

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

The strategy does not link to current strategies.

There is nothing specific in about Psychosis and supporting individuals with severe and enduring mental health problems.

A Change Fund for Mental Health would enable a shift in provision of services into the community and the 3rd Sector.

Doesn't consider the impacts of benefits cuts on housing, poverty, debt and homelessness

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

Change fund for Mental Health

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

What is considered a good outcome? Who determines this, is it linked to targets?
Are all the outcomes clinical?

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

Protecting Benefits for individuals with a Mental Health Problem. Support for a range of options e.g. volunteering, part time employment that are long term, flexible and do not lose the individual a right to welfare benefits.

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

Support individuals to maintain their personal care needs, support interpersonal skill courses to help individuals communicate.
Link with housing providers to provide safe secure tenancies which are well supported and managed.
Work with employers to support flexible working, and employee support for employees with a mental illness
Awareness raising in schools, colleges

Taking the media to the press complaints commission regarding stories about "benefit scroungers" which increases the stigma people with mental health problems who are genuinely in fit for work experience.

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

Comments Health workers and care plans etc need to take an holistic approach to the individuals wellbeing, support for personal development, community engagement etc is as important as clinical considerations
People need to be seen as unique individuals and encouraged to develop in the best way for themselves.

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

Comments
We should be promoting community capacity within all communities at times of cuts. Additional resources are needed in small rural areas which do not score high on the index of deprivation, but can contain severely disadvantaged individuals

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
Early intervention work is imperative, support and parenting support for mothers of young children.
Clearer guidelines around responsibility, and programmes to combat bullying, in a changing media environment where young people can be bullied over the internet and by their mobile phone
Transport especially in rural areas is essential to enable children and young people to take part in activities with their peer group

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

Comments
Appropriate learning support.
Looked after young people should have an advocate
Good services for young people with a drug or alcohol problem that supports their educational needs

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

Self referral to a crisis service

Belief and respect from health services when individuals seek help, this needs to include individuals who self harm and may be diagnosed with a personality disorder.

Support to come off medication if the individual wants to.

24 hour services, people can be extremely unwell at night and NHS24 may not be the best support for people with a mental health need.

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

Comments

Recovery focussed services, WRAP training, access to advocacy

Respect and belief on the part of mental health and GP services.

Partnership working. Peer support.

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

Training for primary care including receptionists.

MHFA and other awareness programmes

Training for teachers

Training for psychiatric professionals by service users

Outcome 5: Appropriate, evidence-based care and treatment for mental illness is available when required and treatments are delivered safely and efficiently.

Question 12: What support do NHS Boards and key partners need to apply service improvement approaches to reduce the amount of time spent on non-value adding activities?

Comments

Who determines what are non value added activities?

Question 13: What support do NHS Boards and key partners need to put Integrated Care Pathways into practice?

Comments

Outcome 6: Care and treatment is focused on the whole person and their capability for growth, self-management and recovery.

Question 14: How do we continue to develop service user involvement in service design and delivery and in the care provided?

Comments

Service users and carers involvement needs to be integral and not tokenistic, service users can engage at every level if supported to do so. Consideration needs to be given to how best to support that engagement. It needs to be recognised that service users have considerable talents.

Question 15: What tools are needed to support service users, families, carers and staff to achieve mutually beneficial partnerships?

Comments

Listening and respect.

Question 16: How do we further embed and demonstrate the outcomes of person-centred and values-based approaches to providing care in mental health settings?

Comments

SDS for mental health, health professionals more aware of wider resources.
Recovery focused approaches
Actual implementation of the principles of the Mental Health Act. Institutions should have to demonstrate how they are doing this.

Question 17: How do we encourage implementation of the new Scottish Recovery Indicator (SRI)?

Comments

Embed in care plans

Question 18: How can the Scottish Recovery Network develop its effectiveness to support embedding recovery approaches across different professional groups?

Comments

Financial support to deliver across localities

Outcome 7: The role of family and carers as part of a system of care is understood and supported by professional staff.

Question 19: How do we support families and carers to participate meaningfully in care and treatment?

Comments

Clarity around confidentiality and the carers right to support.
Where confidentiality is not an issue the carers and families should be fully involved.

More support for Behavioural Family Therapy

Question 20: What support do staff need to help them provide information for families and carers to enable families and carers to be involved in their relative's care?

Comments

Training from carers

Research to find answers to questions posed, especially about medication.

Use of pharmacists and liaison with other professionals or voluntary organisations

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

We need a specific project on what is a better outcome and also information being available nationally on local initiatives

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

We need to ensure that confidentiality is maintained, and the individual does not get lost in the number crunching.



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

Comments

Training

Local knowledge, listening to service users.

Transport

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

Comments

Personality disorder, self harm, abuse

Holistic services for people with both physical and mental health problems.

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

GPs should be involved

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

Rehab services and supported accommodation should be highlighted.

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

We object to the word appropriate (who determines what is appropriate!)- the work force should treat all service users and carers with respect and should make every effort to enhance quality of life.

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

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

Comments

Morale is essential. Staff feel insecure because of the recession. There needs to be a period of consolidation not perpetual change.

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

Who determines this? What are acceptable outcomes? Are you going to ask service users what activity they value?

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

Comments

What clinical outcomes are considered relevant? Why aren't social and emotional being considered? Also quality of life.

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

There should be a mental health change fund.
Stability should be prioritised.

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

Comments

There needs to be good communication on a national level between all involved including service users and the voluntary sector. A specific project?

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

We are concerned that that does not always happen locally and that the condition of people can deteriorate while under treatment. The Mental Welfare Commission and Tribunals should look closely that all legislative requirements are being observed and if not should investigate what is going wrong – whether it is due to financial constraints or which staff need training.