

CONSULTATION QUESTIONS

Overall Approach

This consultation reflects a continuation and development of the Scottish Government's current approach for mental health. There is a general consensus that the broad direction is right but **we want to consult on:**

- The overall structure of the Strategy, which has been organised under 14 broad outcomes and whether these are the right outcomes;
- Whether there are any gaps in the key challenges identified;
- In addition to existing work, what further actions should be prioritised to help us to meet these challenges.

Comments

I FEEL THIS IS A SOUND BROAD BRUSH APPROACH TO ADOPT AS IT SHOULD COVER ALL POSITIONS

Improvement Challenge Type 1

We know where we are trying to get to and what needs to happen to get us there, but there are significant challenges attached to implementing the changes. An example of this is the implementation of the Dementia Strategy. There is a consensus that services for people with dementia are often not good enough and we already know about a range of actions that will improve outcomes. However some of these changes involve redesigning the way services are provided across organisational boundaries and there are significant challenges attached to doing this.

Question 1: In these situations, we are keen to understand whether there is any additional action that could be taken at a national level to support local areas to implement the required changes.

Comments

I WOULD SUGGEST LOCALISED DISSEMINATION VIA LOCAL MENTAL HEALTH ASSOCIATIONS & ADVOCACY GROUPS AS WELL AS CAREERS GROUPS

Improvement Challenge Type 2

We know we need to improve service provision or that there is a gap in existing provision, but we do not yet know what changes would deliver better outcomes. Supporting services to improve care for people with developmental disorders or trauma are two areas where further work is needed to identify exactly what needs to happen to deliver improved outcomes.

Question 2: In these situations, we are keen to get your views on what needs to happen next to develop a better understanding of what changes would deliver better outcomes.

Comments

GRAND LIAISON WITH LOCAL POLICEMAN
& MENTAL HEALTH ASSOCIATIONS WOULD BE
MOST APPROPRIATE - CREATE USER WEBS

Outcome 1: People and communities act to protect and promote their mental health and reduce the likelihood that they will become unwell.

Question 3: Are there other actions we should be taking nationally to reduce self harm and suicide rates?

Comments

PROMOTION OF OPEN AS STORM, SAFE
TALK AND OTHER MOODS.
IDENTIFICATION OF MAJOR RECIPIENTS.

Question 4: What further action can we take to continue to reduce the stigma of mental illness and ill health and to reduce discrimination?

Comments

US60 UP 566 ME CAMPAIGN
DEVELOP STRESS RELIEF IN WORK PLACES

Question 5: How do we build on the progress that we have made in addressing stigma to address the challenges in engaging services to address discrimination?

Comments

By promoting achievements of people
contemporarily & historical who had
mental health issues by Churchill, Cleese
Mulligan etc

Question 6: What other actions should we be taking to support promotion of mental wellbeing for individuals and within communities?

Comments

Ensure that local groups are given
support and funding.

Outcome 2: Action is focused on early years and childhood to respond quickly and to improve both short and long term outcomes.

Question 7: What additional actions must we take to meet these challenges and improve access to CAMHS?

Comments

Identification of and intervention with
families at risk of stress

Question 8: What additional national support do NHS Boards need to support implementation of the HEAT target on access to specialist CAMHS?

Comments

A bit more of good practice
shared locally across Scotland,
some good ideas

Outcome 3: People have an understanding of their own mental health and if they are not well take appropriate action themselves or by seeking help.

Question 9: What further action do we need to take to enable people to take actions themselves to maintain and improve their mental health?

Comments

DEVELOP SUPPORT NETWORKS VIA OFFICERS
& COMBATANTS.
MORE ROUST CONSULTING SERVICE VETERANS
FROM SUMMERS.

Question 10: What approaches do we need to encourage people to seek help when they need to?

Comments

TO OBJECTIVELY TO ENSURE THERE IS
CONFIDENTIALITY. TO BE ACCEPTING OF THE
TOOLS PROVIDED

Outcome 4: First contact services work well for people seeking help, whether in crisis or otherwise, and people move on to assessment and treatment services quickly.

Question 11: What changes are needed to the way in which we design services so we can identify mental illness and disorder as early as possible and ensure quick access to treatment?

Comments

CO-OPERATIVE SYSTEMS BETWEEN HEALTH,
SOME WORK, GP & THIRD SECTOR
AT LOWER LEVELS.

Comments

Outcome 8: The balance of community and inpatient services is appropriate to meet the needs of the population safely, efficiently and with good outcomes.

Question 21: How can we capitalise on the knowledge and experience developed in those areas that have redesigned services to build up a national picture of what works to deliver better outcomes?

Comments

By mapping using demographic comparisons to show how communities match up. Where there is effectiveness, draw it across the board.

Outcome 9: The reach of mental health services is improved to give better access to minority and high risk groups and those who might not otherwise access services.

Question 22: How do we ensure that information is used to monitor who is using services and to improve the accessibility of services?

Comments

Try to ensure that information is available in the various local languages.
Further through networks, symposiums, courses etc

Question 23: How do we disseminate learning about what is important to make services accessible?

Comments VIA A NATIONAL DATABASE WEBSITE
GOOD PRACTICE EXAMPLES, MODELS CAN BE
STORED THERE. MATERIALS WITH DEMOGRAPHIC
PROFILE TO MAKE IT RELEVANT.

Question 24: In addition to services for older people, developmental disorders and trauma, are there other significant gaps in service provision?

Comments YES. THERE IS A NEED FOR EACH AUTHORITY TO
HAVE A MENTAL HEALTH ASSOCIATION TO LEAD
3 RD SECTOR IN LOCALITIES. BUT AS A NMB.

Outcome 10: Mental health services work well with other services such as learning disability and substance misuse and are integrated in other settings such as prisons, care homes and general medical settings.

Question 25: In addition to the work already in place to support the National Dementia Demonstrator sites and Learning Disability CAMHS, what else do you think we should be doing nationally to support NHS Boards and their key partners to work together to deliver person centred care?

Comments OVERSEAS AND INTEGRATED SERVICE DELIVERY
MODEL.

Question 26: In addition to the proposed work in acute hospitals around people with dementia and the work identified above with female prisoners, are there any other actions that you think should be national priorities over the next 4 years to meet the challenge of providing an integrated approach to mental health service delivery?

Comments

Work jointly with MHTS who oversee compulsory orders to target people who have to be treated against their will.

Outcome 11: The health and social care workforce has the skills and knowledge to undertake its duties effectively and displays appropriate attitudes and behaviours in their work with service users and carers.

Question 27: How do we support implementation of *Promoting Excellence* across all health and social care settings?

Comments

Joint training - integrate MHO's & CPN's more closely - closer links with the third sector providers.

Question 28: In addition to developing a survey to support NHS Boards' workforce planning around the psychological therapies HEAT target - are there any other surveys that would be helpful at a national level?

Comments

Yes - availability of services to support recovery that are not linked to being ill.

Question 29: What are the other priorities for workforce development and planning over the next 4 years? What is needed to support this?

Comments

JOINT TRAINING CPN's, POLICE, MHS'S
INTSYMORE NW), MN (GTJ), & DSP OUTS
TO ENSURE SKILL BASE.

Question 30: How do we ensure that we have sustainable training capacity to deliver better access to psychological therapies?

Outcome 12: We know how well the mental health system is functioning on the basis of national and local data on capacity, activity, outputs and outcomes.

Question 31: In addition to the current work to further develop national benchmarking resources, is there anything else we should be doing to enable us to meet this challenge.

Comments

RANGE OF SUPPORT SERVICES AVAILABLE.
TYPES OF PROVISION, AND HOW MUCH IS NOW
COMING/MHS DIRECT PROVISION.

Question 32: What would support services locally in their work to embed clinical outcomes reporting as a routine aspect of care delivery?

Comments

A SIMPLE SCORING CHART TO ENABLE
REPORTING TO BE AN EASY, NOT ONEROUS
TASK.

Outcome 13: The process of improvement is supported across all health and social care settings in the knowledge that change is complex and challenging and requires leadership, expertise and investment.

Question 33: Is there any other action that should be prioritised for attention in the next 4 years that would support services to meet this challenge?

Comments

CHANGE MANAGEMENT TRAINING FOR THOSE WHO MANAGE ASSESSORS & PROVISIONERS

Question 34: What specifically needs to happen nationally and locally to ensure we effectively integrate the range of improvement work in mental health?

Comments

JOINTLY INTEGRATED ASSESSMENT & SOME OBVIOUS

Outcome 14: The legal framework promotes and supports a rights based model in respect of the treatment, care and protection of individuals with mental illness, learning disability and personality disorders.

Question 35: How do we ensure that staff are supported so that care and treatment is delivered in line with legislative requirements?

Comments

REGULAR TRAINING UPDATES ON A JOINT BASIS WITH HEALTH / CPNS, SW, MHO, GP'S INVOLVED