

NHS 24 RESPONSE TO THE "MENTAL HEALTH STRATEGY FOR SCOTLAND 2011-15: A CONSULTATION"

INTRODUCTION

NHS 24 welcomes the opportunity to comment on this Strategy which contains many positive aspects from an NHS 24 viewpoint.

We welcome the continued emphasis placed by the Minister on involvement of the third and private sectors in this agenda.

NHS 24 takes seriously its responsibility to involve third sector organisations. In particular, we have recently been working with Alzheimer's Scotland and the Scottish Consortium for Learning Disability to understand how we can improve the service we provide to these sections of the population.

Through Breathing Space we have linked with many other third sector organisations such as Veterans First Point and with private organisations such as the link between Motherwell Football Club and Breathing Space.

We welcome the continuing emphasis on promoting positive mental health as well as the early recognition and treatment of mental illness. While raising awareness of mental health problems and reducing stigma are fundamentally important, we also need to actively promote awareness of how to access services at all levels of severity.

We welcome the continuing commitment to mental health related HEAT targets within the mental health service.

Turning to specific questions, outcome 1:

Question 1

- Driving the vision outlined in the Minister's Foreword into action is a significant challenge. We need to embed the ethos of mental health awareness across public and third sector organisation to reduce stigma.
- We need to ensure that the mental health or psychological aspects of service delivery are considered in all new service developments in NHS Scotland. For example, in relation to Dementia, we need to make sure that psychological/psychiatric service development is embedded within all Change Fund planning to ensure we meet the mental health needs of older people with long-term conditions, Dementia and frailty.

Question 3 – We have the following comments to make:

- Scottish Government should continue its focus on promotion of positive mental health.
- In addition, national services which enable alternative ways of accessing services must be promoted. NHS 24 currently provides a national telephone

based Guided Self Help and telephone based CBT, the NHS inform website and the digital television platform. Going forward we wish to promote online access to computerised CBT, alcohol screening and Alcohol Brief Interventions and treatments for identified alcohol problems.

- We must continue to support a national suicide strategy led by Choose Life which brings together many sections of society to raise awareness and provide further training opportunities around Scotland. This would include ASIST or alternative shorter courses for public sector staff and the general public to be able to access.
- NHS Scotland should continue to identify "places of concern" and, work in partnership with local councils, police and Transport Scotland to offer solutions without alerting the public.

Question 4

- NHS 24 has truly grasped its responsibility to promote access for difficult to reach sections of the population. We would recommend involving the Equality and Diversity leads at National and Board level to promote awareness of mental health, mental illness prevention, common mental health disorders and the associated stigma and discrimination which people suffering from mental health problems can experience.
- Telehealth & Telecare have demonstrated significant benefits to people who have a mental health problem and who live in the most remote and rural areas of Scotland. Work is continuing to improve access to specialist mental health services via videoconferencing in substance misuse, forensic psychiatry, neuropsychology and Dementia. The Dementia work is being piloted in a remote care home setting where the residents have limited access to specialist services. These services will further demonstrate the use of technology to improve access for the most difficult to reach populations in Scotland.

Question 5

- The "See Me" campaign should be integrated into organisations' activities rather than being seen as events which happen intermittently. We need to adopt a common language for mental health promotion which is shared and understood by all constituents, across health, education, social work and the third sector.
- NHS Scotland should increase "patient awareness" of services which enable alternative ways of accessing services. This would include the NHS 24 telephone based guided self help, the NHS Inform website and the digital television platform "Looking Local".

Question 9

- Ensuring that the Scottish population is enabled to take actions to maintain and improve its health and to seek help when its needs to is a complex

challenge which requires a sustained public awareness campaign. Such a campaign

- must use simple language, normalise Mental Health issues and promote self help
- should target different groups in different ways
- include Voluntary Organisations
- be adequately resourced.

Question 10

- NHS 24 will continue to develop alternative technology based ways of promoting and accessing health services. This will include:
 - Supporting service delivery to vulnerable groups using Telehealth Care @ Home. The DALLAS project will test the delivery of such services at scale to identify and deliver efficiencies while providing safe care to enable people to remain at home.
 - The NHS Inform patient information website and the Looking Local digital TV platform.
 - Testing the feasibility of using SMS technology to deliver mood disorder services.
 - Working in partnership with STRADA to establish the feasibility of delivering alcohol and substance misuse training via videoconferencing to the SPS and NHS Boards in Scotland.
- In addition NHS Scotland should consider promoting
 - TV, Bill Board, Train Station media, etc. to advertise and raise awareness of options for the Scottish public
 - Government sponsored health information slots on TV
 - Using the developing Local TV to deliver more tailored messages
 - A culture of 'self-help' in schools though links with colleagues in education

Question 11

- Reducing stigma and enabling people to seek out help when required are key components of the strategy which have been addressed in earlier questions. As these aspects of the strategy are delivered NHS Scotland must increase the options for self directed "treatment" of minor conditions. This can be done by providing information and, where appropriate, self directed treatments such as computerised CBT and access to online assessment and targeted information for problems such as alcohol misuse. Such services need to be available in a range of modalities and locations.

- The use of digital TV, mobile phone, ipads and computers to access information is transforming the way in which the population accesses and acts upon information. As a national health technology service, NHS 24 should be challenged to deliver regular briefings for NHS Scotland on the opportunities for mental health service developments which will assist in the delivery of this strategy while improving patient safety, delivering efficiencies for NHS Scotland, and supporting delivery of any agreed developments.
- The public does not currently link physical and mental disorders. NHS Scotland must assertively promote an holistic approach to understanding health problems amongst the public, health, social care and voluntary sector staff to understand the significance of physical symptoms as the earliest indicators of definable clinical mental health problems, illness or disorder.

Question 12 and 13

- NHS 24 recommends that all mental health service redesign initiatives must consider how technology can be used to support the delivery of improved services. Furthermore, such redesign initiatives must deliver activity data as a by product of the clinical intervention. NHS 24 will continue to work with territorial boards to deliver evidence based services nationally on behalf of NHS Scotland where clear benefit can be gained from such interventions.

Question 14

- As stated in our introductory comments NHS 24 takes seriously its responsibility to involve third sector organisations in the design of our services. We will continue to involve a wide range of third sector organisations in our mental health service developments.

Questions 19 and 20

- In line with the Scotland's Carers Strategy, NHS 24 fully supports the appropriate involvement of relatives and carers while acknowledging that the decision to share information with carers can be difficult. NHS 24 strongly supports the development of the national Key Information Summary, (a development of the emergency Care summary). NHS Scotland must promote the use of this summary for people with complex mental health problems as this will enable the appropriate involvement of carers in decisions in the "out of hours" environment.

Question 21

- NHS Scotland has indeed shifted the balance between hospital and community based care. The next challenge is to shift the balance, where appropriate, from community based service delivery to self-directed access to information and treatment where appropriate. NHS 24 has a range of services within this space which we will promote to service providers and the population.

Question 24

- NHS 24 provides a BSL (British Sign Language) service to enable this community to access Breathing Space. We also liaise closely with the Armed services and Veterans associations to promote the NHS 24 mental health services to this population. Prisoners are known to experience high levels of mental disorder and Forensic Psychiatry services provide services to all prisons in Scotland. The use of technology based services for this population is being explored to support efficiencies and to increase access for the prison population to services such as computerised CBT.
- The health of those held in custody is also subject to review nationally. NHS 24 is working with police and health board colleagues to explore service redesign.

Question 25

- NHS Scotland must promote the use of the Key Information Summary in mental health to ensure that important information about an individual's wishes and care requirements are available in the "out of hours" environment.

Questions 28-31

- NHS 24 has successfully developed a telephone based GSH and CBT service over the last 3 years. We have developed a business case to provide a national computerised CBT (cCBT) service, which if accepted, will provide an evidence based CBT intervention as a tier 2/3 level intervention without the need for specialists to deliver the treatment. This must be factored into workforce planning going forward.
- The cCBT service will provide data to monitor clinical outcomes, operational service management and service development as a by product of treatment.

Question 33

- All NHS 24 services are technology enabled. The central role in the provision of emergency triage and referral for appropriate treatment, either within NHS 24 or from another emergency service, is provided by trained staff communicating with the patient to assess the clinical situation. NHS 24 staff rely on technology to reach an outcome agreed with the patient. Many Mental Health services across Scotland do not benefit from the ability to use technology in real time to support care decisions and delivery. Going forward, NHS Scotland must grasp this nettle to ensure that mental health service developments are prioritised in Board eHealth delivery plans.

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