

KEY FINDINGS OF THE NEEDS ASSESSMENT

The Scottish Borders is considered to be an excellent area to live in; with a varied landscape, strong heritage and a broad range of cultural and leisure opportunities - all of which contribute to a high quality of life for many residents.

The research team has been highly impressed with the commitment and desire of all key groups (service users, carers, staff, managers and commissioners) to aim for significant improvements in services provided for those with mental health problems. The following set of recommendations have been developed to match the level of commitment and desire evidenced throughout the project. The research team believe that a genuine focus on these recommendations will lead to a full programme of change and improvement over the next 5-10 years.

NHS Borders and Scottish Borders Council are increasingly involving service users, former service users and mental health recovery champions in the planning and development of mental health services. This is a very welcome development.

There are 21 recommendations in total for consideration by Scottish Borders Council, NHS Borders, and all their partners. Recommendations have been developed from the evidence collected by the research team from all the meetings, interviews and surveys that have taken place. The recommendations have been grouped under the following five key themes:

Ambition, Change and Strategy (recommendations 1-5)

Commissioning, Monitoring and Evaluation (recommendations 6-10)

Integrated Practice (recommendations 11-17)

Workforce Development (recommendation 18)

Recovery (recommendations 19-21)

RECOMMENDATIONS

Ambition, Change and Strategy (recommendations 1-5)

- 1:** Development of an overarching Mental Health Strategy for the Scottish Borders to capture the views and aspirations of all stakeholder groups.
- 2:** The development of a joint strategy with a broad range of stakeholders should consider and agree a set of joint principles for action that will be addressed through the lifetime of the strategy.
- 3:** In order to involve all relevant stakeholders as equal partners in developing an overarching strategy (Recommendation 1) and a set of joint principles for action (Recommendation 2), it is recommended that mental health commissioners consider resourcing a mental health 'change agent'.
- 4:** Commissioners need to work with providers to consider how innovation and creativity can be encouraged within the sector, such as the need for simple and straightforward messages.
- 5:** Community Mental Health Team's should play a central and commanding role in driving quality integrated practice and continuous improvement to maximise outcomes for people with mental health and their carers.

Commissioning, Monitoring and Evaluation (recommendations 6-10)

- 6:** Commissioners are encouraged to consider how they routinely identify, affirm and encourage good practice.
- 7:** Commissioners should review the pattern of service provision and contracting to ensure that it strengthens the co-ordination of care and effective partnership working and communication.
- 8:** Commissioning strategies and plans should be transparent about the levels of resourcing for mental health services in local areas and how these benchmark against local and regional patterns of resourcing.
- 9:** Consideration needs to be given to conducting ongoing, consistent and equitable evaluation of all mental health services across the Borders.
- 10:** Undertake regular needs assessment and specific, targeted research to address areas of unmet mental health need and inequality; e.g. dual diagnosis, hidden populations and young people, concurring physical and mental health problems.

Integrated Practice (recommendations 11-17)

- 11:** Design an information sharing protocol between mental health and alcohol/drugs services.
- 12:** Construct an integrated working guide involving mental health services, alcohol/drug services, housing, employability and other relevant services (e.g. criminal justice and learning disabilities); as well as recovery communities.
- 13:** Need clear strategic approaches to preventing mental health problems and to helping individuals and communities understand and have good mental well-being.
- 14:** Services need to be developed to be more responsive including ensuring that waiting time targets are consistently met, having clear access criteria, being available for longer hours and also ensuring that staff understand what services are available and how to appropriately refer.
- 15:** Commissioners need to work with providers to look at how IT can be more effectively used to enhance mental health support.
- 16:** Commissioners need to look at how third sector and peer support can be developed and more integrated into local models of service provision.
- 17:** Consideration should be given to developing a clear framework for how service users and their families/carers could and should be involved in the delivery, development and commissioning of mental health services.

Workforce Development (recommendation 18)

- 18:** There is a clear need for a long-term programme of workforce development opportunities.

Recovery (recommendations 19-21)

- 19:** Promote empowerment and positive recovery from mental health problems.
- 20:** Learn from experience and emerging evidence; and forge alliances to support recovery communities.
- 21:** Commissioners need to work together with providers to develop the local recovery model and look at how a recovery college approach might be developed in the Borders.