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 tb 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 Overall, we would have liked to have seen a greater emphasis on person-centred care and a recognition of the importance of a recovery focused strategy based around a social model pf mental health. Outcomes for people with mental health challenges are complex and there needs to be a greater recognition that people's journeys are sometimes as important as where they arrive at e.g. a job. A supportive process of recovery from mental health challenges that is person-centred, can lead to more sustained periods of wellness, rather than one purely based on diagnosis.

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 It is important to learn from good practice of cross organisational progressive changes from within and outwith Scotland on the redesign of services. In times when budgets are tight, new, creative, innovative approaches can often work. Local authorities and the NHS need to work better with Third Sector organisations which can often respond quicker. More creatively and more efficiently to tackle particular issues and provide a quality experience for service users.

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

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
Introduce mental health and well-being education in primary and secondary schools. Emphasis on mental health should be as strong as on physical health.

People who are well-connected are more likely to have supportive relationships that can prevent them from being admitted into acute services. We need to work with people with mental health challenges to increase awareness of wellness tools such as WRAP and group peer support. Information on support organisations needs to be readily available in a range of formats and accessible to all who may need help.

More suicide awareness/first aid training should be available. ASSIST training should be adapted to suit a Scottish audience.

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
There needs to be a greater awareness among the general population that people can and do recovery from mental health problems. Positive personal stories help, as do role models of people in the public eye.

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
By having national advertising campaigns and further training of media champions who can challenge negative mental health stories in the press. Showing that mental health is something that is everyone's concern, just our physical health is everyone's concern.

We need to change culturally how we perceive feelings and emotions that encapsulate the full gamut of human experience. That includes the notion that it's ok to ask for emotional help and that it's not a sign of weakness.

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

Comments We need to do more highlight activities that can help keep people well, such as physical and therapeutic activities. Gardening is a great therapy and more needs to be done to promote its health and well-being benefits. Further research needs to be carried out on the impact of participating in gardening on maintaining good mental health.

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

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

Comments

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.

Comments People need information in the right place at the right time and in the right form. They also need to know where they can seek help locally (what is available). Information resources on mental health varies around the country. Could there be one website portal covering all of Scotland holding general information and advice about mental health (including wellness tools), with links to local services? This would avoid each local authority area having tp create their own information resource.
There needs to be greater awareness of WRAP and other wellness tools, as these facilitate self management and put the power back to the individuals. Peer support is also helpful for many people. Learning from and being with people with lived experience can be a powerful antidote tb the loneliness of many people's personal experience of mental health challenges.

Comments It must be made easier for people to access support when they need it. Information on what support is available locally needs to be easily accessed, including national helplines such as Breathing Space and the Samaritans. Out of hours services are often not as good as those available during office hours. Staff in NHS24, and A & E need to be trained in mental health to be more empathetic and supportive to people experiencing emotional challenges.

Those in employment need employers who understand mental health and support their staff to seek help when they need it. Initiatives like the Mindful Employer, which is aimed at increasing awareness of mental health in the workplace and Healthy Working Lives, which promotes health and well-being in the workplace should be promoted.

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.

Comments There should be a range of options available to people in crisis to access support, including peer-led crisis initiatives similar to the Leeds Survivor Led Crisis Service, which provides an out of hours service to people in acute mental health crisis. This service responds to the needs to people who use the service and reflects the experts by experience of those who run the organisation. The positive outcomes of this type of service show that it is worth considering similar models of service in Scotland.

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

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?

CommentsLocal authorities should address the gaps in group/collective advocacy provision in Scotland; and where advocacy needs are identified these should be fully funded.

There should be a statutory requirement placed on public services for service user involvement in the commissioning and procurement of services. This should include investment in service user involved research and service user involvement in the evaluation of services.

Service user involvement must at all times be 'meaningful', and must be integrated at all levels of decision-making within statutory, private and Third Sector organisations.

Support should be given for the development of user-led services, as these empower people with mental health challenges to become, 'experts by experience', provide valuable peer support that mutually benefits the person receiving and giving support.

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

> Comments Useful tools and forums such peer support, WRAP and other self-management tools are needed to support the range of stakeholders and to develop mutually beneficial partnerships. There needs to be clear plans and support structures in place so that each stakeholder knows where they fit in the network of support around individuals with mental health challenges. Access to information, therapeutic and useful activities, access to develop employability skills, the support the development of user-led services, are all important. All services and support needs to be based within strong recovery-based practice, which is strength focused.

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 It needs to be acknowledged that the process of supporting someone can be an outcome in itself if it is person-centred and recovery focused. The person at the centre receiving care should also be supported to direct their own care, with sufficient support and information in place for the person to be able to make decisions that are in their own interests.
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> Service user involvement and feedback needs to be integrated into all levels of decision-making at local and national level to ensure that services reflect the needs of those that use them. This way, services will most likely meet the outcomes that the service user themselves set.

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

> Comments Highlights the benefits of adopting the SRI as a measure and the positive outcomes that result from using the tool.

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

> Comments

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

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

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 Staff in community and inpatient facilities shpuld experience the 'other' side to increase their knowledge and understanding. This will lead to them doing their job better and potentially help the service user when discharged from hospital.

Integrated and partnership work between and across statutory and Third sector organisations needs to be encouraged to produce better outcomes for service users.

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

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

Comments

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

Comments

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 Person-centred services should tackle need rather be based on diagnosis.

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

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

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

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

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Comments



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

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Comments



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

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Comments



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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

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

Comments

Outcome 14: The legal framework prombtes 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