affiliations and childhood social environment.

Our activity in this area also has a significant international perspective with programmes of work across south Asia.

This international work provides vital opportunities for knowledge exchange and will draw on our experience in developing a longitudinal cohort and in drawing together health and social data.

The South Asia Self-Harm Initiative (SASHI)

SASHI is a partnership with University of Manchester and Oxford University in the UK and academics from Mysore, India and Karachi, Pakistan.

The project aims to help find effective responses to deliberate self-harm and suicide in south east Asia by building research infrastructure and expertise in India and Pakistan.

This will allow each country to build a body of evidence to facilitate the development of culturally relevant and effective interventions, both social and medical.

It will also allow us to make comparisons between data collected across south Asia and data from the NCMH cohort.

SASHI is funded by The Global Challenges Research Fund, a £1.5 billion fund to support cutting-edge research that addresses the challenges faced by developing countries.



Professor Catherine Robinson
Work package lead

SAIL data bank

We are working with the SAIL data bank at Swansea University to link up routinely collected patient information to support our research.

Highlights

- Secured two MRC pathfinder grants to harness the power of big data
- Secured a grant from MQ to develop an adolescent data platform
- Published 9 data linkage studies, including one on premature mortality and serious mental illness

Over the last twelve months we have made several successful grant applications related to this work package, including an £800,000 grant from MQ and over £1.7 million in funding from the Medical Research Council (MRC).

The grant from MQ will enable the development of the MQ Adolescent Data Platform for Mental Health Research, which will be hosted at Swansea University.

It will anonymously bring together a large range of existing and new information relating to the mental health of young people aged 10-24 from across the UK.

This will provide an unprecedented resource for researchers and policy-makers to improve understanding of mental illness in young people, address historical service challenges, and tackle inequalities in mental health.

A significant portion of the MRC funding will be used to help link more than 15,000 biological samples donated to Cardiff University to electronic health records, integrating genetic information with clinical data.

It will also fund a project to develop a school-based cohort, enabling us to track the mental health of young people as they grow up, and to identify risk and protective factors at an early stage.

Using the SAIL data bank to investigate premature mortality and serious mental illness

We examined the causes of deaths of almost 400,000 people over ten years to try and find out why those with severe mental illness have a lower life expectancy than the general population.

We found that not only did people with severe mental illness have at least a two-and-a-half times higher risk of dying than the general population, but that this rose to almost three times higher in those with a hospital admission.

The single biggest difference in mortality for those with severe mental illness compared to the general population was for those who died from ill-defined or unknown causes (13 times higher), followed by suicide (12 times higher) and substance misuse (eight times higher).

From a public health perspective, people with severe mental illness should be considered a high-risk population for physical illness and services should be designed to make it easier for these people to access care.

The significant emphasis on improving physical health care for people with severe mental illness through screening and management for cardiovascular and metabolic disorders, such as diabetes, is also important.

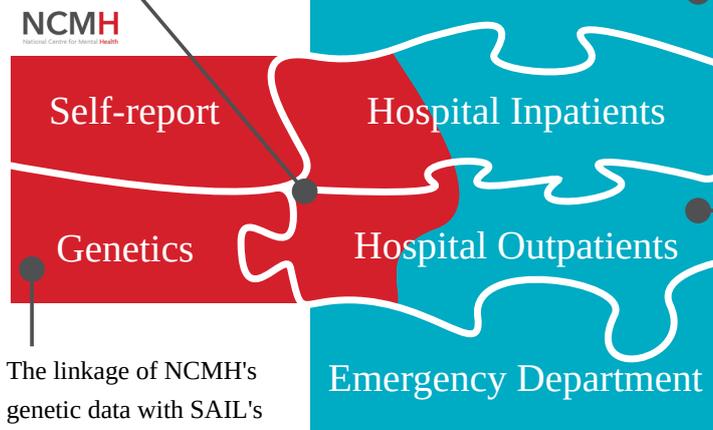
This study was published in the journal *Schizophrenia Research*.



Professor Ann John
Work package lead

NCMH and SAIL partnership

NCMH data is mostly self-reported, but it *may* also include additional information from hospital case notes.



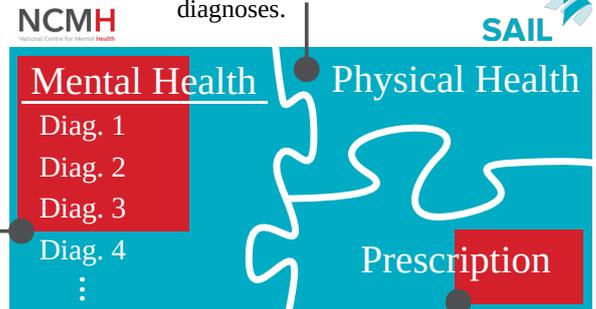
The linkage of NCMH's genetic data with SAIL's diagnostic and demographic information has the potential to produce very *high impact outputs*.



SAIL provides the NCMH with data from 73% of GP practices in Wales

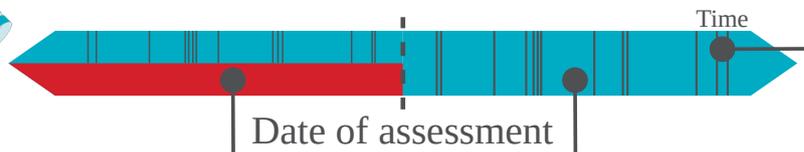
SAIL's hospital data covers the whole of Wales, and it contains data from emergency department admissions.

SAIL records physical health diagnoses.



NCMH records a *limited* number of mental health diagnoses. SAIL records all diagnoses, without limit in number or type.

NCMH records prescriptions *related* to mental health. SAIL records all prescriptions.



SAIL records *time events*, adding detailed date information for each diagnosis and prescription.

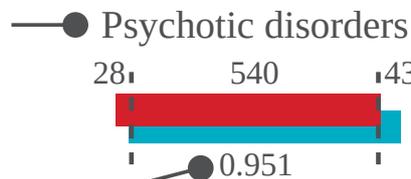
NCMH records *life-time diagnoses* at the date of assessment.

SAIL contains information beyond the date of assessment, allowing *follow-up studies*.

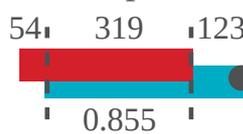
Psy-Cymru & SAIL comparison

Comparing diagnoses for the cohort linked in SAIL with +5 years of GP data (621 participants)

NCMH datasets contain mostly participants with psychotic disorders.



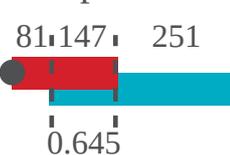
Schizophrenia



The proportion of diagnoses identified by SAIL but not by Psy-Cymru is generally greater than vice versa.

Sensitivity (the proportion of agreement) is modest for most mental health conditions (>0.6)

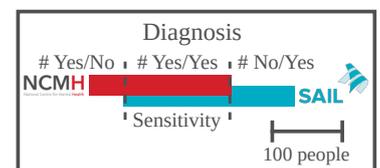
Depression



Bipolar



The proportion of diagnoses identified by Psy-Cymru but not by SAIL is relatively small.



Learning disabilities

Research which considers the social determinants and social effects of mental health plays an important role in our work.

Highlights

- Recruited over 140 participants with a learning disability into the cohort
- Attended and presented at the All Wales People First conference 2017
- Identified collaborators to work on next phase pilot of the Mood Awareness Programme (MAP)

Our learning disabilities work spans a number of areas, from examining the environmental, psychological and genetic factors that influence the risk of somebody with a learning disability experiencing a mental health problem to developing psychoeducation packages to help people with learning disabilities better manage their mood.

We are also involved in research looking at learning disability and employment.

Engage to Change

We are collaborating with Learning Disability Wales and other partners on Engage to Change, a Big Lottery funded project aiming to assist 1,000 young people with a learning disability and/or autism into paid employment.

The project recently held an awards ceremony to recognise the hard work and commitment of young people involved in Engage to Change, during which Dr Stephen Beyer gave a talk on our preliminary evaluation of the project so far.

To date there are have been 302 unpaid short-



term work trials and 167 paid placements of up to 6 months.

The number of young people employed so far represent a conversion of paid placements to employment of 81% compared to national employment rates of 6% for this group.

Employers report a overall 70% satisfaction rate for the work performance of their young workers.

We have been pathfinders to the Engage to Change Project SEARCH internship programme at Cardiff University and 23 interns have completed their training, with significant numbers achieving a paid job.



Dr Stephen Beyer
Work package lead

Involvement, engagement and knowledge transfer

Working to involve and engage the public in mental health research while combatting stigma is a key part of our work.

Highlights

- Attended over 25 events across Wales
- Launched Piece of Mind - a podcast dedicated to mental health research
- Rebranded our public involvement group; PÂR (Partnership in Research)

Although a work package in its own right, responsibility for involvement, engagement and knowledge transfer cuts across the whole NCMH with staff from a wide variety of backgrounds getting involved in our programme of activities.

Out and about

We attended more than 25 events during the year, including supporting the Forces for Change campaign, which aimed to raise awareness of mental health problems in military and blue-light veterans.

Led by Hafal, Bipolar UK and Diverse Cymru, the campaign saw us attend events across Wales, including the Wales Air Show, the Maindee Festival and the Royal Welsh Show, talking to veterans and the public about our research.

We also collaborated with My Discombobulated Brain, a local charity founded by one of our research champions, to host a mental health-themed student art competition to mark Universities Mental Health Day.

Engaging through the media

Over the past year we have secured more than 20 press appearances to raise awareness of our research and help tackle the stigma around mental health.

The highlight of this media coverage was our appearance in the BBC Wales documentary *Inside my Brain*, presented by Charlotte Church.

During the programme Charlotte interviewed Professor Ian Jones about the role of research and how NCMH combines genetic, biological, social and psychological data to better understand the causes of mental health problems.

The programme also looked at a Modular Motion-assisted Memory Desensitisation and Reconsolidation (3MDR) trial supported by NCMH.

This trial is investigating whether 3MDR is an effective therapy for treatment-resistant PTSD in military veterans.

Research champions

Our research champions are people who have taken part in our research and now share their stories to encourage others to help too.

From providing case studies for the media to appearing on our podcast, our champions have become a key component of our engagement work.

We now have 26 research champions with a range of diagnosis from across Wales.



Professor Ian Jones
Work package lead

Public involvement at NCMH

This year we launched our re-branded public involvement group; PÂR (Partnership in Research).

The group gives people with experience of mental health problems a voice in shaping research in partnership with academics.

Over the past twelve months we have appointed two service user lay leads, Alan Meudell and Huw Davies, and hosted a number of workshops with researchers seeking public input into their grant applications and research ideas.

The group also presented the findings of a paper, published in Research Involvement and Engagement, at the Health and Care Research Wales annual conference in October 2017.



Piece of Mind: Mental health and psychiatry

In 2017 we launched Piece of Mind - a podcast dedicated to mental health research.

Each episode covers a specific area of mental health and brings together an academic or clinician conducting research with a member of the public with lived experience.

The aim is to facilitate conversations and give people the platform to share real-life experiences, helping us tackle stigma and improve understanding around the impacts of

mental health problems.

It presents another way for us to share updates on our research, reaching a broader audience across Wales and beyond.

To date, we have recorded episodes around postnatal depression, post-traumatic stress disorder, attention deficit hyper-activity disorder and self-harm.

Visit www.ncmh.info/podcast to find out more.



Psychoeducation

Bipolar Education Programme Cymru (BEPC)

BEPC aims to improve the quality of life for people with bipolar disorder by helping them better manage their condition through an understanding of triggers and symptoms.

Research has shown that psychoeducation can be very effective in the treatment of bipolar disorder, leading to a reduction in symptoms and the need for hospital stays. It has also been found to make patients more likely to follow treatment advice.

The course is delivered over 10 sessions, each run in a group format with between 8 and 12 people. These combine presentations, informal group discussions and short exercises.

Over the past year we have delivered courses across Wales, including:

- Wrexham
- Newport
- Cardiff
- Swansea

We have also established a partnership with Advance Brighter Futures, a charity based in Wrexham.

Following training, they will be working in partnership with community mental health services to deliver future BEPC courses in and around Wrexham.

Finally, we have been preparing to submit an application to the Big Lottery Fund to enable us to train health care professionals and embed BEPC within the NHS.

In preparation for this bid, we have run focus groups across Wales to get up-to-date feedback from participants on BEPC and held discussions with senior NHS staff to inform our application and plan future improvements to the programme.



Mood Awareness Programme (MAP)



MAP is a new psychoeducation programme adapted from BEPC and aimed at people with a learning disability.

It is designed to help them acquire techniques and strategies to better manage their mental health, experience reduced symptoms and have longer periods of good mental health.

Over the past year we have had additional pilot groups in:

- Bargoed
- Newport

Since then, we have met with local learning disabilities services and identified collaborators to work on the development and next stage pilot of the Mood Awareness Programme.

Key achievement:

Perinatal mental health

Over the past year we have been collaborating with NSPCC Wales, Mind Cymru and the Mental Health Foundation to explore perinatal mental health provision in Wales and understand the experiences of women and their partners who have accessed services.

Our overall aim was to highlight the gaps in services and make recommendations to Welsh Government and health boards to ensure women across Wales have access to high quality services, information and support for their mental wellbeing in the perinatal period.

The project weaves together the accounts of women and their partners affected by perinatal mental health conditions and health and third sector professionals involved in delivering perinatal services across Wales.

Our findings

We found that women in Wales are already benefiting from new specialist community perinatal services in six of the seven health boards following a significant investment by Welsh Government.

However, we also found that the area in which a woman lives determines the level of service they can access.

As a result, we are calling for further investment in specialist perinatal mental health services to address this disparity. We also call for appropriate mother and baby unit provision to be made available in Wales for the women and their families affected by the most severe perinatal mental health conditions.

Next steps

Over the coming months we intend to further publicise our findings among professionals working in perinatal mental health, policy makers and Assembly Members so we are able to work together to address these shortfalls to enable Wales to lead the way in delivering high quality, consistent perinatal mental health care to women across the country.

Read the report

You can download the report by visiting www.ncmh.info/bumps-to-babies



Key achievement:

Remote recruitment

We have been working with several NHS Trusts in England to train their staff to recruit into our study.

The Trusts we are currently working with:

- Midlands Partnership NHS Foundation Trust
- North Staffordshire Combined Healthcare NHS Trust
- Cornwall Partnership NHS Foundation Trust

This involves them identifying participants, conducting a brief assessment with them and collecting a biological sample.

The data and samples are then securely sent back to our laboratory in Cardiff where they are processed.

This method has been successful in helping us recruit more participants from a wider area, as well as freeing up our psychology assistants to focus on gathering more in-depth information from those with conditions for which we have specific expertise, like bipolar disorder, schizophrenia and PTSD.

Next steps

We are in the process of entering into partnerships with new health trusts in:

- Devon Partnership NHS Trust
- 2gether NHS Foundation Trust

Map of our remote recruitment sites



NHS Trust	No. of people recruited
Midlands Partnership Trust	439
North Staffordshire Combined Healthcare NHS Trust	37
Cornwall Partnership NHS Foundation Trust	61

Conclusions

The past year has seen us achieve a number of important milestones and we look forward to developing our activities in each of our work package areas.

Developing our cohort

Our focus for the next year will be on gathering in-depth data assessment data on our participants by inviting them to take part in more detailed interviews about their experiences, undertake neurocognitive assessments and by collecting data on sleep and circadian rhythm disruption.

We will continue to recruit more people to join our study with a focus on more children and young people. This will be facilitated by our partnership with Child and Adolescent Mental Health Services (CAMHS) and with Cardiff University's Neurodevelopmental Assessment Unit.

In addition, we aim to launch a student study in partnership with Cardiff University's student wellbeing team in September 2018.

This work, led by Professor Debbie Cohen, aims to recruit a cohort of students to follow over time allowing us to investigate how mental health concerns might change as students progress. It will also help us identify potential risk and protective factors and ultimately allow us to adapt university support services to better meet the needs of students.

Harnessing the power of big data

We will utilise our new funding from the Medical Research Council and MQ to extend the large-scale data driven approach of our SAIL data bank work package by integrating genetic information with clinical, environmental, developmental, and biological data at scale.

Linking research participants' genetic and interview data with their health records will help us gain insights into the effects of genetic and other risk factors which will help us understand the nature of mental health conditions and ultimately lead to improved diagnoses and treatments.

Making a difference

We recently published a report into perinatal mental health services in Wales. We plan to work with our partners at NSPCC, Mind Cymru, the Mental Health Foundation and the Maternal Mental Health Alliance to raise awareness of our findings and lobby Welsh Government and health boards across Wales to invest in specialist perinatal mental health services, including the provision of a mother and baby unit, to give women in Wales the high-quality care they deserve.

In addition, as a partner on the Engage to Change project we have a unique opportunity to make a positive, practical difference to young people with learning disabilities and/or autism. Indeed, there are already some success stories at this early stage, with 81% of those completing a paid placement moving into employment.

We will also continue making a positive difference by equipping people with the tools and techniques to help manage their mood and mental health through our successful

psychoeducation programmes. We are currently preparing a funding application to enable us to train health care professionals to deliver the Bipolar Education Programme Cymru (BEPC), making it more accessible to people with bipolar disorder.

Looking beyond 2020

Finally, we will begin developing our funding application to enable us to continue our work beyond March 2020.

In preparation, we will conduct a stakeholder analysis and invite the views of our colleagues the NHS, third sector, wider community of researchers and members of the public to share their views on the future direction of NCMH.





NCMH

National Centre for Mental Health
Canolfan Iechyd Meddwl Genedlaethol

Ymchwil Iechyd Meddwl
Helpwch ni i newid!



Ymchwil Iechyd
a Gofal Cymru
Health and Care
Research Wales



Ariennir gan
Lywodraeth Cymru
Funded by
Welsh Government

The National Centre for Mental Health is funded by Welsh Government through Health and Care Research Wales.

This report is also available in Welsh. To request a copy, please contact info@ncmh.info

