

Consultation Questions

Question 1: Do you think the Government could take action to help

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them make changes?

No - Not fully. The Government has to support the NHS sector. However, there is the charity based section which the Government expects so much of. Support is required in terms of direct financial aid or tax reduction not just making an organisation change just because the government perceives a need for change. Many organisations exist to meet a need which already deals with the issues of person centred focus and mental health and the government may not actually be of benefit to what is being done by simply making changes or slowly becoming aware of issues. Government after all is a collection of individuals with skills to a greater or lesser degree constrained by fiscal deficit, social requirement and political will.

The Government knows it has to improve services. There may be a gap in services and things may need to change.

Question 2: Do you think change is needed?

Yes

Many organisations are kept at arms length from NHS funding although they are doing the work of the NHS, and receiving referrals from GPs and Social Work Dept.. Counselling is one example of this where the NHS have waiting lists of over a year but professionally accredited counsellors in the charity sector are not allowed to access funding for taking on the workload. Why ? What changes would the government make ? Bearing in mind the large salary increases the Health Managers awarded themselves in recent times there appears to be money available.

There are 14 outcomes that we want:

1. We will encourage people and communities to have good mental health which can help them prevent mental ill health
2. Action will be taken in childhood and the early years of people's lives to prevent mental ill health
3. To help people understand their mental health. If they are not well they should be able to get help.
4. On first contact mental health services will work well.
5. Suitable care and treatment will be available. This will be based on a persons needs.

6. Care and treatment is focused on the individual's needs.
7. The role of the family and carer is understood and this will be supported by professionals.
8. The amount and type of services should be correct to meet peoples needs.
9. All groups should be able to access services equally
10. Mental health services will work well with other services.
11. Health and Social Care staff should have the skills to do all their duties.
12. We will check local and national results. This will show how the mental health system is working.
13. We shall support the improvement of health and social care services.
14. We will ensure that people are supported and protected by the law.

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Question 3: Do you think there are other things we can do to reduce self harm and suicide rates?

Yes -

Give greater emphasis to the Counselling organisations preventing suicides and dealing with those in emotional distress and mental anguish before they become another statistic. They are already doing this job before any review was in place and surprisingly actually pay for their own training to do so. Normally £5000 to become a volunteer. Is this the big society?

Question 4: Are there other things we can do to stop discrimination of people who have a mental illness?

Yes - Advertise the ease of access and confidentiality regarding counselling at all levels -

school, work place , GP surgeries and healthcare centres not just the NHS.

Question 5: Can we develop the good work of the 'see me' campaign in reducing discrimination? (This is the Scottish Government's campaign against discrimination of mental health)

Yes - continue with this.

Question 6: Do you know of ways in which we can take action to promote good health and wellbeing?

Yes - Prevention is better than cure and a lot cheaper financially in the long term. Many individuals and couples have issues be they created by: environment, relationships, finance or illness. Support the people in the community who have over a long period of time been working at the sharp end with no Government assistance. There is a saving in health costs, legal costs, housing and relationship costs to recognise.

Question 7: Can we improve access to services for children with mental health problems?

Yes - We work with children from the age of 4 years to 18 years with a wide range of issues including sexual abuse, suicidal ideation and attempted suicide or self harm plus eating disorders and a range of other issues that lead to mental anguish and ill health. WE receive no funding for the free service we have offered for years to reduce barriers to access for the young - finance this work as it is essential.

Question 8: Does the National Health Service (NHS) need more support to improve children and young people's mental health services?

Yes - It has waiting lists too long for individuals to access. e.g. attempted suicide client aged 17 years told to wait nearly a year to be seen. I rest my case.

Question 9: Are there ways in which we can help people to help themselves, which will improve their own mental health and wellbeing?

Yes - Allow and promote access to counselling before the issues take over the clients lives and they end up doing something that creates more issues further down the line. Stopping suicide avoids cost to the NHS in terms of hospitalisation costs, medical reviews, family disruption, loss of employment or missing out on school etc. Greater access to Horticultural therapy groups.

Question 10: Do you think there are ways we can encourage people to

get advice when they need it?

Yes - Promote and support counselling.

Question 11: Are there ways we can change services so they are quick to see if someone has mental ill health?

Yes - Faster routes between diagnosis and placement to support and medication if required.

Question 12: Are there ways we can support the NHS and their partners to collect information that will help improve services?

Yes - You are now doing it but will it be heard?

Question 13: Do we need to do other things to support the NHS and their partners to develop care plans?

Yes - Utilise the professionals within the third sector. We cannot do as Mr Swinney has exhorted us to do on fresh air and still comply with the legislation that is required to run a professional support system. Stop counting pennies as the return is greater if the third sector is utilised.

Question 14: Are there ways the Scottish Government could work with partners to continue to develop good services?

Yes - Stop holding reviews and consultations when groups have been shouting and lobbying for years. THIS IS A CRISIS ,YOU ARE IN CHARGE DO SOMETHING.

Question 15: Do you think we need to have things in place to develop partnerships with service users, families, carers and staff?

Yes - Educate by all means but who requires the education - Government ?

Care staff, families and Social Workers, GPs actually talk already but there is little action to make it work from up top. Change the system and listen to those who do, not those who maintain the status quo to protect their fiefdoms.

Question 16: Can more be done to have a person- centred process in mental health settings?

Yes - There are hundreds of qualified individuals who are members of Government funded Bodies such as COSCA, use them.

Question 17: The Government has created a tool called the Scottish Recovery Indicator (SRI). This supports mental health services to focus on recovery. Do you think staff can and should be encouraged to use this?

No. There are many tools to monitor recovery and many ways to ensure boxes are ticked. If someone is given support they will reduce or eventually cease to return to the system, that is a measure which can be utilised just as effectively Client satisfaction Before and After with comments posted by the patient in confidence to a collection point removed from the care worker.

Question 18: The Scottish Recovery Network is a group to make people aware of recovery from mental health problems. Do you think we can encourage professionals to use more recovery based processes?

Yes - There is a wide range of processes, counselling, horticultural therapy, green gym etc they should be used and funded as they have evidence of benefit to the patient.

Question 19: Can we support families and carers to be involved in care and treatment?

Yes - Why not, it is part of social cohesion and adds to the strength of the social matrix.

Question 20: Families and carers want to be involved in their relative's care. Can staff be supported to provide information for this to happen?

Yes - If the client / patient autonomy is respected and the issue of confidentiality is understood there will be areas that clients / patients may well agree to.

Question 21: Could the areas that have designed good services be a model to follow?

Yes - If it clear what good service means and appropriate definitions of this are given.

Question 22: We want to know who is using services and if they are accessible. Do you think the Scottish Government can make sure that this information is recorded?

Yes - but for some financial support may be required in order to ensure the data required is gathered, stored and produced in a format that is coherent.

Question 23: Is there a way that we can share information we learn about making services accessible?

Yes - It is called a data base but will it be accessible to all ?

Question 24: Do you think there are gaps in services?

Yes - NHS waiting lists of a year long! That is a big gap. Too many chiefs not enough indians comes to mind.

Question 25: Do you think more could be done to support the NHS and their partners to provide person centred care?

Yes - Change the culture of the "UPPER NHS SECTOR" to alter the perception it is their money to with as they please. It is tax payers money and tax payers that require it more than ever. Maybe it is time for Government to become more involved rather than doling out the money and setting targets. Let us look at the system in place systemically, not as in the past systematically. Why would a Manager require an assistant to the assistant but a heart surgeon functions without ?

Who does the patient want to see in a cricis the admin or the professional?

Question 26: Do you think that there are ways to help those with mental ill health issues in other settings, like prison?

Yes - Give financial support to those who in the past were visiting prisoners at the request of Prison Governors but for whom Government made cut backs. I think it is called reinstating lost finance. This has been an issue for many years and always talked about, just like now.

Question 27: 'Promoting Excellence' is an outline for staff who work with people with dementia and their families. Are there ways we can

support staff to use this to help those who need it?

Yes - Research is constantly giving greater information and training needs to be fully available. However, the impact on the family is still not fully recognised and the requirement for a family member to sometimes leave their job in order to become a full time carer has many issues allied to it that will create many problems in the future and with detrimental consequences on the Health service and the economy. Promoting Excellence requires to be fully defined.

Question 28: Could surveys be used to find out about staff experience?

Yes - That depends on the questions, who is being asked what and what is done with the answers.

Question 29: Do we need to support staff development?

Yes - To have a system based on CPD the answer is yes.

Question 30: We want to find ways to maintain training for staff. This could increase access to services. Can we promote this training?

Yes - But at what cost and for whom?

Question 31: Are there ways we can build on the information we gather to develop mental health services?

Yes, but they have to be implemented.

Question 32: We want all local care services to record information on care delivery the same way. Do you know how can we support this

NO

Question 33: Is there any other support needed to improve services?

Yes - Utilising the fully qualified individuals within the third sector.

Question 34: Do you think we can bring together local and national work resulting in improved mental health services?

Yes - but that is a model for government to agree on.

Question 35: Do we need to support staff so that care and treatment services follow the law?

Yes - Without cognisance of the law what do we have?

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