



Summary of our Mental Health Work

2019 - 2020

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www.healthcareimprovementscotland.org

Healthcare Improvement Scotland (HIS) is committed to supporting better quality mental health care for everyone in Scotland. We work with mental health services communities, people who use the services, and leadership teams to develop and deliver improvements to mental health care services. This paper summarises the focus of our work in 2019 -2020.

We support mental health services to deliver the national target that 90% of people needing Child and Adolescent Mental Health Services (CAMHS) and or Psychological Therapy (PT) services will receive treatment within 18 weeks of referral. Our focus is to work with NHS boards and Health and Social Care Partnerships to help them develop and implement robust plans that will improve access to mental health services whilst maintaining, or improving, the quality of care already being provided. We ensure those plans are informed by the data, the evidence about what works, and insights from service users and staff.

To support this work:

- We lead a National Mental Health Access Collaborative which uses the Institute for Healthcare Improvement's breakthrough series collaborative approach. This approach enables NHS boards to make a positive impact to their access improvement priorities through the use of quality improvement (QI) methods along with collaborative sharing and learning across Scotland. There are currently 29 teams from across both CAMHS and PT services participating in this national programme.
- We provide in-depth support to services struggling to meet the 18-week national target. We help them to understand the key factors impacting upon access and then use this knowledge to develop and implement plans to address them. This work is being delivered in phases and we are currently providing support to four NHS boards.
- We recognise that the sustainable delivery of high-quality, accessible CAMHS will require a whole system redesign which includes input from health, social care, education and third sector organisations. We are working with Nesta to test their People Powered Results (PPR) approach to large-scale redesign and change, with a focus on children and young people's mental health and wellbeing. This testing work is taking place in Midlothian and progress is encouraging with engagement from a wide range of partners including children and young people, carers and families, health, social care, police, education and a range of third sector organisations.

We lead the Scottish Patient Safety Programme in Mental Health (SPSPMH) which is improving outcomes by focusing on reducing harm. This includes reducing the rates of restraint, violence, self-harm and seclusion, while improving medicine safety at key transition points. This work has taken place in adult acute mental health wards.

The programme works to:

- develop interventions and tools that contribute to a measurable reduction in harm and support their implementation,
- support third-sector organisations deliver programmes such as Triangle of Care and Equally Fit that are complimentary to the work undertaken as part of SPSPMH,
- share learning, through the development of local, national and international networks including face to face learning sessions and the active use of social media such as #mhimprove on Twitter, and
- promote a human rights based approach in the delivery of mental health services with service users.

SPSPMH is developing the next phase of the programme which will focus on spreading the learning and support to all adult acute mental health wards, as well as broadening support to CAMHS and Peri-Natal in-patient wards.

In January 2019, our *Improving Observation Practice programme (SPSP-IOP)* published new guidance which supports and challenges all mental health care services and their staff to move away from the traditional practice of enhanced observation and work instead towards a framework of proactive, responsive, personalised care and treatment which puts the patient firmly at its centre. This guidance is based on work we undertook with services users and staff to develop and test new, ambitious and innovative ways of working. It represents a significant change in practice and we are now providing support to services to implement and embed this new person centred approach.

We are leading on a two-stage process to ensure that people presenting for the first time with psychosis anywhere in Scotland will have timely access to effective care and treatment, with early intervention and a focus on recovery.

The first stage includes establishing a national Early Intervention in Psychosis (EIP) improvement network, conducting a national needs assessment and working with two NHS boards and their Health and Social Care Partnerships (HSCPs) to understand current EIP services, review the relevant SIGN guidelines and promote their use across NHS boards and HSCPs.

The second stage will be guided by the improvement network's recommendations, as well as the learning from the two NHS boards.

We have a portfolio of improvement work focused on enabling people with dementia and their carers to report improved experience and outcomes following a diagnosis of dementia.

This programme works in partnership with national organisations, health and social care partnerships, people with dementia, and carers to reduce variation and improve the quality of care. It supports services across Scotland to use QI approaches to deliver:

- improvements in post diagnostic support,
- improved care coordination in the community, and
- a reduction in stress and distress in hospital settings.

We have a strong focus on ensuring the effective engagement of individuals in the design and provision of their care. In addition to embedding these principles into our national improvement programmes, through our Scottish Health Council Local Offices and national Service Change Team, we also provide support to help NHS boards and Health and Social Care Partnerships to engage with people and communities around the design and delivery of mental health services. In cases of ‘major change’ led by NHS boards, we also carry out quality assurance to assess whether community engagement is in line with national guidance.

Examples of our work here include:

- Local offices supporting the development of mental health and wellbeing strategies by providing advice on who to engage with and how best to engage with local communities. In Fife, the local office supports the recruitment of people to take part in discussions about mental health service redesign and we are advising on engagement approaches. In Glasgow, the local office currently supports a review of Inpatient mental health services by advising on engagement techniques.
- In Shetland, we support the NHS board on a project called “Shetland Link Up” and we are organising a series of workshops for service users and carers in collaboration with Scottish Recovery Network and Breathing Space. We also support a mental health service delivery forum, which is made up of carers, service users and mental health care providers to discuss a “Triangle of Care” approach, a mental health needs assessment, which will feed into the review of the local mental health strategy and the planning of Mental Health Awareness month.

All our work is also underpinned by a focus on the evidence and over the years we have produced a range of guidelines relevant to the delivery of high quality mental health care.

- During 2019 –2020 we are developing a guideline on the care provided for people with eating disorders and we anticipate this will help improve existing services and, where necessary, with the redesign of services. We are looking to develop ways in which guidance can be rapidly disseminated and implemented.

We also have an assurance role across mental health services.

- During 2019 -2020 we will work with Scottish Government colleagues on a suicide learning reporting system to eliminate or minimise avoidable harm by ensuring that organisations are responding proactively to data and intelligence. This work links closely with SPSPMH and contributes to our role in maximising the opportunities for scale and spread of learning and best practice from our assurance work.
- As a partner agency with Her Majesty's Inspectorate of Prisons (HMIPS), quality assures mental health provision across the prison service in Scotland undertaking four full inspections per year and two follow-up inspections. This includes the inspection of service provision for people with co-morbidities such as substance misuse. We also support HMIPS in their independent review of mental health and young offenders in custody.
- In February 2018, we published a report into our review of mental health services in NHS Tayside and a subsequent follow-up progress report in August 2018. In May 2018, NHS Tayside announced that an independent inquiry would be carried out into mental health services. We will request an update, and plan future quality assurance activity, once the independent inquiry has concluded.
- The current format of joint inspections of adult services includes benchmarking mental health services in a Health and Social Care Partnership against available figures for Scotland, for example percentage of people prescribed medication for mental health issues such as anxiety or depression. Strategic planning for mental health services is reviewed and, where available, needs assessments and performance figures are also included. We consider both health and social care provision however we do not currently look at outcomes for service users, this will change when we have the revised set of quality indicators which will include outcome indicators.
- During 2019 -2020 we will continue to work in partnership with the Care Inspectorate and others to inspect services for children, young people and families delivered by community planning partnerships (CPPs). The current focus of these inspections is on children and young people in need of care and protection and the support that they receive from relevant CAMHS.
- Mental health services are considered as part of the Sharing Intelligence for Health and Care Group (SIHCG), which enables seven national agencies to share and consider intelligence about the quality of care systems across Scotland. The main objective of the group is to ensure that, when any of the seven agencies have a potentially serious concern about a care system, this is shared and acted upon appropriately.

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