EAST AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

INTEGRATION JOINT BOARD: 8 MAY 2019

**THE AYRSHIRE MENTAL HEALTH CONVERSATION; PRIORITIES AND OUTCOMES
2019 – 2027**

<u>Report by Thelma Bowers, Head of Service, Mental Health</u>

Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	√
	2. East Ayrshire Council	
	3. NHS Ayrshire & Arran	

PURPOSE

1. The purpose of the report is to present the Ayrshire Mental Health Conversation: Priorities and Outcomes. This document has been commissioned by East Ayrshire, North Ayrshire and South Ayrshire Health and Social Care Partnerships, in partnership with NHS Ayrshire & Arran. This strategic response aims to provide a consistent Ayrshire response to the Scottish Government Mental Health Strategy 2017 - 20127 and to set out some shared priorities. This response is about how we will support people to achieve and maintain mental wellbeing.

BACKGROUND

2. In March 2017, Scottish Government published its Mental Health Strategy 2017–2027 as a focus for improving mental health across Scotland. The national strategy reflects the wider public health approach required to improve mental health across the whole population. This document is our local response to the national strategy and subsequent progress report. We have engaged with the people of Ayrshire and together we have developed our strategic response, which dovetails local priorities and anticipated outcomes with national themes. At its heart, this document's aim is to ensure our communities have access to the right support, at the right time, with the right person.

AYRSHIRE MENTAL HEALTH CONVERSATION; PRIORITIES AND OUTCOMES 2019 – 2027

3. The Ayrshire Mental Health Conversation; Priorities and Outcomes 2019 - 2027 has been supported by a small pan-Ayrshire mental health strategy engagement team, including staff from the three Ayrshire health and social care partnerships, Scottish Recovery Network (SRN) and Scottish Health Council (SHC). The team has undertaken some key activities and events to ensure the views of a wide range of people are included throughout. This strategic response recognises seven key priorities with associated outcomes.

4. This strategic response does not set out implementation plans for any agreed priorities. These will be contained in local implementation plans and will need further and detailed planning. Measuring progress for actions will be reviewed and reported through an agreed governance framework.

CARER/ PEOPLE WHO USE SERVICE IMPLICATIONS

5. This document positively promotes mental health priorities for carers and people who use this service across the lifespan.

FINANCIAL IMPLICATIONS

6. The priorities and outcomes developed in the strategic response requires no new funding. A finances section is included within the document. Implementation plans may identify future funding requirements when developed.

HUMAN RESOURCE IMPLICATIONS

7. No implications identified.

LEGAL IMPLICATIONS

8. No implications identified

COMMUNITY PLANNING

9. Not applicable

EQUALITY IMPLICATIONS

10. Impact assessment to be completed once approved

RISK IMPLICATIONS

11. No risks identified

RECOMMENDATIONS

12. It is recommended that Members:

   (i) approve the Ayrshire strategic response to the Scottish Government's Mental Health strategy 2017 – 2027;and
   (ii) to otherwise note the content of the report.

Thelma Bowers
Head of Service Mental Health Services
North Ayrshire Health and
Social care Partnership
8 May 2019

Implementation Officer; Thelma Bowers, Head of Service Mental Health Services, North Ayrshire Health and Social Care Partnership

The Ayrshire

MENTAL HEALTH

Conversation

A strategic response to Scottish Government's Mental Health Strategy 2017–2027

Priorities   And Outcomes

2019–2027

Contents

Foreword

It is my pleasure to introduce **The Ayrshire Mental Health Conversation: Priorities and Outcomes** in response to the *Mental Health Strategy 2017–2027* published by Scottish Government (2017).

This document sets out local priorities and achievable outcomes aligned to the national actions, and offers flexible, diverse opportunities for our localised approach. The overarching aim of the national strategy and our local response is to support improved health and wellbeing of local people in our communities.

It is acknowledged that, where possible, the intentions of a 'once for Scotland' approach is reflected in our ambition of a 'once for Ayrshire' approach, ensuring equitable supports and care opportunities across the area. We also recognise that bespoke approaches and tailored activities are needed within all three health and social care partnership areas to reflect specific local challenges and needs.

This response has been developed in a truly collaborative manner ensuring the people within our communities – their views, ideas and concerns – are at the centre of our intentions. I'd like to express my thanks to the large numbers of citizens who contributed, influenced and led on the development of this response. We now have a way ahead, reflecting the views of people across Ayrshire – their wishes and expectations of mental health and wellbeing services – and includes the views of statutory and third sector organisations.

Scottish Government's *Mental Health Strategy 2017–2027* was launched in 2017 and work has been undertaken in Ayrshire, aligned to 40 recommendations in the national strategy. We were keen to ensure effective public engagement in setting out our future plans (up to 2027) and now feel we have achieved a genuine reflection of our common vision.

Our priorities and outcomes are designed to be responsive to changing needs and will be reviewed over the course of the intended time frame. We will create localised implementation plans with details of approaches and work undertaken to achieve our strategic priorities. These will include a suite of measures to provide evidence of impact and progress.

We welcome active participation from our communities in progressing positive mental wellbeing within our society. We endorse this strategic response as one developed equally by our citizens and local health and social care providers.

Thelma Bowers
Head of Mental Health Services, North Ayrshire Health and Social Care Partnership

Introduction

Mental health is a key part of wellbeing, both for individuals and communities. Open discussion about mental wellbeing, mental ill-health and mental disorders is now, rightly, more prevalent in our lives. Mental wellbeing is defined as:

> *Mental wellbeing is about both feeling good and functioning effectively, maintaining positive relationships and living a life that has a sense of purpose. It is shaped by our life circumstances, our relationships and our ability to control or adapt to the adverse circumstances we face. Good mental health improves outcomes in education, employment and health and benefits individuals, families, communities and society.*
>
> Mental Health and Wellbeing Indicators Report (2018)

Mental health covers a range of issues – from feelings related to emotional wellbeing like happiness and sadness, to mental ill-health like the reactions that happen in response to stress, to diagnosable mental disorders such as schizophrenia and bi-polar disorder.

Support for mental health in Ayrshire is provided by statutory and non-statutory services, voluntary and wider community support organisations as well as families, carers and individuals. Each has an equally important role. Each offers choice to local people – ways they can access and receive support to improve their mental health.

The Ayrshire Mental Health Conversation: Priorities and Outcomes has been commissioned by East Ayrshire, North Ayrshire and South Ayrshire Health and Social Care Partnerships, in partnership with NHS Ayrshire & Arran. We aim to provide a consistent approach to our response to mental health and to set out some shared priorities. This response is about how we will support people to achieve and maintain mental wellbeing.

This document has been supported by a small pan-Ayrshire mental health strategy engagement team, including staff from health and social care partnerships, Scottish Recovery Network (SRN) and Scottish Health Council (SHC). The team has undertaken some key activities and events to ensure the views of a wide range of people are included throughout.

This strategic response is based on:
- Key policies and national drivers
- Local context and strategies
- Local mental health statistics and what these tell us
- Core views that emerged via the engagement process
- Overarching themes developed from these views
- Outcomes this strategic response hopes to

achieve. This strategic response recognises:
- The need to respond to common life challenges in a proportionate, appropriate way where the full assets of the person, their family and their community are used to support positive outcomes. This moves away from only responding through formal services to ensuring that ownership for our response to mental health issues is wide and strongly rooted in resilient communities
- By empowering communities and organisations to build resilience, mental health literacy and preventative supports, we will avoid unnecessary use of formal mental health services
- The need to work in partnership to develop our shared response, not least by working with people who have lived experience of mental health issues and sets out a way for all stakeholders to work together to support better mental health including statutory, voluntary, independent and community sectors
- Within the context of national investment alongside the need to transform, there is a need to target specialist clinical services at those who need them most.

There are many challenges in terms of implementation but we believe what is set out in this document provides a strong foundation for working together for the best mental health and wellbeing for the people of Ayrshire and aspiring towards the vision set by Scottish Government's *Mental Health Strategy 2017–2027*:

> *People can get the right help at the right time, expect recovery, and fully enjoy their rights, free from discrimination and stigma*

This strategic response identifies seven priorities:

1. Improving mental health and wellbeing of local people, across the lifespan, through promotion, prevention and early intervention
2. Promoting community based support for people experiencing mental health challenges including self-management and peer support
3. Making it easier for people to access appropriate support when they are experiencing mental health problems or distress
4. Providing appropriate training, development and support for all who are supporting people with mental health challenges
5. Ensuring people with lived experience of mental health challenges and their carers are fully involved in the design and delivery of services
6. Working in partnership across professional and organisational boundaries and with family and carers to ensure services and supports are integrated and focused on need
7. Our children and young people receive the support to promote good mental health and wellbeing

This strategic response does *not* set out implementation plans for any agreed priorities. These will be contained in local implementation plans and will need further and detailed planning. Measuring progress for actions will be reviewed and reported through a **governance framework** (*see page 27*).

This strategic response will be proactive, recognising changes and challenges, both nationally and locally and there will be ongoing engagement with all stakeholders to inform the developing implementation plans.

We have worked to create a document that is:

· Clear – the content is concise, direct and with good use of plain English
· Realistic – the content reflects reality and focuses on what is deliverable
· Honest – the content is honest about existing challenges that need to be addressed.

<u>Key policies and national drivers</u>

In March 2017, Scottish Government published its *Mental Health Strategy 2017–2027* as a focus for improving mental health across Scotland. The national strategy reflects the wider public health approach required to improve mental health across the whole population and puts particular focus on:

· Prevention and early intervention
· Access to treatment and joined up accessible services
· The physical wellbeing of people with mental health problems
· Rights, information use and planning.

At its heart, the national strategy seeks to ensure mental health and physical health hold equal importance and highlights particular challenges for services being delivered across Scotland. It notes that:

· Only 1 in 3 people who would benefit from treatment for a mental illness currently receive it (based on estimates)
· People with life-long mental illness are likely to die prematurely (15–20 years) because of physical ill-health
· People with a mental health problem are more likely than others to wait more than 4 hours in an emergency department.

In September 2018, Scottish Government published *Mental Health Strategy 2017–2027: first progress report*, stating that in the first 18 months of the strategy, 13 actions (out of 40 actions) are complete or significant progress has been made.

They reflect that the actions alone will not completely deliver on their vision, but act as levers to create the change we want to see in mental health. The 40 actions incorporate a commitment to engaging and empowering individuals and communities.

In addition, Scottish Government, in consultation with stakeholders, organised the ongoing work into themes:

· Children and young people's mental health and wellbeing
· Adult mental health and whole system change
· Public mental health and suicide prevention
· Rights and mental health.
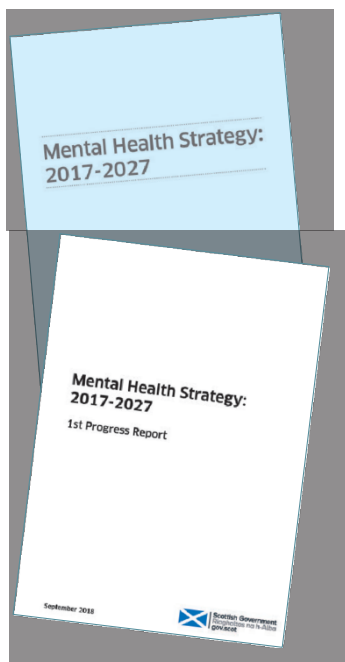
This document is our local response to the national strategy and subsequent progress report. We have engaged with the people of Ayrshire and together we have developed our strategic response, which dovetails local priorities and
anticipated outcomes with national themes. At its heart, this document's aim is to ensure our communities have access to the right support, at the right time, with the right person.

Over the past 10–15 years a range of approaches, by Scottish Government, local authorities, health boards and other interested parties, has set out policy, recommendations and guidance for the development of mental health service provision. These have implications for the services provided across Ayrshire and include:

- Carers (Scotland) Act 2016
- Getting it right for every child (GIRFEC)
- Good mental health for all
- Health and Social Care Delivery Plan
- Mental Health Strategy 2017–2027
- Public Bodies (Joint Working) (Scotland) Act 2014
- Public Health Priorities for Scotland
- Scotland's National Dementia Strategy 2017–20
- Scotland's Suicide Prevention Action Plan: Every Life Matters
- Social Care (Self-directed Support) (Scotland) Act 2013
- The Scottish Strategy for Autism: outcomes and priorities 2018–21 Links to the documents above can be found in

References (*see page 30*)

Summary of national policy context

From the policies, national guidance and current legislation, three key themes emerge, which our priorities will need to address:

1. The need to engage to with and involve people who require services in the design and delivery of their own services
   We do not want to fit people into services: rather, we want to design services and activities around people. This reflects the views expressed in our engagement work. Our commitment to co-production will help develop services that are grounded in the wider community, rather than drawing individuals into 'service land'. In developing this strategic response, we have worked closely with the Scottish Recovery Network, and we intend to continue doing so in subsequent versions of this work.

2. The promotion of choice and control
   We recognise that we have a lot more to do to encourage people with mental health challenges and conditions, and their support networks, to make choices and take control over their own support – including promotion and uptake of Self-directed Support (SDS) options, where relevant.

3. A requirement for further early intervention and prevention work There are already several early intervention and prevention initiatives for mental health, many of them developed by the local
   communities. Nevertheless, we want to work with those groups
   and others (including key support groups) to develop more approaches for people who use services, their carers and families and – importantly – the wider community of Ayrshire.

Ayrshire enablers

Health and social care partnerships in Ayrshire are making a difference with local planning in communities to improve health and wellbeing and have developed strategic plans, taking account of changing needs and increasing demand.

4. We have used the national strategy and its underpinning actions as prompts in our conversations with the communities of East, North and South Ayrshire: this has given us some key priorities to focus on locally

5. We have set out a framework within which we will report against all the specific actions set out in the national strategy, which will enable us to evidence impact on our actions.

We have considered what is happening in East, North and South Ayrshire, and more widely Scotland, in terms of legislation, emerging policy and guidance for people with mental health challenges, and those who provide support in our communities. We will ensure each local mental health implementation plan takes account of local strategic planning to ensure partnerships are addressing their locality's needs.

> *The number of people with mental health problems will increase by up to 4% per year.*

National Records of Scotland (NRS)

The number of people with mental health concerns in Ayrshire is difficult to determine accurately. We are experiencing a 41% increase in demand for community based mental health services. It is estimated more than 1 in 4 people will be affected by a form of mental ill-health at some point in their lives, and 1 in 3 GP appointments locally relate to mental ill-health. We also know:

- In 2016, the percentage of people in Ayrshire prescribed medication for anxiety, depression or psychosis was 19%, this was higher than the Scottish average (17%).
- In 2017, the three HSCPs have combined caseloads (people known to access statutory mental health services) of around 13,000 people.

Ayrshire and Arran Mental Health and Wellbeing Indicators (2018) provides an insight into the mental health and wellbeing of adults living in Ayrshire. This shows that mental wellbeing is significantly poorer in Ayrshire, compared with Scotland as a whole, and there are clear differences across East, North and South Ayrshire and between population groups.
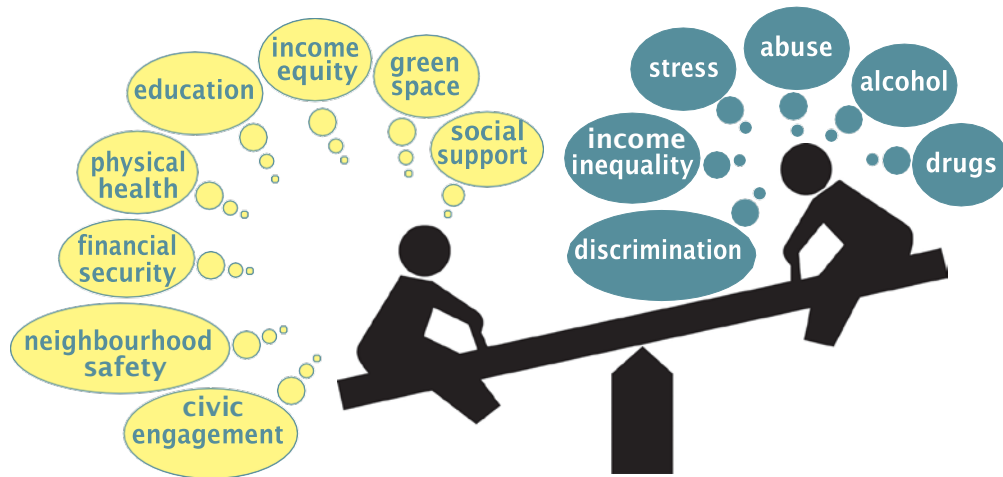
Positive Mental Health
Mental wellbeing is significantly lower in Ayrshire than in Scotland and there are clear differences across the geography and between groups.

Mental Health Problems
Common mental health problems are experienced disproportionately across the geography and between groups. The youngest age group is more likely to experience problems than other age groups.

Drug & Alcohol Related Harm
Alcohol related hospital stays are showing a downward trend but remain significantly above the Scottish average. Drug related hospital stays continue to increase substantially and are also significantly above the Scottish average.

Income Inequality +
Levels of income deprivation are higher in the three partnership areas (12.7% 17.3%) than in Scotland (12.2%), with North Ayrshire experiencing the highest and South Ayrshire the lowest.

Employment & Education +
Unemployment and economic inactivity are higher across the three partnership areas than across Scotland. Education levels are also lower than average.
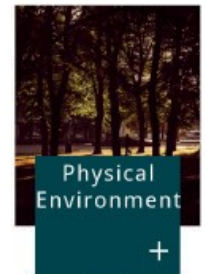
Physical Environment +
Over 90% of people locally rate their neighbourhood as a good place to live (in to line with national average). Over 50% visit the outdoors at least once a week.

income equity, green space, education, social support, physical health, financial security, neighbourhood safety, civic engagement

stress, abuse, alcohol, income inequality, drugs, discrimination

Source: ... *Indicators*

Mental health services in Ayrshire – the finances

Health and social care partnerships in Scotland, and other public services, face financial pressure with the increase in demand for services. This is particularly evident in mental health support with a year on year 40% increase in demand for community based mental health services support, since 2015.

North Ayrshire Health and Social Care Partnership leads mental health strategy across Ayrshire and delivery of Ayrshire-wide services, on behalf of health and social care partnerships in East Ayrshire and South Ayrshire.
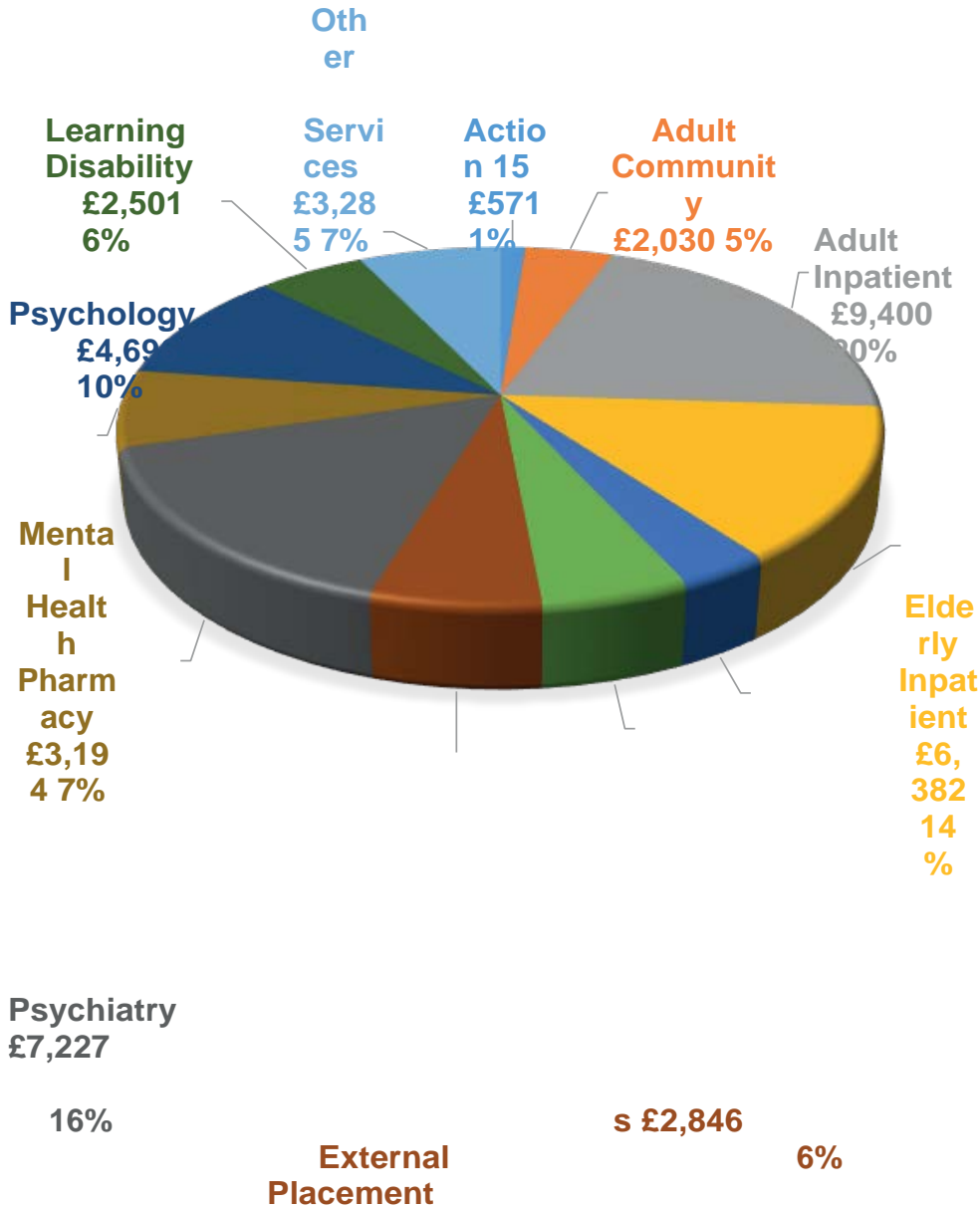
2019–20 budget

Scottish Government has acknowledged the rise in demand for mental health services in their national *Mental Health Strategy 2017–2027*. Their financial settlement for 2019–20 includes a requirement that resource for mental health services is protected and health boards must ensure a real terms increase of 1.8% on mental health budgets before the application of any additional funding for investment.

North Ayrshire Health and Social Care Partnership leads on hospital-based mental health services across Ayrshire and must ensure this condition is met for those services across Ayrshire. To meet the conditions there would be a maximum value of efficiency savings that can be applied to these services during 2019–20 and this has been the basis of financial planning.

Significant plans to deliver efficiencies from the resdesign of acute mental health services will be undertaken during 2019–20. Following this, opportunities can be explored to further redesign and release resource for investment in wider community mental health services driven by local health and social care partnerships as outlined in their strategic plans.

Acute Mental Health Services (provided by lead partnership)
BUDGET £000'S

Other Services £3,285 7%

Learning Disability £2,501 6%

Action 15 £571 1%

Adult Community £2,030 5%

Adult Inpatient £9,400 20%

Psychology £4,69 10%

Mental Health Pharmacy £3,194 7%

Elderly Inpatient £6,382 14%

Psychiatry £7,227 16%

External Placement s £2,846 6%

CAMHS £2,472 5%

Addictions £1,531 3%

Warrix Avenue, a community rehabilitation resource (9 houses) for those who have required in-patient rehabilitation as part of their recovery from severe mental ill-health.

Elderly mental health inpatient services are being reconfigured during 2019–20 taking account of activity levels and the quality of the accommodation available. This will allow staffing investment in the remaining wards and also deliver a saving. Prevention and early intervention remains an area for future investment.

Scottish Government allocations

As part of the *Mental Health Strategy 2017–2027*, Scottish Government made a commitment to provide funding to support the employment of 800 additional mental health workers to improve access in key settings such as accident and emergency departments, GP practices, police

| s | ation | y suites and |
| t | custod | prisons. The |

Transformation and investment

Mental health services in Ayrshire are undertaking a programme of transformational change to address increasing demand and complexity of problems faced by people with mental ill-health. To address this increasing demand, health and social care partnership services are working to ensure more ongoing care and support is available in the community.

We are continuing to explore preventative housing support services for a wide range of people, including people with mental ill-health to ensure that they can live at home. 2019–20 will see the opening of

detail is set out in Action 15 of the national strategy. The funding

Year	East	North	South	TOTAL
2018–19*	£267,351	£299,538	£248,118	£815,007
2019–20	£413,178	£462,922	£383,455	£1,259,555
2020–21	£583,311	£653,537	£541,348	£1,778,196

note that only 70% (£570,000) has been drawn down in 2018–19

Participatory budgeting

Significant work has been undertaken to work in localities to develop participatory budgeting for mental health and wellbeing initiatives. Community groups bid for project funding and local people vote for monies to be allocated directly to community groups.

The themes and outcomes in this strategic response are based on engagement and contributions from people who use mental health services, their families and carers, the staff who deliver those services, and people from the wider Ayrshire community.

The Ayrshire Mental Health Conversation

Our engagement programme, The Ayrshire Mental Health Conversation, captured people's opinions about current services and the support being received. A multi-agency steering group was developed to ensure robust, effective and meaningful engagement and to cascade relevant information to staff and members of the public in East, North and South Ayrshire. It was important to involve external stakeholders to provide a balanced view of the process including:

· Staff members from East Ayrshire, North Ayrshire and South Ayrshire Health and Social Care Partnerships
· Scottish Recovery Network (we are committed to ongoing engagement and co-production with SRN)
· Scottish Health Council.

The first meeting of the engagement steering group (April 2018), discussed how, where and with whom we should engage. The group felt it was crucial to go beyond traditional consultation and have open conversations with people, which would in turn inform the development of a strategic response, and provide an opportunity to influence improvements across all mental health and wellbeing support areas.

The key audience for engagement:

· People who currently, or have previously accessed mental health support services
· People who care for someone, or have a family member who has accessed mental health support services
· People who have no previous experience of mental health services.

The engagement questions were developed in partnership with people who access mental health services and carers and were slightly tailored for each audience.

In order to capture a wide range of views, people were able to share their experiences and thoughts in a variety of ways.

The Ayrshire
MENTAL
HEALTH
Conversation

- Local conversation sessions were hosted throughout Ayrshire – these were open to anyone to attend
- Local conversation sessions were designed to engage with specific groups of interest
- Local groups and services were invited to host their own local conversation at a time and place convenient to them – a facilitation pack was created to support and enable groups to do this effectively
- An online survey was created and promoted widely across social media, enabling engagement with groups of interest we'd previously heard little from, additionally, the survey was distributed via extensive email networks
- Paper copies of the survey were made available in all local libraries, mental health services and some GP practices, and sent by post to individuals and groups, upon request.

The Ayrshire Mental Health Conversation began in August and was extended until November 2018. (The extension was agreed to ensure comprehensive feedback from men – a targeted approach resulted in male feedback increasing by 6%.)

The engagement conversations resulted in:
- Supporting 14 public engagement sessions and conversations with 187 people across Ayrshire, including:
  » two sessions at Ayrshire College
  » one session at Woodland View
  » nine public discussion session
  » two sessions facilitated by local groups.
  These sessions included prompts based on the 40 actions set out in Scottish Government's Mental Health Strategy.
- Liaising with staff involved in commissioning or supporting mental health services and other support services in Ayrshire
- Creating a survey for anyone with an interest in mental health in Ayrshire (including those who had not accessed mental health services) generated 777 responses
- Discussing development of this strategic response with representatives of third and independent sectors in Ay
- Stakeholders (those involved in the conversations) attended a local summary event to bring together all the views and feedback received and to help co-design Ayrshire-wide priorities and actions.

Tell us what YOU think

777 survey responses

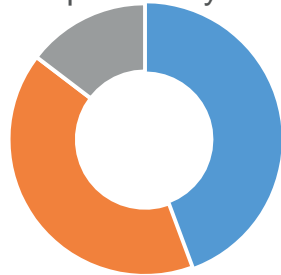14 public events

over 1000 conversations

The Ayrshire Mental Health Conversations told us

Experience of mental health services

Personal experience
- Carer/family experience
- No experience

Responses by locality area
- East Ayrshire
- North Ayrshire
- South Ayrshire

Response by gender
- Female
- Male
- Not disclosed/other

Response by age group
- Under 16
- 16 - 25
- 26 - 35
- 36 - 45
- 46 - 55
- 56 - 65
- 66+
- Not disclosed

We do this well . . .

Crisis response is good!

Advice from GP has been extremely supportive

When you can access the range of support, it is good!

Raising awareness of mental health issues

CBT course helped me to put things into perspective

I found social work mental health team and support service was good

We need to do better …

Waiting times are ridiculous!

I don't like telling my story over and over again – so share information better

Realise everyone is different, one size does not fit all

More follow up to ensure person is continuing to progress

Listening to the person *and* family concerns

Need to support those who are caring for those with poor mental health

Things that challenge your mental health

1   **55%*** work related

2   **52%*** relationships

3   **43%*** money or debt

4   **39%*** self image, incl body image

5   **35%*** isolation and loneliness
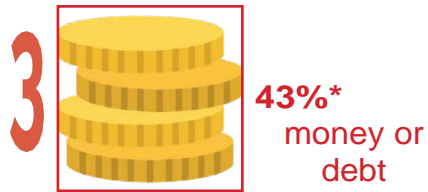
Things that improve your mental health

1   **51%*** spend time with family and friends

2   **49%*** go for a walk

3   **40%*** listen to music

4   **39%*** do physical exercise

5   **39%*** talk to family and friends
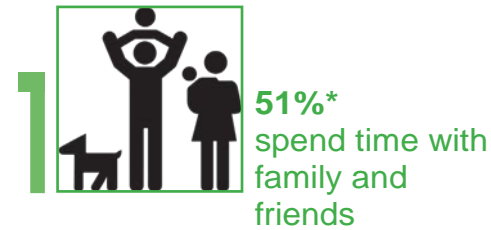
Supports by people who use our services

1   **50%*** Community mental health service

2   **38%*** Counselling

3   **26%*** Psychiatry

4   **20%*** Mental health hospital admission

5   **17%*** Child and adolescent mental health service

* Of the people who engaged in The Ayrshire Mental Health Conversation

The full survey results, including feedback and individual comments, are available online at www.nahscp.org. The priorities and actions in this strategic response have been driven largely by **The Ayrshire Mental Health Conversation**. The stories and feedback provided by people will be used far beyond this document as we move towards working in partnership with those who access our services, their carers' and family members, with the common aim to improve mental health in Ayrshire.

More support in community to prevent isolation

Treat service users as part in their care and allow them a real say in shaping services going forward

Encourage practitioners to engage with patients as a human being, not as a clinician

Provide more training in ASD and other life long disabilities

I feel staff need more training

Listening and signposting

Have more services run

Make it easier to

access service before crisis

You said…

by ex-patients/sufferers

Lots of information/ more awareness

Local drop-in

centres and youth appropriate centres More communi ty

support

Promoting community based support for people experiencing mental health challenges including self-management and peer support

Improving mental health and wellbeing, across the lifespan, through promotion, prevention and early intervention

Providing appropriate training, development and support for all who are supporting people with mental health challenges

Shorter waiting list to ensure that support

is available when difficulties first arise

A dedicated centre to mental health such as a surgery instead of visiting your local doctor

We commit to…

Making it easier for people to

Our children and young people receive supports, promoting good mental health and wellbeing

You said …

Working in partnership across all

between 12 and 17

health issues

professional and organisational boundaries and with family and carers to ensure

services and supports are integrated and focussed on need.

Gap in service for girls aged

Support for parents of children experiencing mental

Ensuring that people with lived experience of mental health and their carers' are fully involved in the design and delivery of services

access appropriate support when they are experiencing mental health problems or distress

Offer more bespoke services. Not one

Needs to be more consistency moving adolescents from CAMHS to adult mental health care

An accessible out of hours service for people to tend to prevent having to attend A&E

at

You said… *size fits all*

Better communication between all services to

Alternative support while waiting on professional support

pressures put on vulnerable people

The Ayrshire Mental Health Conversation:
Linking local priorities and outcomes to national actions

Local priority1:
Improving mental health and wellbeing of local people, across the lifespan, through promotion, prevention and early intervention

Outcome	We will:	National themes / actions
People have access to the right mental health support at the first point of contact	Ensure there is clear and easy access to mental health support through your local GP practice. Increase the number of dedicated mental health practitioners and community connectors in primary care settings.	Adult mental health and whole system change (Actions 10, 15, 23, 24,)
Information promoting mental health supports is easily accessible	Ensure information about mental health and wellbeing issues is kept in a centralised place, is easily accessed and understood. Develop an online directory of services that is routinely updated to reflect changes in available supports and ensure this information is available in local community facilities.	Public health and suicide prevention (Actions 13, 25, 26, 27, 28, 29, 30, 31, 36, 38)
We recognise and celebrate mental health recovery in our community	Ensure we all recognise that recovery from mental health issues is achievable for everyone. Report, promote and celebrate people's recovery stories and experiences.	Rights and mental health (Action 37)
The shape of out-of-hours support is driven by considering the needs of the people who use it	Ensure the provision of support available outwith 9am–5pm is further developed to meet the needs of the people of Ayrshire. Use appropriate resources to strengthen and complement services providing support in evenings, overnight and weekends in all communities and in a range of different settings.	
We challenge mental health stigma within our community and treat access to mental health support the same as any other health related support	Ensure those experiencing and seeking to access mental health issues are treated the same as those experiencing and seeking access to any health-related issue. Achieve this through effective awareness raising of mental health issues as part of national and local initiatives and by challenging stigma in services and in the wider community.	
People in Ayrshire have improved mental wellbeing	We will support existing actions as outlined in The Ayrshire and Arran Mental Health and Wellbeing Strategy (2015) and new emerging actions which enable individuals, families and communities to improve mental health and wellbeing and to deal effectively with challenges to mental health and the things that increase the likelihood or severity of mental ill-health.	

Local priority2:
Promoting community based support for people experiencing mental health challenges including self-management and peer support

Outcome	We will:	National themes/ actions
People are able to take ownership of their mental health recovery at an early stage, making decisions on how and when their supports are received	Ensure we agree, at the earliest opportunity, what you want to achieve from your support and how will we know you have succeeded in your goals. Agree clear recovery focused plans of care and promote self care and management with ongoing supports provided in your local community.	Adult mental health and whole system change (Actions 10, 15, 23, 24) Public health and suicide prevention (Actions 13, 25, 26, 27, 28, 29, 30, 31, 36, 38) Rights and mental health (Action 37)
Community assets are promoted and visible	Ensure all supports that promote mental health and wellbeing are recognised and valued as part of a wide range of mental health supports in our community. Collate and promote community assets, widely and as soon as possible, as positive mental health and wellbeing supports.	
Community assets can be accessed daily in Ayrshire	Ensure a range of supports can be accessed every day of the week, including weekends. Support existing groups to increase their capacity and encourage the establishment of new groups in all communities in Ayrshire.	
We positively support and promote communities as an equal partner in delivery of mental health supports	Ensure community support groups are seen as just as, if not more, important in supporting and promoting mental health and wellbeing as statutory health and social care services. Work together to demonstrate and celebrate the positive impact of the use of these types of support in supporting good mental health and wellbeing.	
Communities feel empowered to manage and promote good mental health and wellbeing	Ensure all communities have access to the tools and resources required to promote good mental health and wellbeing.	

Local priority3:
Making it easier for people to access appropriate support when they are experiencing mental health problems or distress

Outcome/Aim	We will:	National themes / actions
People can access information on the supports available in their own communities and make choices on the supports they use	Ensure information on all services providing mental health supports in your community is easily accessible. Involve people with lived experience of mental health problems in deciding what information is important and useful for people accessing mental health services.	Adult mental health and whole system change (Actions 10, 15, 23, 24) Public health and suicide prevention (Actions 13, 25, 26, 27, 28, 29, 30, 31, 36, 38) Rights and mental health (Action 37)
People have information on what services do and when they can expect to receive support	Ensure when you contact a service they are able to provide you with information on what the service offers including when and how this support will begin.	
Mental health support is available 24 hours a day to the people of Ayrshire	Make sure people are able to get support for their mental health at any time day or night in Ayrshire. Offer a range of ways to access support including online, telephone help and advice, and face to face consultations.	
People do not have to wait to access mental health support in their communities	Work with community partners to provide a range of supports including a choice of alternative support when people have to wait to access specialist support.	
Public services and third sector services work together to provide mental health supports	Encourage all health and social care service providers to move mental health supports into local communities and away from centralised services. Agree ways for community-based interventions to provide better support to people than other more traditional approaches.	

Local priority 4:
Providing appropriate training, development and support for all who are supporting people with mental health challenges

Outcome/Aim	We will:	National themes/actions
People supporting those with mental health issues have the appropriate training to enable them to support others to maintain good mental health and recover from mental health problems	Ensure everyone who provides support will have access to training to support their personal and professional development. Provide a range of training options that can be accessed by anyone in Ayrshire, including staff, volunteers and family/carers.	Children and young people's mental health and wellbeing (Actions 2, 4) Adult mental health and whole system change (Actions 26, 36) Rights and mental health (Actions 32, 35, 37)
Values based practice training is promoted amongst all staff	Ensure anyone providing support does this with empathy and compassion. Promote training to provide people with the skills and knowledge to adopt a strengths-based, person centred approach focused on recovery, including an opportunity to reflect on their own practice and how their values impact on the support they provide to others.	
Training provided reflects changing trends	Ensure the training we provide will reflect emerging themes within mental health. Work collaboratively to develop and promote training that is person centred and tailored to meet the mental health needs of the people of Ayrshire.	
People supporting those with mental health issues have their own mental health and wellbeing needs met	Ensure anyone supporting people experiencing mental health problems will be able to access support for themselves. Have appropriate supervision frameworks and staff care support in place across all services.	

Local priority5:
Ensuring people with lived experience of mental health challenges and their carers are fully involved in the design and delivery of services

Outcome/Aim	We will:	National themes / actions
People with a lived experience of mental health are visible, valued and contribute to the co-production and commissioning of services	Develop systems to allow people with lived experience of mental health problems to be fully engaged in design, commissioning, delivery and evaluation of services and supports. Ensure they have a range of ways in which they can engage and influence service design and implementation.	Adult mental health and whole system change (Actions 15, 23, 36) Public health and suicide prevention (Actions 13, 14, 25, 36) Rights and mental health (Actions 32, 37)
The number of peer-led support groups reflects the need of our communities for this type of support	Ensure groups and supports available to people are, where possible, developed and led by peers. Increase the number of peers across our services,, enabling them to provide local group support where it is required.	
The number of peer workers/ volunteers reflects the need of our communities for this type of support	Ensure people with lived experience are supported and developed as peers within our services. Create an environment in Ayrshire that values the contribution lived experience brings to the support of others and promote this type of support with everyone. Create more opportunities for paid and voluntary peer support roles across all services.	
Community-based peer led supports offer follow up and long-term support	Ensure after support from statutory services has ended that people are offered and can access long term support from peers. Create a framework of peer led supports and services including groups (see previous actions) and will promote the use of these groups and other types of community-based support for people who have successfully achieved their own recovery focused goals.	
We have peer-led, lived experience networks linked to every service	Ensure every service is able to identify and demonstrate effective use of peer support workers and volunteers. Develop and commission services with peer supports built into their delivery.	

Services are commissioned based on good mental health and wellbeing outcomes	Ensure the governance framework promotes the use of measures to reflect the positive outcomes on mental health and wellbeing that the service has provided, in addition to ensuring quality and value for money.	

Local priority6:
Working in partnership across professional and organisational boundaries and with family and carers to ensure services and supports are integrated and focused on need

| Outcome/Aim	We will:	National themes/actions
We take into account the views and wishes of family and carers	Ensure family and carers have their voices heard. Ask (with appropriate consent) family and carers to be part of the support and care planning of their family member or person they care for, including being clear about when and how we can share information.	Adult mental health and whole system change (Actions 15, 23, 36) Public health and suicide prevention (Actions 13, 14, 25, 36) Rights and mental health (Actions 32, 37, 38)
Where possible we collocate services and community supports to a place that suits the community best	Ensure supports are locally available and accessible in your community. Work with communities to identify which services need to be there and work together to co- produce and deliver these services, wherever possible.	
Electronic information systems are compatible and communicate with each other to improve the experience for the individual involved	Ensure we reduce the duplication of collecting information about you and moving from one support to another is not unduly delayed by the transfer of information by electronic systems. Work with our colleagues in eHealth to develop appropriate solutions.	
Everyone across all services promotes safe and appropriate information sharing to reduce the time spent repeating information	Ensure the information shared about you is only the information that is relevant to support your mental health needs and is provided with your consent. Adhere to information sharing governance and let you know which information is shared and for what purpose.	

Local priority7:
Our children and young people receive the support to promote good mental health and wellbeing

Outcome/Aim	We will:	National themes / actions
Clear and strong links and communication between health and social care, education and justice services	Ensure there is appropriate and regular communication and joint working between the services and supports involved in a child or young person's care.	Children and young people's mental health and wellbeing (Actions 1–9, 16, 17, 19)
A range of interventions available for children and young people	Ensure a child or young person who needs support has a range of options and choices available to them to consider what supports would best support their needs.	
A range of services available to support children and young people	Ensure the supports provided are not the responsibility of one service, but the holistic support a child or a young person may need is available from a range of sources.	
Training on mental health is provided to children and young people and their families and the staff working with them	Ensure education, information and training is accessible to all. The training we provide will reflect emerging themes within mental health. Work collaboratively to develop and promote training that is person centred and tailored to meet the mental health needs of the people of Ayrshire.	
Children and young people are supported when transitioning between services	Ensure when children move between services that it is planned and supported to ensure the most appropriate services and supports are put in place at an early stage.	

Monitoring and governance framework

The activity undertaken within Ayrshire will be monitored within a framework. We will develop and report our progress, and the subsequent impact being made, against local and national strategic aims.
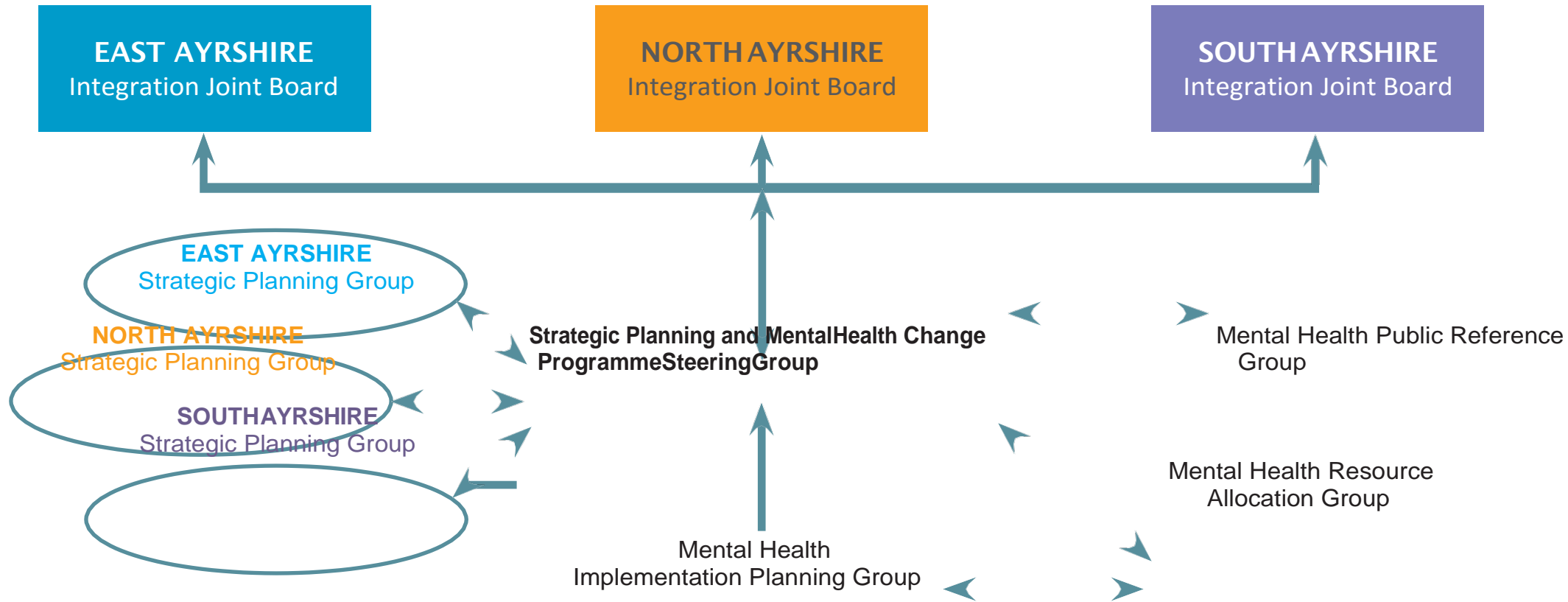
Membership of the groups within the governance framework above includes people who use services and carers (except the Mental Health Implementation Planning Group as an operational staff group carrying out decisions made in the Change Programme Steering Group)

Glossary

Ayrshire
Around 368,290 people over 1,321 square miles, includes local authority areas of East Ayrshire, North Ayrshire, South Ayrshire and the island communities of Arran and Cumbrae.

Health and Social Care Partnership (HSCP)
HSCPs are the organisations formed as part of the integration of services provided by Health Boards and Councils in Scotland. Each partnership is jointly run by the NHS and local authority. HSCPs manage community health services and create closer partnerships between health, social care and hospital-based services.

Integration Joint Board (IJB)
An Integration Joint Board is the constituted legal governing body of a health and social care partnership. It is responsible for the strategic direction, effectiveness, and efficiency of a partnership. Responsibility for services is delegated from local health boards and local authority social services to IJBs.

National Records of Scotland (NRS)
National Records of Scotland collects, preserves and produces information about Scotland's people and history. They record life events such as births, deaths, marriages, civil partnerships, divorces, adoptions stillbirths. NRS is also responsible for development of archival practice in Scotland, including government documents and public records.

Primary care
Primary care is the first point of contact for health care for most people and includes community based services like GP, dental, community pharmacy and optometry.

Population groups
A population group is subset of an overall population who may share certain demographic or personal characteristics, such as age, gender, disability or ethnicity.

Scottish Health Council (SHC)

Scottish Health Council supports health and social care providers to engage meaningfully with people who use services, carers and communities to effectively involve people in the design, planning and delivery of health and social care services.

Scottish Recovery Network (SRN)

Scottish Recovery Network is a non-profit initiative (third sector) with a vision of a Scotland where mental health recovery is real for everyone in every community. Their aim is to place the experience of recovery at the centre of life, practice and policy. They act as a catalyst for change by sharing ideas and practice.

Self-directed Support(SDS)

Self-directed Support allows people, their carers and their families to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes.

Third sector

Third sector is an umbrella term for a range of organisations that belong to neither public or private sector. Third sector organisations include voluntary and community organisations (registered charities and other organisations such as associations, self-help groups and community groups), social enterprises, mutuals and co-operatives.

References

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https://www.gov.scot/publications/scotlands-public-health-priorities/

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www.gov.scot/publications/scotlands-suicide-prevention-action-plan-life-matters/
Social Care (Self-directed Support) (Scotland) Act 2013
www.legislation.gov.uk/asp/2013/1/pdfs/asp_20130001_en.pdf
The Scottish Strategy for Autism: outcomes and priorities 2018–21
www.gov.scot/publications/scottish-strategy-autism-outcomes-priorities-2018-2021/

The Ayrshire Mental Health Conversation feedback, comments, and survey results are available online at www.nahscp.org