Mental Health Strategy
Easy Read
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Introduction

Improving mental health and treating mental illness are two of our biggest challenges. More people in Scotland receive treatment and they get it faster than before, because awareness and understanding of mental ill health have grown.

But things could be better. This Strategy tells how we plan to do this, between now and 2015.

The Challenge

Mental illness is one of the main public health problems in Europe.

It is estimated that one out of every three people will suffer from mental illnesses like depression and anxiety every year. Many other people have mental illnesses connected with drugs and alcohol, and many people suffer from dementia.

In all countries, poorer people are more likely to have mental health problems.

The number of people with mental illnesses does not seem to change over time, but more people are accessing services now because awareness and understanding of mental illness is growing.

Many people who are on social welfare benefits or disability benefits have mental health problems.

People with mental health problems do not live as long as other people. Many people with serious illnesses can become depressed, and this makes it harder for them to get better.

These are major problems and dealing with them is not going to be easy.
What have we done so far?

The Scottish Government has worked with the NHS, local government, the voluntary sector and service users and carers to make sure that mental health problems are taken just as seriously as any other health problem.

Here are some of the improvements that have been made:

**Readmissions**
We have reduced the number of people who are sent home from hospital but then have to go back in again.

**Suicide**
The number of people who kill themselves has dropped. We have trained front line staff to be more understanding of people who are at risk of suicide.

**Dementia**
Scottish NHS boards are the best in the UK at spotting and dealing with dementia.

**Psychological Therapies**
We are working towards giving people who need psychological and talking therapies faster in Scotland.

**Child and Adolescent Mental Health Services (CAMHS)**
We are reducing waiting times for child and adolescent mental health services. There was a report in 2003 that suggested how we could improve these services. We have made the changes suggested by the report and are continuing to do better.
Ways of Working – Main points

The Mental Health Strategy says that health care must be:

Person centred
There must be a partnership between patients, their families and those who are providing healthcare. There must be clear communication and shared decision making.

Safe
People must not be harmed by the healthcare they are given, and healthcare must always be given in places that are safe and clean.

Effective
The best treatments must be given at the right times to everyone who needs them.

The consultation on the mental health strategy raised these main points.

1. Working more effectively with families and carers
Families and carers play a very important part in supporting people with mental illness, but they often feel left out because of the way services work.

We will make families and carers more involved in making decisions and delivering services. We will talk to organisations that represent service users, to find the best way to do this.

2. Peer Support Workers
People who have experienced mental illness themselves are often the best people to help others with mental health issues. We are looking to learn from Peer Support to help others.

3. Self management and self support
It is better for people to help in managing their own illness, and this is just as important for mental illnesses. We will continue to offer people a self-help service, especially for common mental health problems like stress.
4. **Put a stop to discrimination**

'see me' is Scotland’s national campaign to end the stigma and discrimination of mental ill-health. The work that has been done as part of this campaign has been very successful, and has been copied in other parts of the world.

We will work with the managers of the “see me” campaign and the Scottish Association for Mental Health, to take this work forward.

5. **Focus on the rights of people with mental illness**

The Mental Health (Care and Treatment) (Scotland) Act 2003 sets out the rights of people with mental illness when they are receiving healthcare.

We will work with the Scottish Human Rights Commission and the Mental Welfare Commission to make sure that people’s rights are an important part of mental healthcare in Scotland.

6. **Look at the whole person**

When we think about the help we give patients, we need to think about more than just clinical help, we need to remember that their social and personal wellbeing are important too.

7. **Use new technology**

Lots of people now use the internet or other new technologies to find help when they are in distress.

We will continue to think of ways to use new technologies to help improve people’s mental health.
Main Area for Change 1: 
Child and Adolescent Mental Health

Babies and small children’s Mental Health
The first three years of a child’s life are very important for its mental health. The Scottish Government will publish a Parenting Strategy in 2012 which will help to support parents and make them more confident about raising their children.

Challenging Behaviour
It is normal for small children to not do as they are told, get very angry and upset from time to time. Most children stop this by the time they start school, but some children keep behaving this way all through childhood. Some even keep behaving this way when they grow into adults.

We know that this can lead to all sorts of problems in a person’s life. They can lose all their friends, find it hard to work with others, and they can develop mental health problems.

Parenting programmes can help parents to deal with these problems at an early age.

In 2012 we will start to make parenting programmes available all over Scotland, to help parents of 3-4 year old children with severe disruptive behaviour.

Attachment Problems
All children need to form a strong emotional bond with someone they are very familiar with – usually their parents. If this does not happen, a child can have very high levels of stress and anxiety, and this is not always easy to spot and some parents might not know anything is wrong.

We know something about why this happens, and we need to know more about how to deal with it better.

We need to train healthcare professionals so that they can tell when a child has attachment problems.

Looked After Children (Children In Care)
We know that children who are in care have poorer mental health than other children.
Things have been getting better because mental health training has been made available to all those who work with or care for looked after children and young people. More work needs to be done to meet the mental health needs of looked after children.

**Learning Disability and Child and Adolescent Mental Health Services (CAMHS)**

We know that access to mental health services for children with a learning disability is better in some parts of Scotland than in others.

We are working to find out why different parts of Scotland have better learning disability services than others. Once we understand why this is, we will change services so that everyone in Scotland will have equal access to services.

**Access to Specialist Child and Adolescent Mental Health Services (CAMHS)**

We are working to reduce the time between referrals and treatment, for specialist CAMHS. By March 2013, no child will wait longer than 26 weeks for treatment. By December 2014, we will reduce this time to 18 weeks.

We will work with the NHS in Scotland to make sure these targets are met.

**Admission to adult hospital beds**

Children will only be put in an adolescent unit if that is the only safe and proper thing for them. It is important that beds are available if they’re needed.

We want to make sure that fewer children under 18 are put in adult hospital wards.
Main Area for Change 2: Rethinking How We Deal With Common Mental Health Problems

Common mental health problems like depression and anxiety can be serious and long lasting. In the past, they have been treated in the same sort of way as more complex mental health conditions. We need to change this.

We need to see to it that people who suffer from depression and anxiety don’t just get help from doctors, but also from family and friends too. Sufferers can also do a lot to help themselves, and that helps them to have better mental health in the long term. We want to make information and support more widely available.

This approach will not work for everyone. Services as they are now will continue to be an important part of the mental health system.

Faster access to Psychological Therapies

The Scottish Government is committed to delivering faster access to psychological therapies for people with mental health problems. People with severe and long lasting mental illness and those with more common illnesses like depression and alcohol addiction need to be able to get therapies more quickly.

By December 2014, we will make sure that no-one will wait longer than 18 weeks to get treatment for mental health problems, no matter how old they are or what their illness is.

Equal Access To Services

Some people find it easier than others to access mental health services. That can be because some people feel they are discriminated against, or because there are gaps in services.

We need to find out who is accessing services and who isn’t, and improve the system so we can meet everyone’s needs.

Social Prescribing and Self Help

Improving access to psychological therapies is just one part of making a better mental health service. NHS Boards and their partners also offer information and advice, self-help, counselling and other treatments like exercise, to help people who are feeling psychological distress.
Many people prefer to do something themselves to improve their mental health, and we know that physical exercise and social activities help people to recover from mental illness.

Some people don’t access these services because they don’t know about them, they don’t think they are for them, or they are nervous about going for the first time.

We need to raise awareness about these services and make sure people know the good they can do for their own mental health.

**Mental Health and Alcohol**

There are strong links between depression and drinking too much alcohol.

The NHS in Scotland has been working in hospitals to spot when alcohol is causing depression and encourage people to drink less.

We will work with the NHS in Scotland to improve the treatment of people whose mental health is affected by alcohol.

**Mental Health and Debt**

Debt causes stress and anxiety, and can cause other mental health problems. We know that people with mental health problems who are in debt are more likely to kill themselves. We have helped to train staff at the Citizen’s Advice Bureau to recognise these issues so they can support their clients better.

**Trauma**

When a person has a life altering event, it may cause harm leading to different kinds of mental health problems like depression, addiction to drugs or alcohol, or physical symptoms.

We are getting better at understanding the effects of trauma on mental health, but services don’t always meet the patient’s needs.

We need to learn more about this and change services so that people who have suffered trauma get all the help they need.

**Distress**

In recent years, we have been getting better at understanding illnesses and behaviours like self harm and eating disorders.
We need to get better at understanding the causes of these illnesses, rather than just dealing with the results.

Sometimes people with these illnesses will ask for help, but at other times they might withdraw, and fail to keep appointments.

We are working with the NHS, social work, the police and others to come up with the best way to help people who are in distress.

**Mental Health of Older People**

A lot of work is being done to help older people with dementia. However, more older people suffer from depression and anxiety than dementia, and more work needs to be done to help them. More than anyone else, older people are unlikely to have their mental illnesses recognised and treated.

We will work with the NHS to provide better specialist services for older people, and make sure they get the same level of care and support as everyone else.

**Mental Health and those with Physical Illness**

Some people with long-term physical illnesses also have mental health problems like depression and anxiety. We have found that these people are less likely to make a recovery.

We need to work with GPs to get better at telling when patients with long-term illnesses have depression or anxiety, and give them the help they need.
Main Area for Change 3:  
Community, Inpatient and Crisis Services

The mental health system should have a range of mental health services to meet the needs of all people with severe and long-lasting mental health illnesses.

Across Scotland, there has been a move away from treating people in hospitals, towards giving them treatment in the community. We need to keep looking at the way we organise our services and make sure we provide the best service possible.

Intensive Home Treatment Services and Crisis Prevention Approaches

Some people with mental health problems have long periods when they feel well, but then have sudden periods when they need help and treatment. Some NHS boards in Scotland have home treatment services to care for people at home during the periods when they need help.

People who have had this service said they thought it was very helpful, but this service is not available in all parts of Scotland.

Another idea is to have a crisis safe house. This is a place where people could go when they needed support in the short-term, to resolve a crisis.

We need to look at these different ideas and decide which approaches provide the best home treatment and crisis services.

First Episode of Psychosis

If psychosis is spotted early enough and treated, there is a better chance that the patient will make a full recovery and return to work, education or training.

We will identify what mental health services need to be in place to provide early treatment for people with psychosis.

Inpatient Services

As more people receive treatment in the community, the number of psychiatric hospital beds has been reduced across Scotland.

We will find out who is put in hospital beds and why, and find out how much this is different across different parts of Scotland.

Patient Safety
When thinking about whether patients should be treated at home or in hospital, we need to make sure they are safe. We have started a four year programme to reduce the harm that people receive when they are being cared for by mental health services.

**Health Improvement for People with Severe and Long-Lasting mental illness**

People with mental disorders die on average 10 years earlier than other people. The Scottish Government is improving the physical health of people with mental illnesses by making sure they have a health assessment every 15 months.

We will continue to work with the NHS to help people with severe and enduring mental illnesses to improve their physical health.

**Employability**

We know that being in the right work is good for a person’s health and improves their quality of life and wellbeing. This is also true for people with mental or physical health conditions. However, people with mental illness are less likely to be engaged in work than other people. We need to change this.

With the right kind of help and support, people with serious mental health problems can get and keep work. We need to make sure they understand that working is good for their mental health.
Main Area for Change 4: Other Services and Groups

Mental Health among Offenders
Prison staff are being trained in delivering psychological therapies to mentally disordered prisoners.

We know that a lot of women who commit crimes have mental illness or a personality disorder. We need to improve the care and support they get in prison and in the community, and give them better access to psychological therapies. We need to help police, healthcare, prison and social work staff to understand the link between mental disorder and criminal behaviour.

We will work with prisons and the NHS to help women with borderline mental disorders in prisons and in the community. We will give better access to psychological therapies for women offenders.

Neurodevelopmental Disorders
Neurodevelopmental Disorders are conditions that effect a person’s social behaviour.

Autism Spectrum Disorder (ASD), Aspergers Syndrome, Attention Deficit Hyperactivity Disorder (ADHD), Tourettes Syndrome and chronic severe tic disorders are among the neurodevelopmental disorders most common from childhood into adulthood.

There is small number of people with Autism Spectrum Disorder (ASD) who need high levels of care, and we need to raise awareness and skills so that they get the care they need.

We also need to raise awareness and understanding of Attention Deficit Hyperactivity Disorder (ADHD), so that people with ADHD get the best treatment.

Veterans
Veterans with mental health problems need special services to give them the care they need.

The Scottish Government funds an organisation called Combat Stress, which responds to the mental health needs of veterans and gives them better access to services.
Veteran’s First Point is a drop-in service in Lothian that gives veterans treatment, support and advice on health, employment and education.

We will continue to fund the Veterans First Point project and work with the NHS and Veterans Scotland to provide more support for veterans with mental health problems.

**Support Activity**

The Scottish Government wants NHS Scotland to be one of the best healthcare providers in the world, delivering the highest quality care that is person centred, effective and safe. We are doing well, but there are still improvements to be made.

This is how we will support services to improve:

- Make sure staff have the skills to deliver the best treatment
- Make sure staff treat everyone with dignity and respect, supporting them to recovery
- We will improve information and data collection
- Make sure we do things in the most efficient and reliable way possible

We need to look at how we do things now and find out what needs to change. We need to make sure that the changes we make are actually making things better.

We will help to set up a local government health forum to look at ways of helping people with mental health problems get jobs, provide community support, services for older people, and make better links between health and social care.

We will review each NHS board in Scotland mental health services twice a year to make sure that services are improving, and we will provide help and support to make sure this happens.