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	

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			
·	·	***************************************	*************************************

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	A CHI LUMBAN MEMOR ENGAGE EN	<u></u>	, - 2	

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?

Comment		erateurananan ermanananarun naatataare erata. T	er en e e e e e e e escribitadorio macesta monero remeran escribidades	economical contract contracts of the second contracts	un deputation de la contrada de la c
M## + 40000+ 44. com - 4					
7	•				
,	,,		<u> </u>		

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

Promote community based projects that provide opportunities for integration between people with mental health problems and people without. Community gardens provide a fantastic opportunities to reduce the stigma of mental illness. They work with people from all walks of life, including people with mental health problems, but at most projects, everyone is treated the same. Gardening is a great leveller, and visitors to community projects, young and old, are able to see that people with 'problems' are just as capable as everyone else.

of men
·.
4
•
l quick
iges a
4-0 sepremanos voj medinoglada
A Commence of mathematical and a second of the second of t

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?

themselves to mai	****					town was to providing
People are often and hospitals. The alternative communication garden projects.	nerefore sup unity based Community	oport and fur I approaches / gardens pro	ding should to health, sovide non-th	d be made such as co reatening	e available ommunity g settings fo	for
people to maintal working with othe					eting and	SCOLLAND COMPONENT AND A STREET
The same and the s	gent or the latter and an electric and all registers are specified to consider the construction of the con	l the course of more to more that and make the desired make the transfer of more transfer to the transfer of mo	uastallika kalifaktiologiskoja unavarianten eritati - una un un un eritationale	rangad in a bridgest this relies who as she assisted a second of the se	destruction of the second seco	no your things to writing the
Question 10: Whathey need to?	it approach	es do we ne	ed to encou	irage peo	ple to seel	c help whe
Comments	monamanan is see a see si see see see see see see see see	1	es e e e e e e e e e e e e e e e e e e	aucauman puncus. M. e continu		
						Account of the second s
STREET THE STREET S	The second secon	1	o service es soci respectations de consideration de consi	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		N-4 200 222004000000000000000000000000000
Outcome 4: First in crisis or othe services quickly.	erwise, an					
Question 11: Wha we can identify m access to treatme	iental illnes					
Comments	innancialistica de la companio de l	* ()	anda - e-m , e- e et ni Su-Tre-e ni dende de dedición de dedición de designado de designado de designado de de	annen sama mana a consensionana cana	manunu, mangeria es en un	no control and the control of the co
						MERCINA ARRADO ANA ANAGONA ANA ANAGONA ANA ANAGONA ANA ANAGONA ANAGONA ANAGONA ANAGONA ANAGONA ANAGONA ANAGONA

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?

nme	nts	*	**************************************	Agen Karyan pa	*	ggaren viduko s essihó	AND AND PROPERTY OF AN ACCORDING	s 100-100 pt 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·		*					up weege	in adaption to topoge	ververer apostoenikos	
. •	, .	* 1	· ·			,			• ;			· ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		· ;.	•		· · ·		en e
	,					× ·					•••••••••••••••••••••••••••••••••••••••		7.			- 1			MONTH OF THE CONTRACTOR OF THE
	20 00.200 E1 P10 200		***************************************	· ·	m i managi	erokeonino.	less:mannesses		* 1000 Artes 100 Access			: 	***************************************	***************************************		2,000 cess tr.	*> / www.ma	, mmmmmmm	
stion	13	Wh	at su	ppo	rt de	οN	HS.	Boa	irds	and	key	par	tnei	rs n	eec	l to	put	Inte	egrate
Pat	hwa	ys in	to pr	acti	ce?														
nme	nts	received in audiospalarization	() jaan / de/naassassassa - 105 .	economicos x	solve serves	***************************************	estronomonomon 1 ; ;	ne e e e e e e e e e e e e e e e e e e		· (•••••••••••••••••••••••••••••••••••••••		· · ·	,	or a mornor ago	,		december of the second section of the section of th	2
				-	• • •	•	`	^		"				•			-	,`	
			,	:					•	•			٠,	•	· ·		•	`	
			*	, ·	,	•			. * *		· . · .					٠.		•	
					•		٠.	. •	;			•					3		
	stior Pal	stion 13: Pathwa	stion 13: Wha Pathways in	stion 13 What su Pathways into pr	stion 13: What suppo Pathways into practi	stion 13: What support de Pathways into practice?	stion 13: What support do N Pathways into practice?	stion 13. What support do NHS Pathways into practice?	stion 13. What support do NHS Boa Pathways into practice?	stion 13. What support do NHS Boards, Pathways into practice?	stion 13: What support do NHS Boards and Pathways into practice?	stion 13: What support do NHS Boards and key Pathways into practice?	stion 13: What support do NHS Boards and key par Pathways into practice?	stion 13. What support do NHS Boards and key partner Pathways into practice?	stion 13. What support do NHS Boards and key partners n Pathways into practice?	stion 13: What support do NHS Boards and key partners need Pathways into practice?	stion 13: What support do NHS Boards and key partners need to Pathways into practice?	stion 13. What support do NHS Boards and key partners need to put Pathways into practice?	stion 13. What support do NHS Boards and key partners need to put Inte Pathways into practice?

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?

It's essential to keep asking people what works for them. Hospitals and doctors will be effective for some people, alternative therapies with work for others and sometimes community based approaches will be most appropriate, or a combination of all three.

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

One of the most important factors for our members is secure funding. Stable funding for community garden projects/community based health projects means that they can focus on their service users, rather than fundraising. It also provides stability for service users because restructuring and staff changes are minimised, which is important to build and maintain service users' trust.

entred and va	lues-base	ed appr	oache	es to p	rovidin	g care	in me	ntal h	ealth	settir	igs?
Comments		t.	Super menero e a se a sepa.		***************************************		15 A A A A A A A A A A A A A A A A A A A		***************************************	Acceptation of the second seco	
		•		• •	£					• •	
		. ',			· · · · ·				÷		
	, ·			<i>:</i>	,			ď			· · · · · · · · · · · · · · · · · · ·
· ·		,				٠,		. 1	-	,	
		ediciones de la companie de la comp		***************************************	00000000000000000000000000000000000000		ran maramanan	**************************************	· · · · · · · · · · · · · · · · · · ·	***************************************	
uestion 17: F						ation c	of the i	new S	cottis	h Re	COV
dicator (SRI)	fally skilliger ,	경기 보인 경기 	ીર્વ તે વ્યુટ (સ્ટ્ર ન					ોરોઇન્ડેઇન્ડ્રેસ્ટ *			NWLL,
Comments	***************************************	,	Managana rawanana sara		entennesses o	***************************************	0.4.5.7679988504998404	***************************************		***************************************	
		,			*4				,		
		, ,	.,		. (:			,	'	
	. ,									•	one change in the case of the
· · · · · · · · · · · · · · · · · · ·		• .	·		٠.				• •		
namanana sinasinasina	************************************	~~~~~	t i se se se sessena	.) 	er samene en	* \$6868med 2000.0	1 1		Detroit in a magazin	***************************************	
t lating a ready a set out the title									ian a	* * F *	7,215.
mammananan e e e e e e e e e e e e e e e e e	manurumani	a aumanas an paragram	san an dirant in	nadori na nasani seki () (San	on seguan e ence as a co	a se saj sumanu	one and the second	·····	vieto ano na se nam	
mammananan e e e e e e e e e e e e e e e e e	onerumania	eter agunesetrustita etter ausertaisisseeri	ssur an direction	nderstudenssert E.	S. ASS WARRANT	am ngana s sacs us i w	a in a company	a companient		11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	
mammananan e e e e e e e e e e e e e e e e e	mateurational	ato augmentaria ette para ette	aane var afrang ra	nderstaanse en F	N 11 + 1 N 20 20 12 12 20 20 20 20 20 20 20 20 20 20 20 20 20	per 20 pipan 3 sinde en 4 co	a e e e e e e e e e e e e e e e e e e e	i de la constitución de la const		compression sea in referen	VVV00000000
mammananan e e e e e e e e e e e e e e e e e	managan ana ana ana ana ana ana ana ana a	ator magnine establish da a presenta a con-	een var een een een een een een een een een ee	nderstannin ett 1		an si gaan i saee aa e cc		and the second		vian am va a vair	
manananananan e e e e e e e e e e e e e e	naireacrainninin — e seu seu de)	and the following such		No. 24 n. P. Sala ha da ha ana an	per 30 gripana il mate acce acce	an escripcionario	on against an ann an		יינה מינה מינה מינה מינה מינה מינה מינה	
mammananan e e e e e e e e e e e e e e e e e			and the second second		TO be also be a	ner ste entre e	andrae	enterent en	(g	volume de ser esta que altre esta de la constanta de la consta	
Comments			SSA V V A ANNA A U V	andress and a second second	and the second s	um sämensettinesisten et e ete				The second secon	
Comments utcome 7: Th	ne role o	f family	and	carer	s as pa	art of				The second secon	
Comments utcome 7: Th	ne role o	f family	and prof	carer	s as pa	art of				The second secon	
utcome 7: The derstood an	nd suppo low do w	rted by	/ prof	fessio	nal sta	eff.	a syst	em of	care	is.	
utcome 7: The derstood an	nd suppo low do w	rted by	/ prof	f essio imilies	nal sta	iff. arers	a syst	em of	care	is.	
utcome 7: The derstood and treatments	nd suppo low do w	rted by	/ prof	f essio imilies	nal sta	iff. arers	a syst	em of	care	is.	
utcome 7: The derstood and treatments	nd suppo low do w	rted by	/ prof	f essio imilies	nal sta	iff. arers	a syst	em of	care	is.	
utcome 7: The derstood and treatments	nd suppo low do w	rted by	/ prof	f essio imilies	nal sta	arers	a syst	em of	care	is.	
utcome 7: The nderstood and uestion 19 are and treatments	nd suppo low do w	rted by	/ prof	f essio imilies	nal sta	arers	a syst	em of	care	is.	
utcome 7: The nderstood and uestion 19 have and treatments	nd suppo low do w	rted by	/ prof	f essio imilies	nal sta	arers	a syst	em of	care	is.	

ť.

care?	arers to er	iabie iam	illes and	carers to	be involv	ed in their	relative
Comments	AMERICAN COLOR COL	anamanan an an an an an an an an		nation na deur stad deur (difference) deur deur deur deur deur deur deur deur			
		2 200000 300000 300000 30000 472 Yes - 50 40 40 Yes -	· · · · · · · · · · · · · · · · · · ·				
				*	· · · · · · · · · · · · · · · · · · ·	•	
Outcome 8: T meet the nee							
Question 21: I				, -	,		
those areas t	hat have re	edesigned					
works to delive	ar better on	icomes /			ka in Josephia .		
Events for ne							
not be neces networks (eg							,
HOLLING TOS							
Community F	ood and He	ealth Scotl	land, Çon	nmunity H	ealth Exch	nange)	
Community F already work	ood and He with commi	ealth Scot <mark>l</mark> unity proje	and, Con	nmunity H support pe	ealth Exch	nange) mental	do the constraint and the second and
Community F already work health proble	ood and He with commi ms. Use th	ealth Scotl unity proje ese netwo	and, Con ects that s orks both	nmunity H support pe to find ou	ealth Exch ople with r what worl	nange) mental ks, and to	de de - de acondreption decisiones en mon mêm de la decisión decisión de la decisión decisión de la decisión decisión de la decisión decisión decisión de la decisión decisión decisión de la decisión de
Community F already work health proble distribute info at the Royal I	ood and He with commi ms. Use th ormation abo Edinburgh H	ealth Scotl unity proje ese netwo out succes lospital, w	and, Con ects that s orks both ssful proje hich offe	nmunity H support pe to find ou ects (eg: t rs opportu	ealth Excheople with retwhat world twhat world he communities for communities	nange) mental ks, and to inity garden community	de jain - de amerijen kun desdekking de jain allen - de de amerijekki
Community F already work health proble distribute info	ood and He with commi ms. Use th ormation abo Edinburgh H	ealth Scotl unity proje ese netwo out succes lospital, w	and, Con ects that s orks both ssful proje hich offe	nmunity H support pe to find ou ects (eg: t rs opportu	ealth Excheople with retwhat world twhat world he communities for communities	nange) mental ks, and to inity garden community	de en
Community F already work health proble distribute info at the Royal I	ood and He with commi ms. Use th ormation abo Edinburgh H	ealth Scotl unity proje ese netwo out succes lospital, w	and, Con ects that s orks both ssful proje hich offe	nmunity H support pe to find ou ects (eg: t rs opportu	ealth Excheople with retwhat world twhat world he communities for communities	nange) mental ks, and to inity garden community	
Community F already work health proble distribute info at the Royal I	ood and He with commi ms. Use th ormation abo Edinburgh H	ealth Scotl unity proje ese netwo out succes lospital, w	and, Con ects that s orks both ssful proje hich offe	nmunity H support pe to find ou ects (eg: t rs opportu	ealth Excheople with retwhat world twhat world he communities for communities	nange) mental ks, and to inity garden community	MARKETON OF THE PROPERTY OF TH
Community F already work health proble distribute info at the Royal I	ood and He with commi ms. Use th ormation abo Edinburgh H	ealth Scotl unity proje ese netwo out succes lospital, w	and, Con ects that s orks both ssful proje hich offe	nmunity H support pe to find ou ects (eg: t rs opportu	ealth Excheople with retwhat world twhat world he communities for communities	nange) mental ks, and to inity garden community	
Community F already work health proble distribute info at the Royal I members and	ood and He with comming. Use the committee of the with committee of the co	ealth Scotl unity proje ese netwo out succes lospital, w to work to	and, Con ects that s orks both ssful proje hich offe ogether in	nmunity H support pe to find ou ects (eg: t rs opportu the same	ealth Excheople with retwhat work he communities for communities is impro	nange) mental ks, and to nity garden community ty garden).	
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi	ood and He with common with common ms. Use the reach mority and	ealth Scotl unity proje ese netwo out succes lospital, w to work to	and, Con ects that s orks both ssful proje hich offe ogether in	nmunity H support pe to find ou ects (eg: t rs opportu the same	ealth Excheople with retwhat work he communities for communities is impro	nange) mental ks, and to nity garden community ty garden).	
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi	ood and He with common with common ms. Use the reach mority and	ealth Scotl unity proje ese netwo out succes lospital, w to work to	and, Con ects that s orks both ssful proje hich offe ogether in	nmunity H support pe to find ou ects (eg: t rs opportu the same	ealth Excheople with retwhat work he communities for communities is impro	nange) mental ks, and to nity garden community ty garden).	
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to miaccess services	ood and He with comming. Use the committee t	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both ssful proje hich offe ogether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with recommunities for communities for communities improved the communities who make the communities which is a second to community with the communities of the communities which is a second to community with the communities of the communities of the communities which is a second to community with the communities of the communit	nange) mental ks, and to nity garden community ty garden) oved to give	therwis
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi access service Question 22:	The reach nority and ces.	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both esful proje hich offe gether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with retwhat work he communities for communities is improse who makes a who makes to he communities who makes who makes to he communities is improse who makes who makes to he communities who makes who makes who makes who makes who makes to he communities who makes who m	nange) mental ks, and to nity garden community ty garden) oved to give	therwis
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi access services and the community of	The reach nority and ces.	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both esful proje hich offe gether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with retwhat work he communities for communities is improse who makes a who makes to he communities who makes who makes to he communities is improse who makes who makes to he communities who makes who makes who makes who makes who makes to he communities who makes who m	nange) mental ks, and to nity garden community ty garden) oved to givenight not of	therwis
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi access service Question 22:	The reach nority and ces.	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both esful proje hich offe gether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with retwhat work he communities for communities is improse who makes a who makes to he communities who makes who makes to he communities is improse who makes who makes to he communities who makes who makes who makes who makes who makes to he communities who makes who m	nange) mental ks, and to nity garden community ty garden) oved to givenight not of	therwis
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi access services and the community of	The reach nority and ces.	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both esful proje hich offe gether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with retwhat work he communities for communities is improse who makes a who makes to he communities who makes who makes to he communities is improse who makes who makes to he communities who makes who makes who makes who makes who makes to he communities who makes who m	nange) mental ks, and to nity garden community ty garden) oved to givenight not of	therwis
Community F already work health proble distribute info at the Royal I members and Outcome 9: access to mi access services and the community of	The reach nority and ces.	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both esful proje hich offe gether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with retwhat work he communities for communities is improse who makes a who makes to he communities who makes who makes to he communities is improse who makes who makes to he communities who makes who makes who makes who makes who makes to he communities who makes who m	nange) mental ks, and to nity garden community ty garden) oved to givenight not of	therwis
Community F already work health proble distribute info at the Royal I members and Courses to minaccess to minaccess services and the community F access to minaccess and the community F already in the community F access to minaccess services and the community F access to minaccess to minaccess to minaccess services and the community F access to minaccess	The reach nority and ces.	ealth Scotl unity proje ese netwo out succes lospital, w to work to of menta high risl	and, Con ects that s orks both esful proje hich offe gether in al health k groups	nmunity H support pe to find ou ects (eg: t rs opportu the same services and tho	ealth Excheople with recommunities for communities is improse who mused to harmonic exceptions.	nange) mental ks, and to nity garden community ty garden) oved to give night not of	therwis

Comment	S		٠. ,	•		. •	×, , , ,	<i>:</i> . , , , , , , , , , , , , , , , , , , ,					`.
· · · · · · · · · · · · · · · · · · ·	. •	•			• ''	i	٠		, ,	٠.			
•	¥.			` .			•				5		
	,	•	•			(. · · · ·	, , ,	,					
			. *	**		٠.							
tipage administration of the company				••••••••••••••••••••••••••••••••••••••	**************************************	، ر آ				······································	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
uestion 2	4: In ac	idition	to s	ervice	s for	older	people	. dev	elopr	nenta	l diso	rders	a
auma, are													45
••••••		management of the second		JOSEPH STATE OF THE STATE OF TH	· · · · · · · · · · · · · · · · · · ·			naar aasaa ee i			•••••••••••••••••••••••••••••••••••••••		
Comment	S .			· · ·					t		٠	***	
		·.,		,			•		; ,				
•	···	•						•					,
•	•				•				· .				,
, , ,													
		•		· · · ·									
	*** ** ********************************	· · · · · · · · · · · · · · · · · · ·	t .	ensoners y y You	economis se cos se en	and the second s	monomo enecumos sorr	mer fr govern	***************************************		marana sersenen		
r en	ner rennammunum		* } 	***************************************	esperal server of re-	د مر لا این چینوور مین به در همین د مر لا پی	mountaines entecommen somm	weer for generally	e era'r sagannannannannannannannannannannannannan	marare meranan	ooneering of the section of the sect		
earning d	isability	and	subs	stance	e mis	use a	nd are	inte	grate				
Outcome earning d uch as pr	isability risons, c	/ and care h	subs iome	stance s and	e mis gene	use a eral m	nd are edical	inte setti	grate ngs.	ed in	other	sett	ing
earning duch as pr	isability risons, c 25: In a	/ and care h	subs ome n to	stances and	e mis gene work	use a eral m	nd are edical ly in i	e inte setti place	grate ngs. ్రి	ed in	other	sett Nati	in(
earning duch as providestion 2 emential	isability risons, o 25: In a Demons	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ing or ye
earning duch as pruestion 2 ementia ink we sh	isability risons, o 25: In a Demons	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ing or y
earning duch as production 2 ementia link we shoot togeth	isability risons, o 25: In a Demons lould be ner to de	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ing or ye
earning duch as providential section in the contraction in the contrac	isability risons, o 25: In a Demons lould be ner to de	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ing or ye
earning duch as providential section in the contraction in the contrac	isability risons, o 25: In a Demons lould be ner to de	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ine or y
earning d uch as pr	isability risons, o 25: In a Demons lould be ner to de	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ing or ye
earning duch as production 2 ementia link we shoot togeth	isability risons, o 25: In a Demons lould be ner to de	y and care haddition trator doing	subsome nome sites	stance s and the s and onally	e mis gene work Lear to su	eral malareaction	nd are edical ly in i Disabili	e inte setti place ty C/	egrate ngs. to s MHS	ed in Suppo S, Whi	other it the at els	sett Nati e do	ine or y

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?

It will be important to provide services (eg. community based projects, like community gardens, offering volunteering) to help prevent mental ill health for people who have been made redundant/have been unemployed for a long time due to the current economic situation.

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		
	· · · · · · · · · · · · · · · · · · ·	
	(
anning and the second and the second		

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	,
V.	
. ,	

Comments		er erner og ernsternsstationsstationsstations		*	······································	************************]	
	, .	• •	٠.		•				
			,	` ' #		• ;		· .	1 ,
							•. •		,.
				•		,	\$ 1	`	
sur-man-recommendation and management of the state of the	management of the contract to make the contract to the contrac	ergene nemerance sample aconsensations access		*	000/400e~v.or/~xoreexx00000	***************************************	_ 1		٠.,
Question 30: How	do we en	sure that	we have	sustair	able tr	aining	capac	ity to	deliv
etter access to p	sycnologic	aı tnerapı	ies 🐠 🔭	4SS\$.[#		Ali siy (Ja	Libert 199		ilk. 13
			•		•				
Outcome 12: We									
asis of national	and local	data on	capacity	y, activi	ity, out	puts a	nd ou	tcom	es.
Question 31 In ac	dition to th	ne curren	t work to	further	develo	n natio	nal be	nchm	arki
esources, is the	re anythin	a else w	e should	be do	ing to	enable	e us t	o me	et th
	O. GILLY CLAIN IS		O, OIIO 410						
							學科教		Victor Victor
hallenge.	ers commente and a second			*******************************		***************************************			
hallenge.	Modes (1994) der Stadt in der oder det det de	nde- se communicatement		MANAGEMENT TO COMPANY AND AND	manananaamas manas	anners at with Anners on State			
hallenge.				MIRACONOMO CONTON THE STANKE AL STANK CONT	mangananana sumas sumana sumana sumana s	and the second s		or and a successful and	
hallenge.	And the control of th	To the second se	THE STATE OF THE S	AND THE RESIDENCE OF THE PARTY	mental desired	Annual An	arm a et analomentenar	The state of the s	
hallenge.	mass control and the control measurement of	Andrew vice or requirements to construct the construction of the c	CONTROL OF THE PARTY OF THE PAR	закантолого чества не	monton and a monto	The second secon		The second secon	
hallenge.	Moder of the Production and the Control of the Cont		TO COMPANY TO THE PARTY OF THE	MARCHINE CONTRACTOR ACCIONAL	mmoore, manada	and the second s			
hallenge. Comments	moder of the Production and the Control of the Cont				mental del construcción de la co	and the second server at a second		And the second s	
hallenge Comments Question 32 Wh	at would's		ervices		n their	and the second server at a second		And the second s	
hallenge Comments Question 32 Wh	at would's		ervices		n their	and the second server at a second		And the second s	
nallenge Comments Question 32: Who it comes reporting	at would's		ervices		n their	and the second server at a second		And the second s	
Comments Question 32 Whitcomes reporting	at would's		ervices		n their	and the second server at a second		And the second s	
Comments Question 32 Whoutcomes reporting	at would's		ervices		n their	and the second server at a second		And the second s	
Comments Question 32 Whoutcomes reporting	at would's		ervices		n their	and the second server at a second		And the second s	
hallenge.	at would's		ervices		n their	and the second server at a second		And the second s	

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.

		Total and a second	The section of the se	Newscommission of the second			·. ·
			*			2000	
						***************************************	٠.
Comments	, ar y z zamowa kaza zamene opaneko dube « opopanego zon » "ko» – v	(a-a-p-), with an improvement specific weeks, con-time considerations		10000000000000000000000000000000000000		**************************************	
	`` ``}						,
		•)		·		· · · · · · · · · · · · · · · · · · ·	
and the second of the second o			National discourse and a second secon	Melandra 4th à martin 2011, an thailleadh (1880) (1874) (1872)	THE THE BEAUTY AND A COMMISSION SERVED SERVED AND A SERVEY A SAME		- `
				, .			
odel in r	espect of ess, learni ∷How do	egal frame f the treating disabilit we ensure legislative	ment, care ty and pers that∛staff⊱ar	and protesonality dis	ection of orders.	individuals	s W
	iŭaliue Mitu		, .				1 /
delivered		a 14 mar and an ann an	ndepartement account of the contract of the co	na parainennessa anno anno anno anno anno anno anno a		osocy noo prouve entrover . A crear	٠,
delivered	In III e With	2 23 56 10 450 1935 15 16 16 16 16 16 16 16 16 16 16 16 16 16	Medica del Colonia de Laconomia de Colonia d	na accommendamental commendamental c		and	, , , ,
		1.11 VIR ARTERIOLY ON 12 C ACCEPTANCE	оментикали с с сост	na Manarono contra di mandra di Santa d	00000000000000000000000000000000000000	mercula plane value — mr. P	` ^