Mental Health and Wellbeing Perth and Kinross Action Plan (2017 – 2020)

| 1. PERTH & KINROSS STRATEGIC PLAN PRIORITY - PREVENTION AND EARLY INTERVENTION | NATIONAL HEALTH AND |
|---|--------------------------|
| Prevention is at the heart of public service reform with integrated preventative approaches including anticipatory care, | WELLBEING OUTCOME: |
| promoting physical activity and introducing technology and rehabilitation interventions to prevent or delay functional decline | |
| and disability. Shift resources to prevent harm rather than continually responding to acute needs and problems that could | People are able to look |
| have been avoided. | after and improve their |
| National Mental Health Strategy 2017-2027 Ambitions: Prevention and early intervention | own health and |
| • Every child and young person to have appropriate access to emotional and mental well-being support in school. | wellbeing and live in |
| Appropriate, evidence-based, parenting programmes should be available across Scotland. | good health for longer. |
| • Evidence-based interventions to address behavioural and emotional issues in children and young people should be | |
| available across Scotland. | |
| Mental health support and treatment for young people involved in offending who have mental health problems | |
| should be available across Scotland. | |
| Mental health training for non-mental health staff should be available across health and social care services. | |
| Training in first aid approaches for mental health should become as common as physical first aid. | |
| LOCAL MENTAL HEALTH & WELLBEING OUTCOMES | |
| Collectively shift focus to early intervention and prevention for children, young people and adults. | |
| • Everyone to have better access to self- help, appropriate resources and support when an individual identifies they need | d help. |
| People are better enabled to engage with services, and in particular, young people. | |
| Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside Mental H | lealth Services Redesign |
| Transformation Programme. | |
| Prevention: Information and self-help. Early intervention: early input from supports and services. | |
| | |
| PRINCIPLES | |
| Children and Young People | |
| Better access to appropriate information and services when a young person identifies they need help. | |
| For early intervention and prevention to be effective, work should focus on young people and a whole child and whole | family approach. |
| GIRFEC principles (Getting it Right for Every Child) | |
| Young people to connect looking after their wellbeing holistically and mental health | |
| Mental Health training available for teachers and other key staff members, and young people themselves. | |
| Develop alternatives for young people who are excluded from school and/or do not attend to empower them to have a | a 'positive destination' |

• Educate young people on the potential positive or negative role of social media.

Adults

- GIRFEA principles (Getting it Right for Every Adult)
- Explore self-manage and self-help options
- Develop training opportunities to be rolled out in local communities
- Treating 16-25 year-olds differently, keeping people out of services and focus on smooth transition between childhood and adulthood.
- Respond to outcome of decision re NHS Tayside Mental Health Services Redesign Transformation Programme.

| | National Action | Local Action | Timescale: Completed by | Resources & Costs | Lead Agencies & Officers | RAG |
|-----|--|--|----------------------------|-------------------------|--|-----|
| 1.1 | Review Personal and Social Education (PSE), the role of pastoral guidance in local authority schools, and services for counselling for children and young people. | Refer this action to Education and Childrens, and Young Peoples and Families Services Strategy Group to implement in conjunction with the national review | | | ECS | |
| 1.2 | Roll out improved mental health training for those who support young people in educational settings. | Build on the positive progress made through roll out of the Mental Health Innovation Fund project based at CAMHs and available to all schools and services for children and young people in Tayside, including sustainability planning to maintain skills levels once this project concludes. Engagement with Suicide Prevention Steering Group. Embed the new refocused school nursing role and priority pathways | | | Children, Young Peoples and Families Partnership | |
| 1.3 | Commission the development of a Matrix of evidence-based interventions to improve the mental health and wellbeing of children and young people. | Refer this action to Children, Young Peoples and Families Partnership to implement | | | Children, Young Peoples and Families Partnership | |

| 1.4 | Complete the rollout of national implementation support for targeted parenting programmes for parents of 3- and 4-year olds with conduct disorder by 2019-20. | Continue to strengthen the delivery of the Incredible Years programme for 3 and 4 year olds; including improving targeting to ensure the right families are in receipt of the right interventions when they need them. Bid to Scottish Government for the roll out of Solihull training to all Early Year's staff. Built into the Tayside Priority Group 1 Tay Collaborative Group | Parenting Strategy Implementation Group |
|-----|--|--|--|
| 1.5 | Ensure the care pathway includes mental and emotional health and wellbeing, for young people on the edges of, and in, secure care. | Refer this action to Children, Young Peoples and Families Partnership to implement Care Pathways do not exist as far as we are aware | Children, Young Peoples and Families Partnership |
| 1.6 | Determine and implement the additional support needed for practitioners assessing and managing complex needs among children who present a high risk to themselves or others. | Refer this action to Children and Young Peoples and Families Services Strategy Group or Child Protection Committee to implement | Children, Young Peoples and Families Partnership/Child Protection Committee |
| 1.7 | Support an increase in support for the mental health needs of young offenders, including on issues such as trauma and bereavement. | Refer to Youth Justice and Criminal Justice Service | |
| 1.8 | Work with partners to develop systems and multi-agency pathways that work in a co- | The Emotional Wellbeing Collaborative provides an opportunity for all services engaged in improving the emotional wellbeing or mental | Children, Young Peoples and Families Partnership |

| | ordinated way to support children's mental health and wellbeing. | health of children and young people to work together to co-ordinate services and develop shared improvements, this includes a specific focus on improving the resilience of children and young people. Embed the new refocused school nursing role and priority pathways | | |
|------|--|--|--|--|
| 1.9 | Support the further development of "Think Positive" to ensure consistent support for students across Scotland. | Refer this action to Children and Young Peoples and Families Services Strategy Group to implement | Children and Young Peoples and Families Services Strategy Group | |
| 1.10 | Support efforts through a refreshed Justice Strategy to help improve mental health outcomes for those in the justice system. | Refer to Youth Justice and Criminal Justice Service | | |
| 1.11 | Complete an evaluation of the Distress Brief Intervention by 2021 and work to implement the findings from that evaluation. | National pilot – await outcome – match to relevant service | | |
| 1.12 | Support the further development of the National Rural Mental Health Forum to reflect the unique challenges presented by rural isolation. | National initiative – await further info | | |
| 1.13 | Ensure unscheduled care takes full account of the needs of people with mental health problems and addresses the | NHS Tayside Community/Acute Interface Group addressing unscheduled care within In Patient service through daily Huddle. | | |

| 1.14 | longer waits experienced by them. Work with NHS 24 to develop its unscheduled mental health services to complement locally-based services. | In Patient Mental Health Supported Accommodation Group being set up to prevent delayed discharge and plan appropriate supported living accommodation Further information required | |
|------|---|--|---|
| | Local Priorities | Local Action | |
| 1.15 | Better access to self- help, appropriate resources and support when an individual identifies they need help and enable people to engage with services available. | Publicise and promote utilisation of self- help resources Explore and develop smart technology enabled care options Endorse and promote use of WRAP throughout Perth and Kinross Revisit social prescribing model Promotion and development of family support and whole family arrpaoches Address geographical deprivation in locality areas in terms of services available Better communication via social media Improve the accessibility of digital information for young people on parental mental health. Improve access to direct advice and support for young people regarding parental mental health concerns. Roll out of the new School Nurse Referral Form Evaluation of the peer mentoring programme | Children, Young Peoples and Families Partnership Other groups also have a role here |
| 1.16 | Raise community awareness | Themed campaigns | Children, Young |

| | of mental health and wellbeing and enable people to understand their choices, take control and build resilience | Ensure embedding of mental health and wellbeing principles within locality action plans Delivery of Mental Health & Wellbeing sessions in schools across localities and communities Targeting hard to reach, at-risk groups Running evidence-based campaigns, which should be accessible and gain feedback on this | | Peoples and Families Partnership Other groups also have a role here |
|------|--|---|------------|--|
| 1.17 | Address stigma | Campaign work as above Evidence-informed programmes to reduce stigma and discrimination among target groups prioritised by mental health service users Develop enhanced support for parents who find their mental health is a barrier to accessing parenting programmes | | |
| 1.18 | Treating 16-25 year-olds differently, keeping people out of services and focus on smooth transition between childhood and adulthood. | Work with partners to develop early intervention options for young people out with mainstream adult services. Develop learning from the 'Lost in Transitions' project, PKAVS School Nursing to utilise the transition priority pathway | March 2019 | Emotional Wellbeing Collaborative |
| 1.19 | Ensure people are enabled to access the full range of options on offer and shape the services they need | Increased access to, and provision of Independent Advocacy services, to help give a voice to those who may otherwise be marginalised and whose voices may not get heard. | | |
| 1.20 | Increase equitable access to | Establish and invest in training framework | | |

| | mental health and wellbeing training opportunities for people and services within local communities | delivered by range of agencies | | |
|------|--|--------------------------------|--|---|
| 1.21 | Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside Mental Health Services Redesign Transformation Programme. | Await decision January 2018 | | |
| Prog | ress | | | STATUS ✓ Action completed ② Action on course for completion ☑ Progress made but slippage on planned timetable x Little or no progress achieved |

| 2. PERTH & KINROSS STRATEGIC PLAN PRIORITY - PERSON CENTRED HEALTH | NATIONAL HEALTH AND WELLBEING OUTCOME: |
|---|---|
| CARE AND SUPPORT | People who use health and social care |
| People are seen and treated as partners in their own health, care and support and are able to self-manage their conditions, who are able to manage their conditions, putting | services have positive experiences of those services and have their dignity respected; |
| them at the centre of the process. | People who provide unpaid care are supported to reduce the potential impact of |
| National Mental Health Strategy 2017-2027 Ambitions: Access to treatment and joined-up accessible services | their caring role on their own health and wellbeing; |
| Access to the most effective and safe care and treatment for mental health problems should be available across Scotland, meeting the same level of ambition as for physical health problems. Safe and effective treatment that follows clinical guidelines. Services that promote and support recovery-based approaches. Multi-disciplinary teams in primary care to ensure every GP practice have staff who can support and treat patients with mental health issues. | Health and social care services are centred on helping to maintain or improve the quality of life of service users. |
| LOCAL MENTAL HEALTH & WELLBEING OUTCOMES | |
| People get the right information at the right time and people get the right suppo Enabling people to have a voice and shape and influence the services they received | - |
| Enabling people to have a voice and single and imagine the services tincy receiv Enabling people to be an equitable partner in their own health, care and support | |
| • Talking about feelings, emotions and mental health needs to be normalised. | |
| • Services are better able to embrace the voices of people with lived experience. | |
| Maintaining levels of service and help that people need following the January 18 Redesign Transformation Programme. | decision on the NHS Tayside Mental Health Services |
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| | National Action | Local Action | Timescale: Completed by | Resources & Costs | Lead Agencies & Officers | RAG |
|-----|--|---|----------------------------|----------------------|--|-----|
| 2.1 | Increase the workforce to give access to dedicated mental health professionals to all A&Es, all GP practices, every police station custody suite, and to our prisons. Over the next five years increasing additional investment to £35 million for 800 additional mental health workers in those key settings. | Link in with primary care services and other relevant frontline services. | | | | |
| 2.2 | Fund the introduction of a Managed Clinical Network to improve the recognition and treatment of perinatal mental health problems. | Liaise with Keith Russell (AND), regarding perinatal mental health work A pathway to community supports for parents affected by post-natal depression is established. An increased number of Infant Massage Courses will be available. An increased number of other support services to improve attachment will be available Please liaise with Justine Craig, Head of Midwifery, NHS Tayside | Dec 2019 | | Parenting Strategy Implementation Group | |
| 2.3 | Fund improved provision of services to treat child and adolescent mental health problems. | Refer this action to CAMHS | | | | |
| 2.4 | Commission an audit of CAMHS rejected referrals, and | Not applicable for Adult Perth and Kinross Mental Health service | | | | |

| | act upon its findings. | Refer to CAMHS | | |
|------|--|--|--|--|
| 2.5 | Commission Lead Clinicians in CAMHS to help develop a protocol for admissions to non-specialist wards for young people with mental health problems. | Not applicable for Adult Perth and Kinross Mental Health service Refer to CAMHS | | |
| 2.6 | Scope the required level of highly specialist mental health inpatient services for young people, and act on its findings. | Not applicable for Adult Perth and Kinross Mental Health service Refer to CAMHS | | |
| 2.7 | Improve quality of anticipatory care planning approaches for children and young people leaving the mental health system entirely, and for children and young people transitioning from CAMHS to Adult Mental Health Services. | Refer to transition work stream Mental Health Clinical Care and Governance Group (Tayside) | | |
| 2.8 | Support development of a digital tool to support young people with eating disorders. | Refer this action to CAMHS | | |
| 2.9 | Test and evaluate the most effective and sustainable models of supporting mental health in primary care, by 2019. | Link in with primary care services and other relevant frontline services. | | |
| 2.10 | Fund work to improve provision of psychological therapy services and help meet set treatment targets. | Refer to Mental Health Clinical Care and Governance Group (Tayside) | | |
| 2.11 | Develop more accessible psychological self-help | Refer to Mental Health Clinical Care and Governance Group (Tayside). | | |

| | resources and support national | Link with Psychological Therapies | | |
|------|-----------------------------------|--|--|--|
| | rollout of computerised CBT | Group (Kevin Powers) | | |
| | with NHS 24, by 2018. | Group (Revint owers) | | |
| 2.12 | Ensure the propagation of best | Refer to Mental Health Clinical Care | | |
| | practice for early interventions | and Governance Group (Tayside) | | |
| | for first episode psychosis, | (Roger Blake) | | |
| | according to clinical guidelines. | | | |
| | Local Priorities | Local Action | | |
| 2.13 | People get the right | Develop a pathway with a clear | | |
| 2.10 | information at the right time | description of the suite of support and | | |
| | and people get the right | intervention options available to | | |
| | support at the right time for | people according to their mental | | |
| | them. | health and wellbeing needs | | |
| | | | | |
| | | Explore and address current service | | |
| | | provision demands and over | | |
| | | subscription for particular services | | |
| | | Ensure equitable access to a range of | | |
| | | Ensure equitable access to a range of services for people in rural locations | | |
| | | where possible and across the | | |
| | | equalities spectrum. | | |
| | | | | |
| | | Explore access to statutory services | | |
| | | from third sector and self-referrals. | | |
| | | | | |
| | | Improve inter-agency communication | | |
| | | and explore potential social media | | |
| | | outlets. E.g. Your Community P&K, | | |
| | | Twitter | | |
| | | | | |
| | | Invest in evidence-based lower level | | |
| | | interventions | | |

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| | | Increased access to, and provision of Independent Advocacy services. Support the health and wellbeing of carers, particularly during times of loss | | | |
| 2.14 | Enabling people to have a voice and shape and influence the services they receive. | Mental Health and Wellbeing services will be co-produced via the Mental Health and Wellbeing Strategy Group with full engagement from members representing individuals with lived experience. All business delivered by the mental health and wellbeing strategy group will be shaped by stakeholder engagement principles Local Authority and their wider partners should work with individuals via Self Directed Support (SDS) to ensure people that people with Mental Health and Wellbeing issues have access to a variety of providers and support they require and are assisted to think creatively about how their personal outcomes can be met and what assistance they may need to develop control. Ensure services adopt a Human Rights based approach. | | | |
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| | | Increased access to, and provision Independent Advocacy services to address power imbalances and to ensure that all members of the community in Perth & Kinross feel enabled to access and enjoy the full range of options appropriate to their situation. | | | |
| 2.15 | Enabling people to be an equitable partner in their own health, care and support. | Development of an individual's personal skills and knowledge of their mental health and wellbeing through courses, information, training, events etc. | | | |
| | | Encourage individuals to take responsibility for their own journey to recovery using practical tools such as Safe Plans and WRAPs, with support if needed. | | | |
| 2.16 | Talking about feelings, emotions and mental health needs to be normalised. | Campaign work – see 1.18 above | | | |
| 2.17 | Services are better able to embrace the voices of people with lived experience. | Recognise the value of peer support and continue to develop these models (eg schools, hospital) | | | |
| 2.18 | Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside | | | | |

| | Mental Health Services Redesign Transformation Programme. | | | | |
|--------|--|---|--|--|---------------------------------------|
| 2.19 | Increase equitable access to mental health and wellbeing training opportunities for people and services within local communities | Establish and invest in training framework delivered by range of agencies | | | |
| Progre | SS | | | STATUS ✓ Action co ② Action or for completi ☑ Progress r slippage on timetable x Little or no achieved | n course on made but planned |

| 3. PERTH & KINROSS STRATEGIC PLAN PRIORITY - KEEPING PEOPLE SAFE | | | HEALTH AND WELLBEING OUTCOME: People who use health and social care services are safe from harm; | | | | |
|--|-----------------------------------|--|---|---|----------------------|-----------------------------|-----|
| Natio | nal Mental Health Strategy 2017- | 2027 Ambitions: | | | | | |
| • | Safe and effective treatment | accessed in a timely way. | | | | | |
| • | Appropriate mental health p | rofessionals are accessible in | | | | | |
| | Emergency Departments and | I through other out-of-hours crisis serv | vices. | | | | |
| LOCA | L MENTAL HEALTH & WELLBEI | NG OUTCOME | | | | | |
| • | There will be fewer barriers to i | nterventions/ services and support | | | | | |
| | National Action | Local Action | Timescale Completed | | Resources & Costs | Lead Agencies & Officers | RAG |
| | See info in other sections | | • | - | | | |
| | Local Priority | Local Action | | | | | |
| 3.1 | There will be fewer barriers to | Promote smooth transition for people | | | | | |
| | interventions/ services and | throughout their experiences of | | | | | |
| | support | supports and services, which takes | | | | | |
| | | into account all their needs | | | | | |
| | | (emotional, mental, physical and | | | | | |
| | | spiritual). | | | | | |
| | | Develop shared outcomes for person | | | | | |
| | | accessing support and services. | | | | | |
| | | | | | | | |
| | | Develop seamless referral and care | | | | | |
| | | pathway plan. | | | | | |
| | | Provide the right local support for | | | | | |
| I | | people in crisis and improve the | | | | | |
| | | response and options for people in | | | | | |

| | | emotional distress (Pathway). | | | | |
|--------|--|---|---|----------|--|---|
| 3.2 | Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside Mental Health Services Redesign Transformation Programme. | | | | | |
| 3.3 | Increase equitable access to mental health and wellbeing training opportunities for people and services within local communities | Establish and invest in training framework delivered by range of agencies | | | | |
| Progre | ess | | · | <u>.</u> | STATU ✓ Act compl ⓒ Act course compl 毫 Proj made slippag planne timeta x Little noproj achiev | cion eted cion on e for etion gress but ge on ed uble e or gress |

| 4. PERTH & KINROSS STRATEGIC PLAN PRIORITY - WORK TOGETHER WITH COMMUNITIES Working in partnership with people in our communities ('co-production') to build on the skills, knowledge, experience and resources of individuals and communities. | HEALTH AND WELLBEING OUTCOME: People, including those with disabilities, long term conditions, or who are frail, are able to live, as afar as reasonably practicable, independently and at home or in a homely setting in their community. |
|--|---|
| National Mental Health Strategy 2017-2027 Ambitions: Rights, information use, and | |
| planning | |
| That a human rights-based approach is intrinsic to actions to improve mental health. That legislation related to mental health is fit for purpose. That people who have experienced mental health problems can be supported back into the workplace. | |
| That people who develop poor mental health are supported to stay in work just as they would be with physical health problems. | |
| LOCAL MENTAL HEALTH & WELLBEING OUTCOME | |
| Being more socially connected and participating in meaningful activities. People get the support they need to live a meaningful life in their community. Easier access to the housing, employment and welfare systems. | |
| | |
| People get the support they need to live as independently as possible. Decade with montal health and wellbeing issues have more valuated in and employment of the second e | ant apportunities |
| People with mental health and wellbeing issues have more volunteering and employment People with mental health and wellbeing issues retain their employment. | ent opportunities. |
| | noto rocovonu |
| More influence on national policy on permitted work and volunteering in order to pror Communities are more supportive and inclusive. | note recovery. |
| Maintaining levels of service and help that people need following the January 18 decisi Transformation Programme. | on on the NHS Tayside Mental Health Services Redesign |
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| | National Action | Local Action | Timescale: Completed by | Resources & Costs | Lead Agencies & Officers | RAG |
|-----|---|---|----------------------------|----------------------|-----------------------------|-----|
| 4.1 | Use a rights-based approach in the statutory guidance on the use of mental health legislation. | Mental Health Act – await review | | | | |
| 4.2 | Commission a review of whether the provisions in the Mental Health (Care and Treatment) (Scotland) Act 2003 Act fulfil the needs of people with learning disability and autism, taking forward new legislative measures if necessary. | Mental Health Act – await review | | | | |
| 4.3 | Reform Adults With Incapacity (AWI) legislation. | Mental Health Act – await review | | | | |
| 4.4 | Work with key stakeholders to better understand Mental Health Officer capacity and demand, and to consider how pressures might be alleviated. | Mental Health Officer- await review recommendations | | | | |
| 4.5 | Work with employers on how they can act to protect and improve mental health, and support employees experiencing poor mental health. | Employability Network P&K | | | | |
| 4.6 | Explore innovative ways of connecting mental health, disability, and employment support in Scotland. | Employability Network P&K | | | | |
| | Local Priority | Local Action | | | | |

| 4.7 | Being more socially connected and participating in meaningful activities. | Develop a range of accessible community based social and physical opportunities which are both targeted and universal in their approach. Work with partners e.g., Live Active Leisure to effectively promote activities available. Explore resources e.g. public transport to help to enable people to become more socially connected and to be able to participate. Raise awareness of the impact of social isolation, loneliness and their consequences on mental health and | | | |
|-----|--|---|-----------|--|--|
| | | wellbeing at all ages Parents who have children experiencing poor emotional wellbeing or mental illness will feel more confident in supporting their own child/young person at home | June 2019 | Parenting Strategy Implementation Group | |
| 4.8 | People get the support they need to live a meaningful life in their community. | Explore possibility of Peer workers, a buddy service or community based facilitators to provide support to people to attend activities. Deliver training to improve staff awareness of how parental mental health diagnosis and treatments can affect: • their communication and | June 2019 | Parenting Strategy Implementation Group | |

| 4.9 | Easier access to the housing, | functioning; their parenting ability; and the potential impact on the child/young person. | | |
|------|--|---|--|--|
| | employment and welfare systems. | Raise awareness of the impact of housing, employment and welfare reform on a person's mental health Provide training on | | |
| | | housing/welfare/employment for people in mental health and wellbeing services Promote and explore peer support | | |
| | | and access to Independent Advocacy regarding welfare/employment issues Provide Mental Health and Wellbeing | | |
| | | awareness training for people working in benefits/welfare/housing services. | | |
| 4.10 | People get the support they need to live as independently as possible. | Implement the recommendations of the Accommodation with Support for people with Mental Health Issues review. People need to be in the most appropriate, least restrictive form of housing available. | | |
| | | Refer to SDS comment in section 2 above | | |
| 4.11 | People with mental health and | Promote the importance of | | |

| | wellbeing issues have more volunteering and employment opportunities. | meaningful work experiences for everyone by working with employers to ensure more opportunities for people who are in not currently in employment and who have with mental health and wellbeing issues. Actively Increase volunteering opportunities in localities for people with Mental Health and Wellbeing issues. Increase capacity of organisations to support volunteers with Mental Health and Wellbeing issues. | | |
|------|---|--|--|--|
| 4.12 | People with mental health and wellbeing issues retain their employment. | Provide support to employers and public services to implement the Equality Act 2010 with respect to mental health problems in all areas of life. Promote the importance of meaningful work experiences for everyone by working with employers | | |
| 4.13 | More influence on national policy on permitted work and | to ensure better support for people who are in employment with Mental Health and Wellbeing issues. Feedback at national level the experiences of organisations locally on | | |
| | volunteering in order to promote recovery. | supporting people with mental health issues into employment | | |

| 4.14 | Maintaining levels of service | | | | |
|--------|-------------------------------|---------------------------------------|--|--------|-----------------|
| 4.14 | and help that people need | | | | |
| | following the January 18 | | | | |
| | decision on the NHS Tayside | | | | |
| | Mental Health Services | | | | |
| | Redesign Transformation | | | | |
| | Programme. | | | | |
| 4.15 | Increase equitable access to | Establish and invest in training | | | |
| | mental health and wellbeing | framework delivered by range of | | | |
| | training opportunities for | agencies | | | |
| | people and services within | Continue and develop programme of | | | |
| | local communities | mental health and suicide prevention | | | |
| | | training courses | | | |
| | | Continue awareness raising and anti- | | | |
| | | stigma campaigns. | | | |
| 4.16 | Communities are more | Consider initiatives such as | | | |
| | supportive and inclusive. | Participatory Budgeting, Time Banking | | | |
| | | and Citizen Advocacy | | | |
| | | Link with the Local Action Plans | | | |
| | | (action partnerships) and | | | |
| | | implementation of Community | | | |
| | | Empowerment Legislation | | | |
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| Progre | ess | | | STATU | ion |
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| made but |
| slippage on |
| planned |
| timetable |
| x Little or |
| noprogress |
| achieved |

| 5. PERTH & KINROSS STRATEGIC PLAN PRIORITY - REDUCE INEQUALITIES AND | HEALTH AND WELLBEING OUTCOME: |
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| UNEQUAL HEALTH OUTCOMES AND PROMOTE HEALTHY LIVING | • Health and social care services contribute to |
| Encourage and support individuals and communities to look after and improve their | reducing health inequalities. |
| health and wellbeing, resulting in more people living in good health for longer, with | |
| reduced health inequalities. | |
| National Mental Health Strategy 2017-2027 Ambitions: The physical wellbeing of people | |
| with mental health problems | |
| • That premature mortality of people with severe and enduring mental illness is tackled. | |
| • That the rate of smoking amongst people with a diagnosed mental health problem | |
| should decline at the same rate as the rate for the general population. | |
| • That the uptake of screening for cancers, amongst people with a diagnosed severe | |
| and enduring mental illness, should be the same as the rate for the general | |
| population. | |
| That side effects of psychiatric medication are appropriately monitored and, | |
| where possible, reduced. | |
| LOCAL MENTAL HEALTH & WELLBEING OUTCOMES | |
| People feel more able and willing to take action to make changes to and look after t | beir physical and mental health |
| Reduce the social and health inequalities experienced by those with mental health i | |
| conditions | sroblenis, including long term physical nearth |
| Maintain broad strategic approach which encompasses: | |
| • Wellbeing | |
| A holistic approach | |
| Focus on recovery | |

- There will be fewer barriers to interventions/ services and support
- Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside Mental Health Services

Redesign Transformation Programme.

| | National Action | Local Action | Timescale: Completed by | Resources & Costs | Lead Agencies & Officers | RAG |
|-----|--|---|----------------------------|----------------------|-----------------------------|-----|
| 5.1 | Test and learn from better assessment and referral arrangements in a range of settings for dual diagnosis for people with problem substance use and mental health diagnosis. | Dual diagnosis 2 nd June work in Angus - to explore | | | | |
| 5.2 | Offer opportunities to pilot improved arrangements for dual diagnosis for people with problem substance use and mental health diagnosis. | Dual diagnosis 2 nd June work in Angus - to explore | | | | |
| 5.3 | Work with partners who provide smoking cessation programmes to target those programmes towards people with mental health problems. | Smoking cessation – public health | | | | |
| 5.4 | Ensure equitable provision of screening programmes, so that the take up of physical health screening amongst people with a mental illness diagnosis is as good as the take up by people without a mental illness diagnosis. | Keep Well agenda | | | | |
| 5.5 | Support the physical activity programme developed by SAMH. | Support this agenda – SAMH info needed. | | | | |
| | Local Priority | Local Action | | | | |
| 5.6 | People feel more able and willing to take action to make changes to and look after their physical and mental health. | Provide opportunities for social activities which may lead on to physical activities. Develop sustainable peer support or a buddying programme. | | | Gill McShea | |

| | | Encourage people to take up the general screening and prevention opportunities available and undertake regular health monitoring through their GPs | | |
|-----|---|---|--|--|
| 5.7 | Tackle the social and health inequalities experienced by those with mental health problems, including long term physical health conditions | Targeting and tailoring activities that aim to promote health and prevent ill health to take into account the specific needs of people who have mental health issues Undertake activities to address obesity within the population of people who have mental ill health | | |
| 5.8 | Maintain broad strategic approach which encompasses Wellbeing, a holistic approach and a focus on recovery | Advocate the principles of wellbeing in relation to good mental health. Explore specific targeting and funding of programmes to improve the health of people who use mental health and wellbeing services Promote a recovery focused approach in all aspects of support and service delivery. | | |

| 5.10 | Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside Mental Health Services Redesign Transformation Programme | | | |
|-------|---|--|--|--|
| 5.11 | Increase equitable access to mental health and wellbeing training opportunities for people and services within local communities | Establish and invest in training framework delivered by range of agencies. | | |
| Progr | ess | | | STATUS ✓ Action completed ⓒ Action on course for completion ☑ Progress made but slippage on planned timetable x Little or no progress achieved |

| 6. PERTH & KINROSS STRATEGIC PLAN PRIORITY - MAKING THE BEST USE OF AVAILABLE FACILITIES, PEOPLE AND RESOURCES Focus on realigning resources to provide more community-based delivery. Looking at our joint health and social care resources, how we use our joint resources and improve the health and wellbeing outcomes of the local populations and what we need to change in order to focus our funding on delivering health, care and support for local people. | | | | HEALTH AND WELLBEING OUTCOME: People who work in health and social conservices are supported to continuous improve the information, support, care a treatment they provide and feel engage with the work they do; Resources are used effectively in | | | | |
|--|--|---|---|---|--|-----------------------------|-----|--|
| | National Mental Health Strategy 2017-2027 Ambitions: Data and measurement – Develop a quality indicator profile in mental health. | | | | provision of health and social care service without waste. | | | |
| • | L MENTAL HEALTH & WELLBEING PRIO Better measures of performance to e Better understanding of how money Better use of performance related inf A more shared culture, ownership of, Better processes for hearing service u Maintaining levels of service and help Redesign Transformation Programme | vidence outcomes for people wh s spent on Mental Health Service ormation to make supports and and accountability for, data and users voices to shape the design a that people need following the | es services better information a and delivery of | vailable service | e that helps to sh es | | | |
| | National Action | Local Action | Timesca Complete | | Resources & Costs | Lead Agencies & Officers | RAG | |
| 6.1 | Develop a quality indicator profile in mental health which will include measures across six quality dimensions – person-centred, safe, effective, efficient, equitable and timely. | Wait and see- Query? | | | | | | |
| 6.2 | Establish a bi-annual forum of stakeholders to help track progress on the actions in this Strategy, and to help | Wait and see – Query? | | | | | | |

| | develop new actions in future years to help meet our ambitions. | | | |
|-----|---|---|--|--|
| 6.3 | Carry out a full progress review in 2022, the halfway point of the Strategy, to ensure that lessons are learnt from actions to that point. | Wait and see – Query? | | |
| | Local Priority | Local Action | | |
| 6.4 | Better measures of performance to evidence outcomes for people who use supports and services | Jointly develop performance measures to evidence outcomes for people who use supports and services | | |
| 6.5 | Better understanding of how money is spent on Mental Health Services | Develop the work already undertaken as part of Third Sector Review to encompass Local Authority and NHS Tayside Services | | |
| 6.6 | Better use of performance related information to make supports and services better | Develop a reporting framework Use data in a reporting format at MHWB Strategy Group meetings and for other relevant meetings, events, and reports. | | |
| 6.7 | A more shared culture, ownership of, and accountability for, data and information available that helps to shape supports and services | Develop an improvement plan in relation to performance and reporting framework to evidence best use of resources, people and place. Ensure response to requests for data. | | |
| 6.8 | Better processes for hearing service users voices to shape the design and delivery of services | Link with Independent Advocacy and PLUS to secure feedback on services and how to improve | | |

| | | them. | | |
|-------|--|---|--|--|
| 6.9 | Maintaining levels of service and help that people need following the January 18 decision on the NHS Tayside Mental Health Services Redesign Transformation Programme. | | | |
| 6.10 | Increase equitable access to mental health and wellbeing training opportunities for people and services within local communities | Establish and invest in training framework delivered by range of agencies on the importance of data collection and utilisation, and how/which data should be gathered. | | |
| Progr | ess | | | STATUS ✓ Action completed ② Action on course for completion [®] Progress made but slippage on planned timetable x Little or no progress achieved |