

# Strategic Commissioning Plan Mental Health Services

## 2019-2023

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*"Increasing wellbeing and reducing health inequalities across all communities in West Lothian"*

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# 1. Introduction

In West Lothian we believe in providing supports and services that allow our citizens to live well. The Mental Health Commissioning Plan sets out how the West Lothian Health and Social Care Partnership aims to improve the way in which health and social care services are delivered to people within our population who need mental health care and support.

The Public Bodies (Joint Working) (Scotland) Act 2014 requires arrangements to be put in place for the delivery of integrated health and social care. As a result of this we have published the [West Lothian Integration Joint Board Strategic Plan 2019-23](#) setting out both our aims and strategic priorities to achieve this ambitious goal. The vision of the plan is:

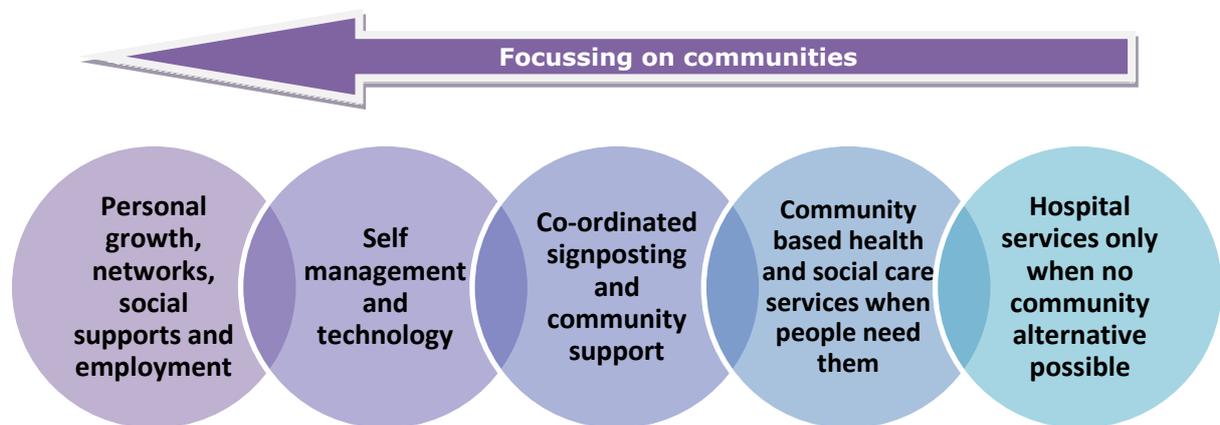
***"To increase wellbeing and reduce health inequalities across all communities in West Lothian"***

By working to the values of both West Lothian Council and NHS Lothian, The Integration Joint Board (IJB) has developed a set of values that will underpin the future commissioning of the services outlined in this plan.



## 2. Our Approach

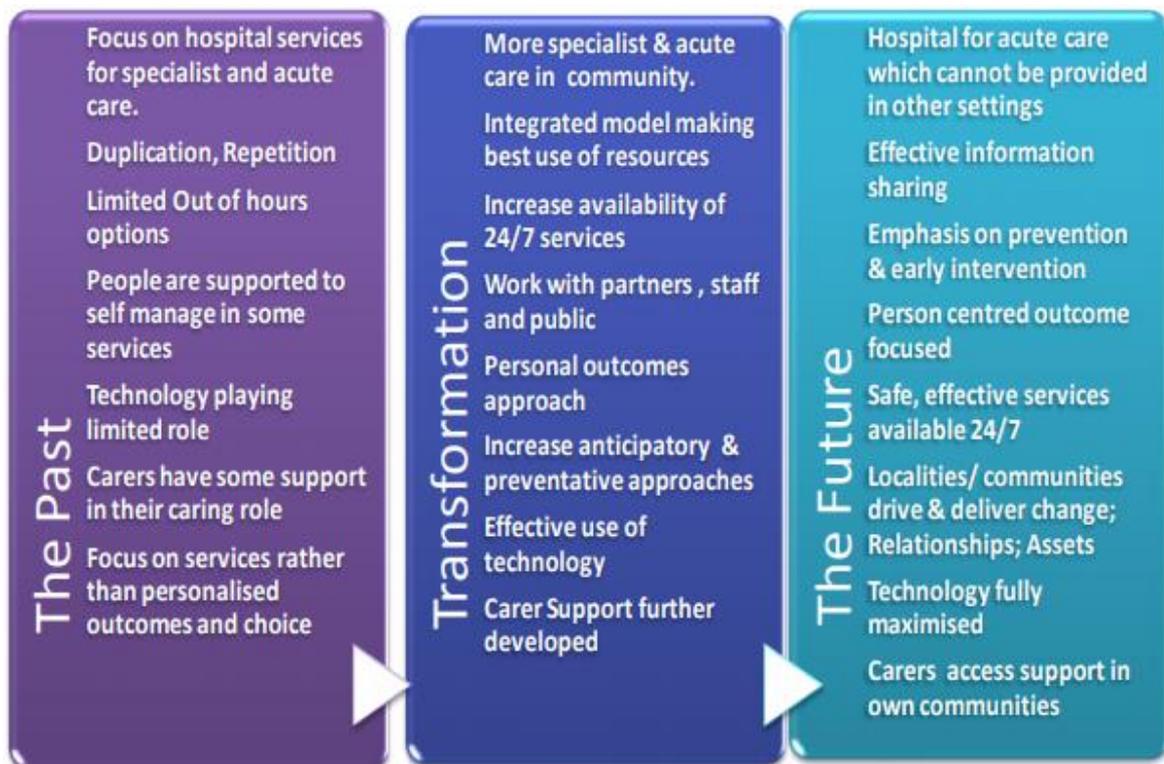
We have adopted a whole system approach to reviewing and developing mental health commissioning for adults in West Lothian. This means that we are thinking about how we invest our resources in hospital, community health and social care services in the future, recognising that in many instances services are best when they are delivered locally. We are working on the principle of offering health and care services in community settings unless there is a very good reason not to. We are focussing on how we shift the balance of care towards delivery of care and support at the right time in local communities.



Significant transformational change takes time and we recognise that it may take longer than the span of this plan to achieve all the changes we need. This plan, however, builds on previous work and provides a firm foundation for developing mental health services for adults in West Lothian over the next four years.

We need to think carefully about how we manage our financial resources and our workforce to deliver new ways of working. It will be necessary to invest in some services and disinvest in others as our plans develop. We also need to build a sustainable workforce to address some of the workforce challenges we face, and to deliver the changes we need. We will ensure that we focus on maximising opportunities for integrated and partnership working.

The vision for transformational change in Health and Social Care in West Lothian is described in more detail below:



Engagement with local communities provides a key mechanism for ensuring that services are planned and led in a local way. Development of the commissioning plan for mental health services has involved both targeted and open consultation with service users, carers, families, service providers from the third and independent sectors and staff from across the West Lothian Health and Social Care Partnership (WLHSCP). The consultation and engagement undertaken has allowed the WLHSCP to identify what matters most to those directly affected by the commissioning of existing and new services in West Lothian.

We know that the mental health needs of the West Lothian population are growing. We also know, however, that with the right approach, many mental health problems can be prevented and that almost all can be treated to enable people to recover or to manage their conditions and go on and lead fulfilling lives.

In March 2017, the Scottish Government published the Mental Health Strategy 2017 to 2027 which contained the guiding ambition “that we must prevent and treat mental health problems with the same commitment, passion and drive as we do with physical health problems”.

The strategy focuses on improving:



Our approach in West Lothian draws on the priorities outlined in the Mental Health Strategy and puts prevention and early intervention and the heart of service development.

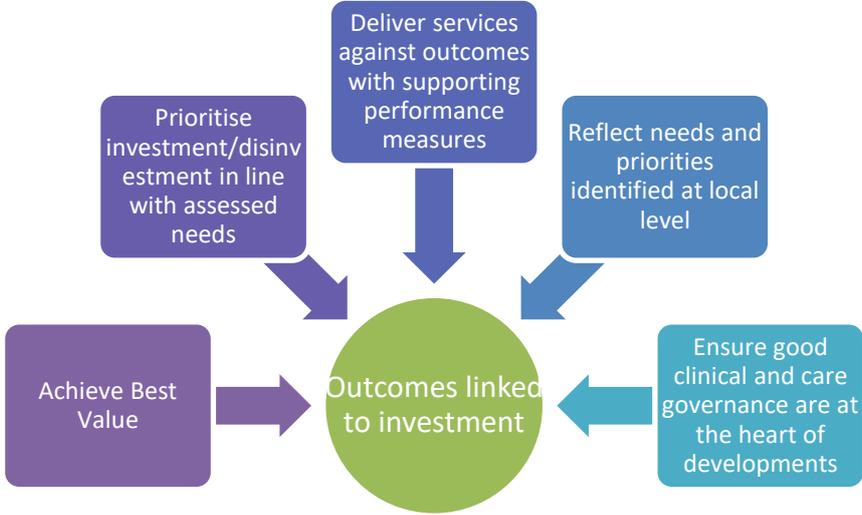
The Scottish Government published Health and Social Care Standards: My Support, My Life in June 2017. The new Standards set out what we should expect when using health, social care or social work services in Scotland. They seek to provide better outcomes for everyone; to ensure that individuals are treated with respect and dignity, and that the basic human rights we are all entitled to are upheld. The development of our services will be based on the following underpinning principles:



The development of services and supports for people with dementia and their families and carers is being taken forward in the commissioning plan for older people but the overlap with the mental health commissioning plan is acknowledged. In addition, the learning disability commissioning plan will include some priorities for the development of services for people with complex needs associated with Autism Spectrum Disorder.

The development of new West Lothian Commissioning Plan for Mental Health Services has been overseen by the Integration Joint Board's

Strategic Planning Group and the Mental Health Planning and Commissioning Board. The commissioning plan aims to:



**Climate Change**

West Lothian Integration Joint Board acknowledges its position of responsibility in relation to tackling climate change in West Lothian.

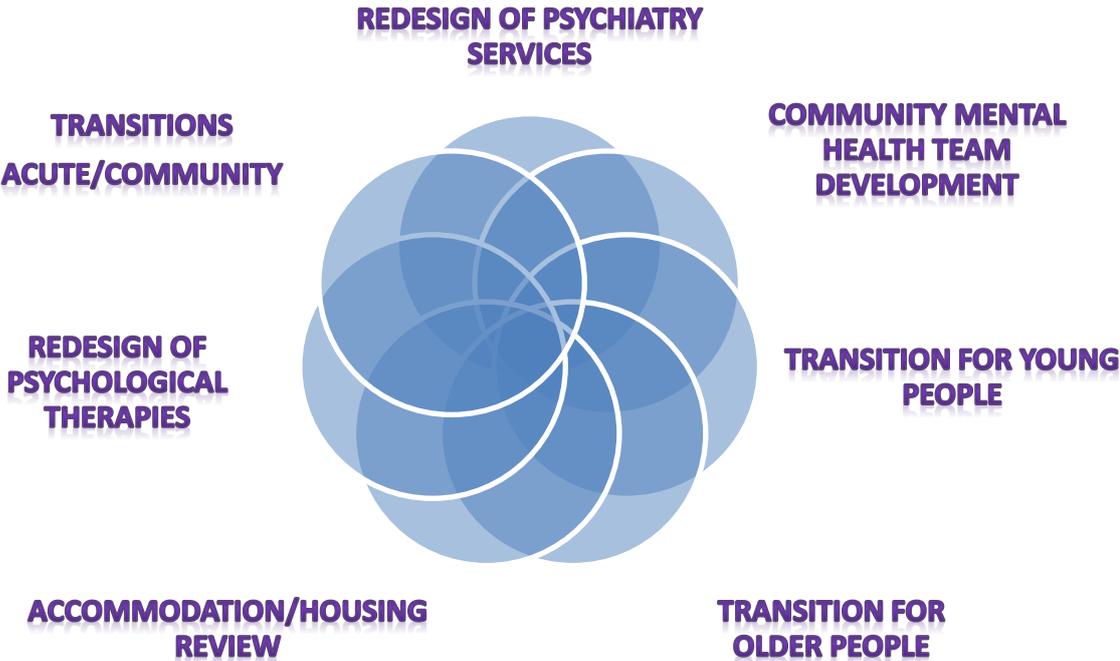
Organisations have a corporate responsibility to manage resources in a sustainable manner and in a way that minimises damage to the environment, for example through reducing the use of paper or emissions produced from vehicles and machinery, or simply disposing of waste materials in an environmentally conscious manner.

West Lothian IJB commits to influencing and encouraging an environmentally responsible approach to the provision of health and social care services in West Lothian wherever possible, through its strategic aims and decision-making processes.

### 3. Previous Commissioning Plan - Priorities and Key Results

In 2016, independent specialists in research were commissioned by the WLHSCP to develop a comprehensive [needs assessment](#) upon which the 2016/17-2018/19 commissioning plan for mental health services was based. The principles and key measures identified in that research continue to provide the basis for our new commissioning plan; however, the priorities identified have been updated to take account of the current position in West Lothian and the themes emerging from recent consultation and engagement.

The main priorities for development identified in the previous plan were:



The needs assessment also recommended expansion of community based services which focused on early intervention for people in distress. In addition, the report recommended enhancement of local provision through further development of relationships with the third sector. Around the same time, General Practitioners identified mental health as a key area where additional support could be provided, with few options available locally to support people with mild to moderate mental health problems and long waiting times for some services.

### **Community Based Provision and Early Intervention**

In response to the need for community based services and focus on early intervention, community wellbeing hubs were established in Livingston and Bathgate at the end of June 2019 and offer support to adults with mild to moderate mental health problems. Services and supports are provided through a community link worker and wellbeing service with support from a multi-disciplinary team including psychologists, community psychiatric nurses and specialist occupational therapists.

Twelve community link workers were recruited from the Third Sector and are now supporting people both within the wellbeing hubs and in targeted GP practices where greatest need was identified. The service offers a range of interventions through a person-centred approach with less emphasis on medicalisation of conditions and greater focus on helping people manage their symptoms and improving wellbeing. The aim is for the wellbeing hubs to become the front door of mental health services in West Lothian.

<b>Community Wellbeing Hubs</b>	
<b>24 June 2019 - 1st November 2019</b>	<b>836 people supported</b>

### **Community Opportunities**

During the course of the plan, community opportunities for people with long standing mental health problems were strengthened. The Brock, based in Strathbrock Partnership Centre, supports the ongoing recovery of people with long standing mental health problems through gardening projects and making garden furniture. It is now a registered charitable organisation and monies generated are reinvested in supporting people to integrate into communities. A 'mind garden' is being developed at the partnership centre which will provide a maintained space for staff and visitors to enjoy.

### **Redesign of Psychiatry Services**

A review was completed of psychiatry staffing models. The findings resulted in a small increase in the number of psychiatrists employed and changes to roles to make them more attractive. Posts are now segmented

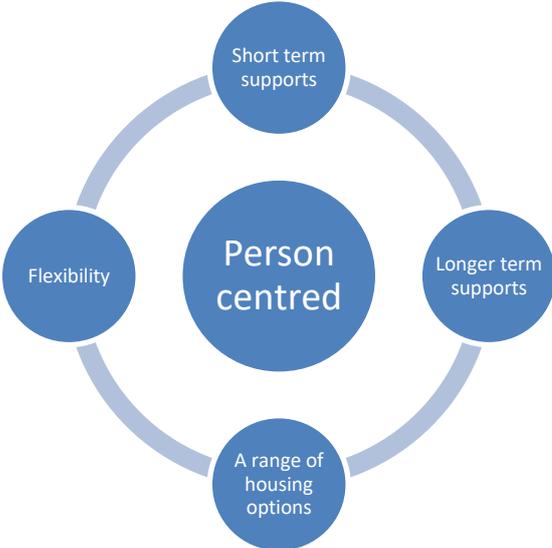
into inpatient/outpatient roles and sectors are now more manageable in line with Royal College of Psychiatry guidelines. Two new consultants were recruited and longer terms cover arrangements have been maintained.

**Accommodation/Housing review**

We have worked on developing our understanding of the needs of people with mental health problems to inform future accommodation models. We still have work to do in this area to set out more clearly our commissioning intentions therefore this priority is carried forward to the new plan.

Although most of those who use mental health services will live independently with little or no special housing support needs, there are some people who because of their mental health and substance misuse difficulties require supports across a spectrum spanning mental health, substance misuse and housing services.

Key considerations have centred on the need for accommodation to offer:



**Housing First**

We have also worked with housing colleagues to develop a 'Housing First' approach. Housing First is a response for people whose homelessness is experienced alongside other severe disadvantage. While everyone's experience is different, the common threads include trauma, abuse, addictions, mental ill health and experience of local authority care and prison.

Tenancies used for Housing First are general needs mainstream tenancies and are allocated in line with landlord's existing allocations policies. The tenancy is not conditional on someone engaging with Housing First support. Support providers work to the principles of active engagement and respectful persistence and all cases remain open even when engagement is low. Local partners actively try to identify what support looks like to an individual and what they are willing to accept. In reality, most tenants engage with support in a personalised way and the removal of conditions combined with focus on choice and control enables people to find what is of most value to them as they settle into their new home.

### **Community Mental Health Team**

The development of a Community Mental Health Team (CMHT) was identified as a key priority. A CMHT is a multidisciplinary, multi-agency team which offers specialist assessment, treatment and care to adults with mental health problems, both in their own homes and in other community settings.

During the course of the plan, a model for implementation was agreed. The team will be made up of specialist teams from each of the following areas: Psychiatry, Psychology, Occupational Therapists, Community Outreach Team, Social Workers and Community Psychiatric Nurses. The CMHT will also work closely with other specialist community mental health services such as Day Services, Rehabilitation Services and the Acute Care and Support Team (ACAST). Implementation of the service is due to happen in January 2020.

### **Redesign of Psychological Therapies**

A single psychological therapies team was created to focus on waiting times for psychological treatment. Work was targeted at ensuring that the longest waits for treatment were addressed and that people were offered treatment in a more timely fashion. Further work requires to be done in this area to bring about sustained improvement and this priority is carried forward into the new plan.

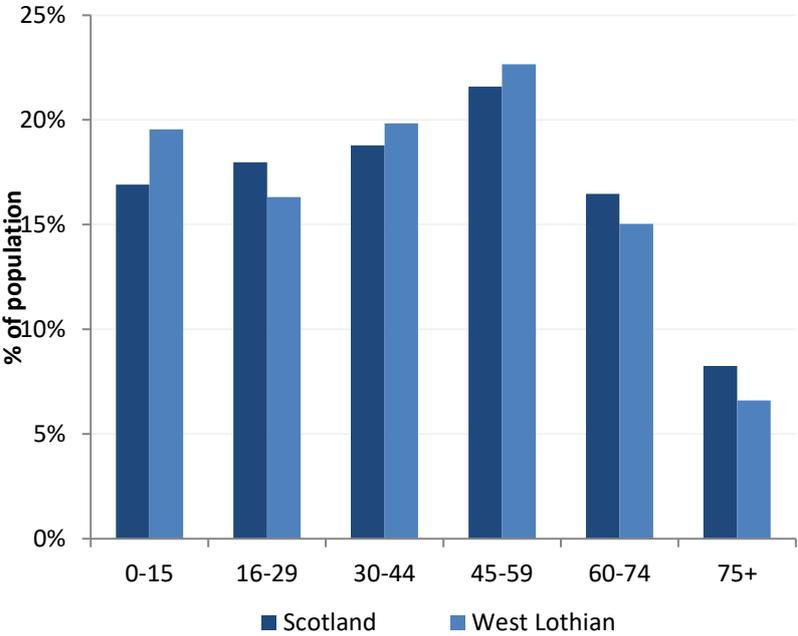
### **Transitions Acute/Community**

The Acute Care and Support Team (ACAST) offers short-term, intensive home treatment as an alternative to in-patient care through a team of mental health nurses with input from psychiatrists. In 2018/19 a social worker and an occupational therapist were added to the ACAST team to enhance the range of supports available in the community.

## 4. West Lothian Context

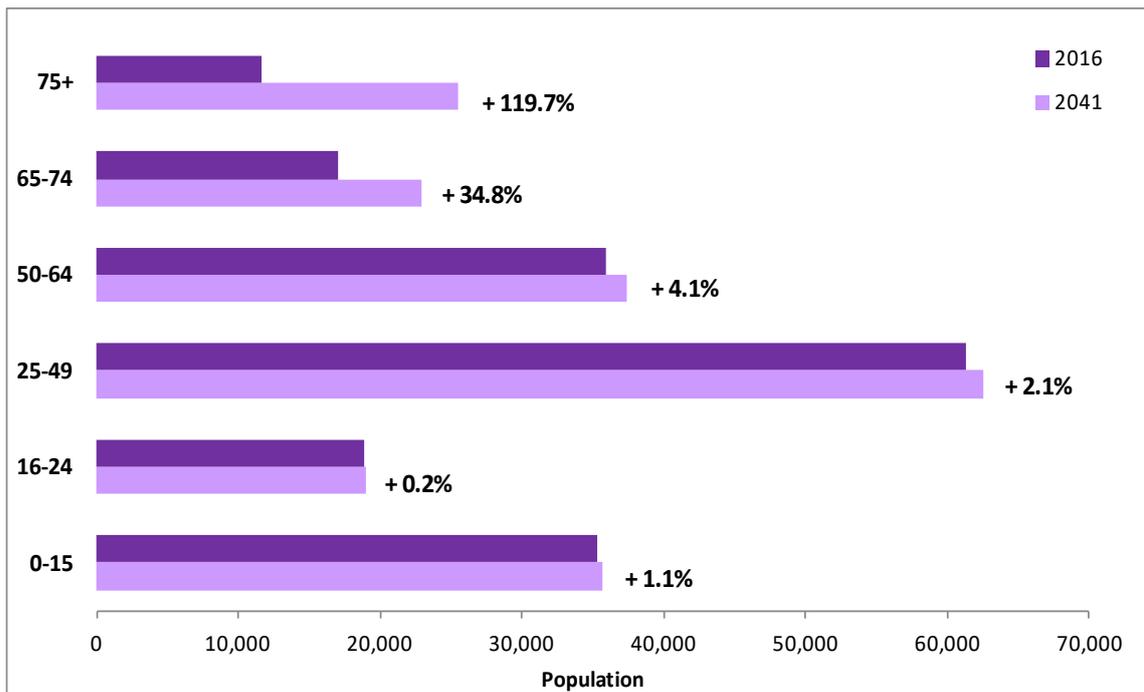
According to National Records of Scotland, the 2017 population for West Lothian was 181,310; this is a 3.5% increase of the population figures reported in 2011 Census (175,118). In relation to the comparison areas, mid-year estimates for 2017 show West Lothian has a higher population than Falkirk (160,130) and Renfrewshire (176,830), and lower than South Lanarkshire (318,170). Scotland’s overall population is also shown (5,424,800).

In terms of age, the West Lothian the West Lothian population is broken down below.

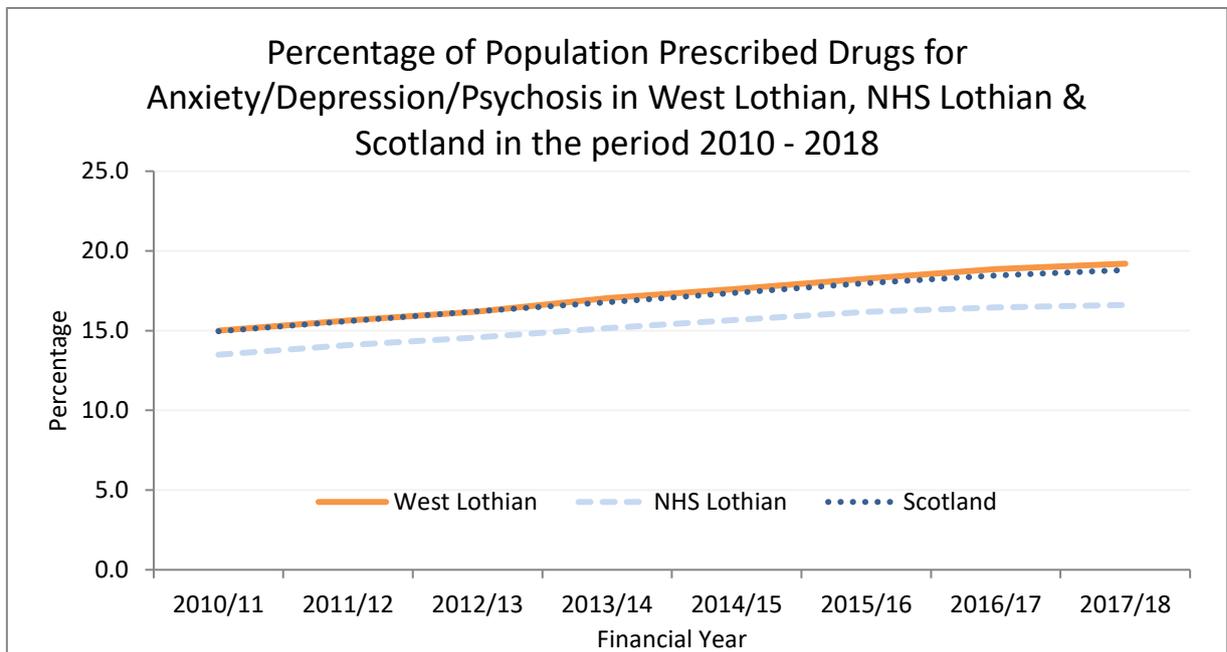


We also know that the West Lothian population is growing at a faster rate than in other areas of Scotland. By 2041, very significant growth is expected in the number of people in West Lothian who will be aged over 65 which will present challenges in how we deliver future services. We already know that we have an ageing workforce in health and social care therefore we need to think very differently about how we will ensure that care and support services are sustainable in the longer term.

The table below shows the expected population shift in West Lothian by 2041.

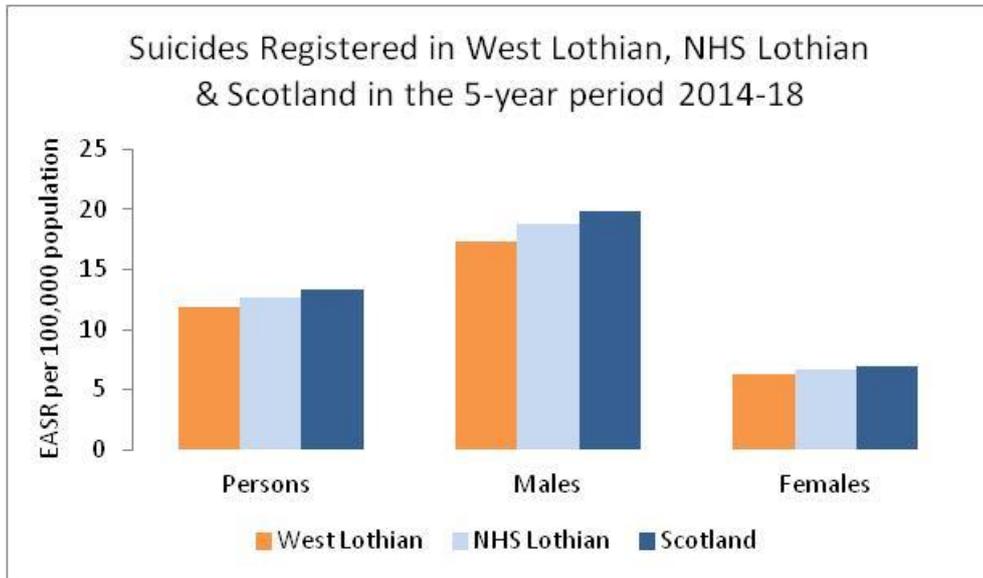


The data below provides some insight into mental health provision and performance in West Lothian.

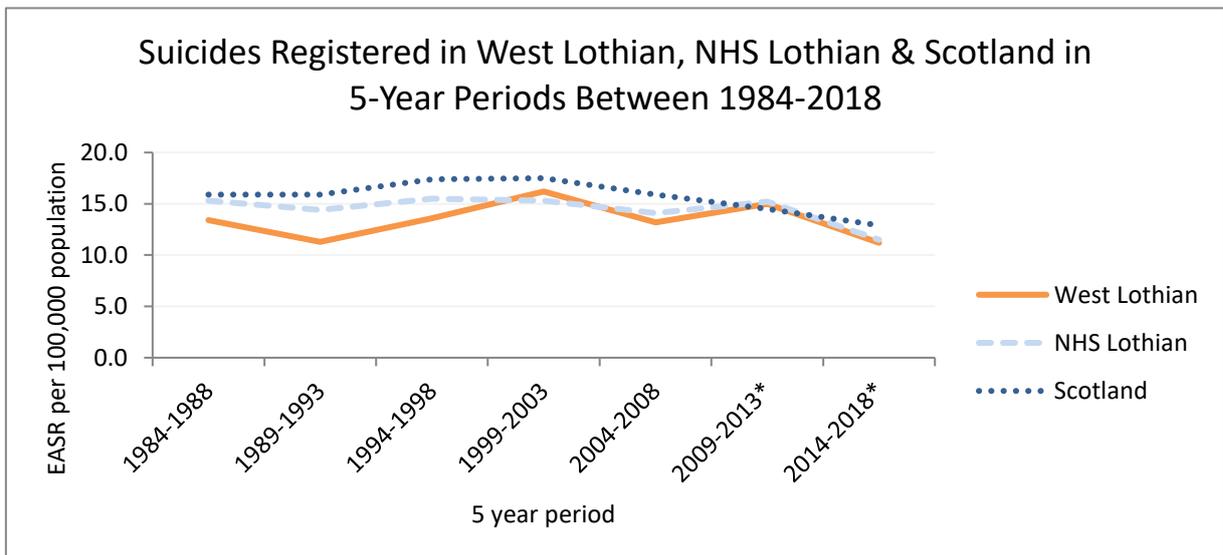


The percentage of West Lothian residents prescribed drugs for anxiety/depression/psychosis has risen steadily over the eight year period, from 15% in 2010/11 to around 19% in 2017/18. The West Lothian rates and trend are very similar to the Scotland average, but

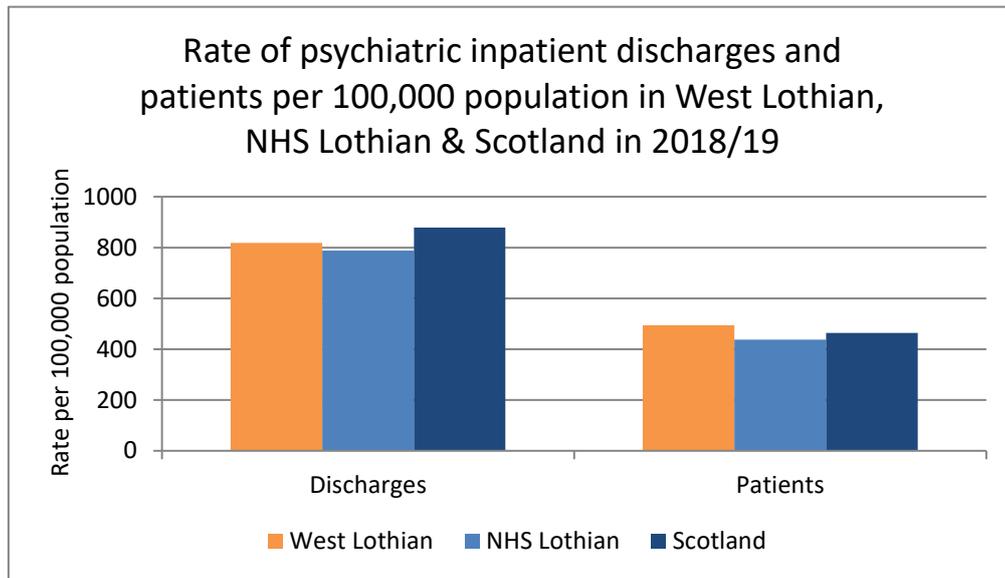
higher than the NHS Lothian position.



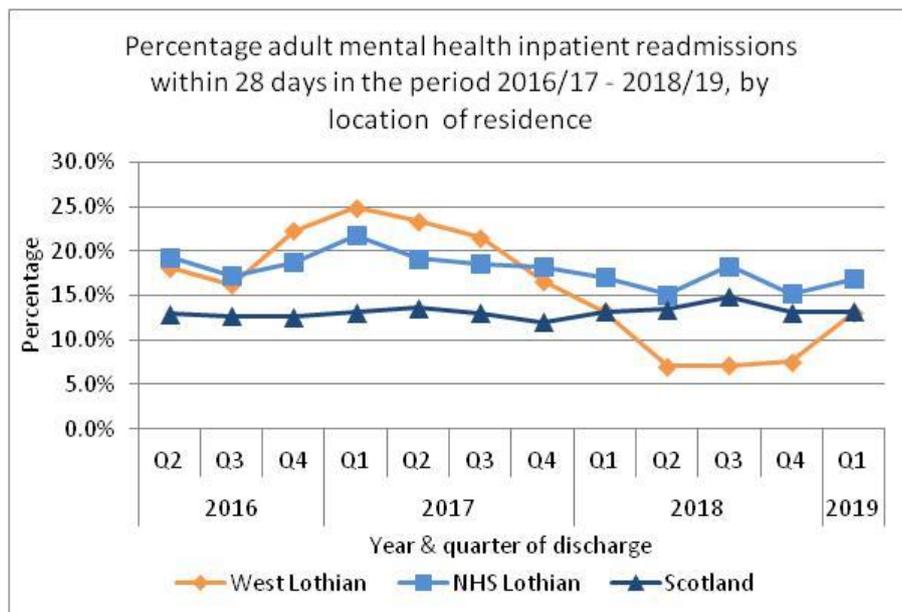
West Lothian has a lower rate of suicide than the NHS Lothian position and the national average. Male deaths by suicide are almost three times higher than for females, which is consistent with the NHS Lothian and Scotland average.

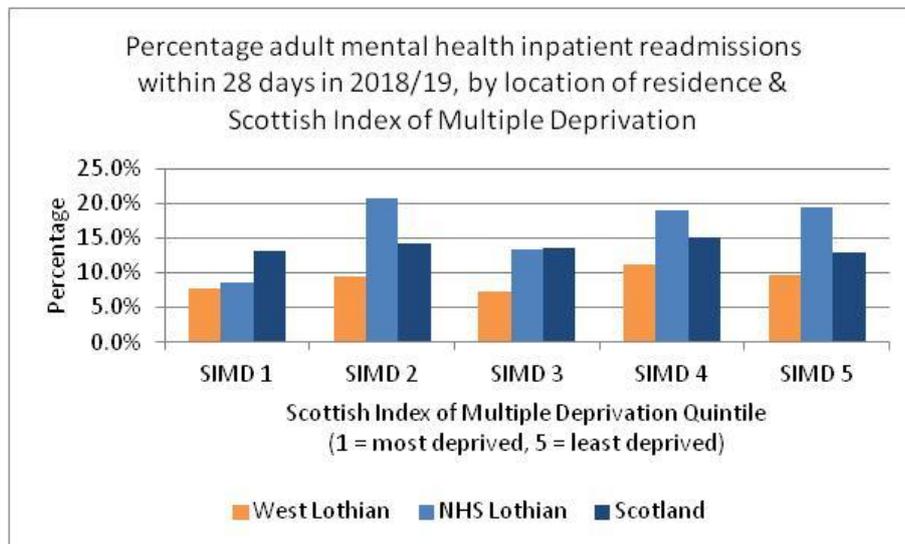
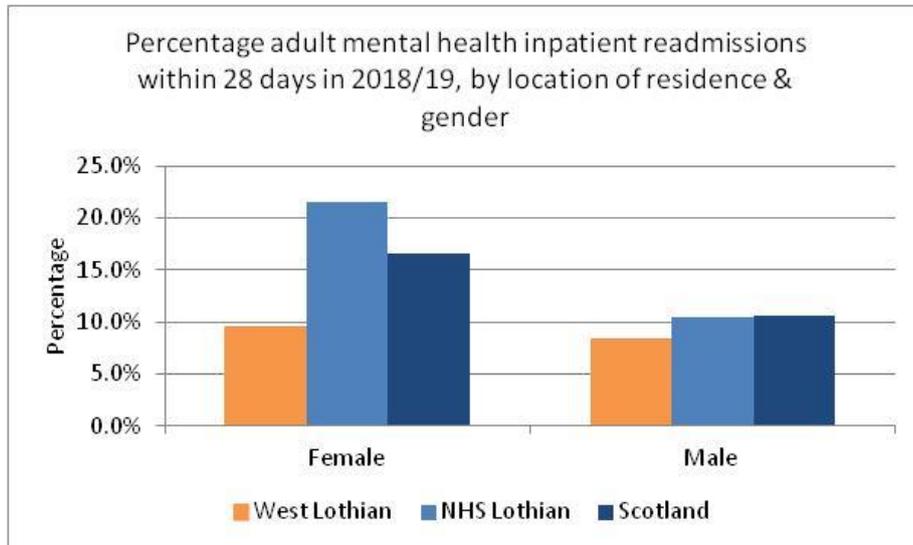


The rate of suicide in West Lothian over the 35-year period has been quite variable, most likely due to small numbers, but there has been an overall decline since the peak in 1999-2003, similar to the national trend.



In 2018/19 West Lothian had a higher rate of psychiatric inpatient discharges than NHS Lothian, but a lower rate than the national average, while West Lothian's rate of psychiatric inpatient patients was higher than both NHS Lothian and the national average.





The Scottish Government has published a range of performance indicators for mental health services in Scotland. Work is underway across Lothian to support data collection for those indicators which will in time provide more comprehensive information for future planning.

# 5. Developing the Strategic Commissioning Plan for 2019 -2023

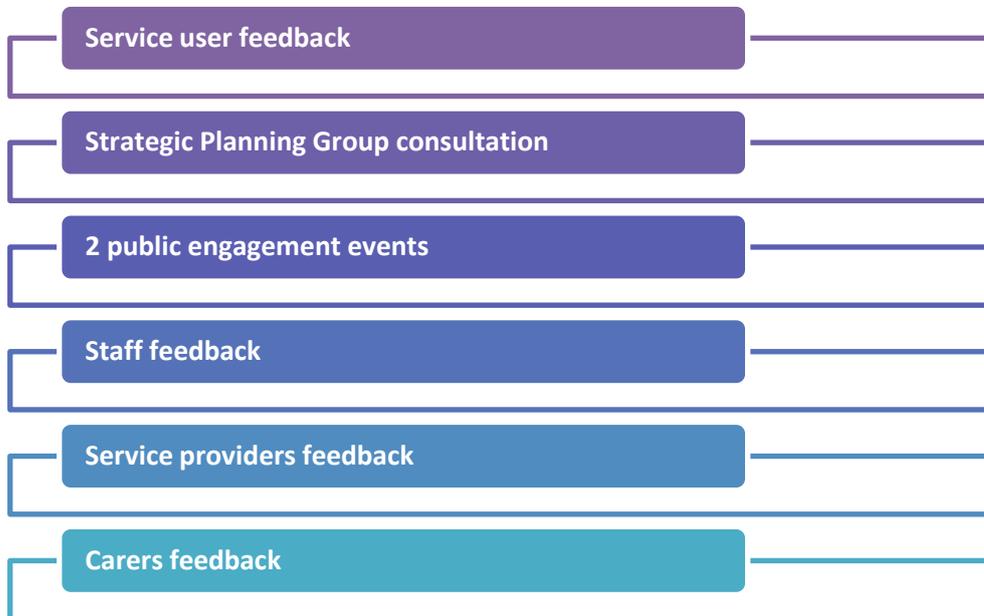
Strategic commissioning is the term used for all the activities involved in assessing and forecasting needs, linking investment to agreed desired outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place. Commissioning is commonly described as a cycle of strategic activities similar to that shown below:



In this model, based on that developed by the Institute of Public Care (IPC), the commissioning cycle (the outer circle) drives purchasing and contracting activities (the inner circle), and these in turn inform the ongoing development of strategic commissioning. We consider commissioning to encompass all the services required to support the health and social care needs of the West Lothian population: health services in the hospital and community, social work and social care services as well as services delivered by the third and independent sectors.

## 6. Consultation and Engagement

The engagement process for the Mental Health Commissioning Plan comprised a range of methods including:



Engagement with staff groups across health and social care services took place where staff were asked to identify what was currently working well and suggest potential areas for development. Completed pro-formas were discussed at meetings of the Mental Health Planning and Commissioning Board where ideas were collated and refined.

There was significant staff engagement: 14 pro- formas were completed by staff groups representing adult social work, adult mental health community and inpatient, psychological therapies and older adult mental health services. Feedback in relation to people with dementia was shared with the Older People’s Planning and Commissioning Board as support for people with dementia including younger onset dementia is covered within the Older People’s Commissioning Plan.

Two public engagements events were held covering all of the commissioning plans: older people, people living with a learning disability, people living with physical disabilities and people living with mental health problems. Information about these events was circulated widely, posted on West Lothian Council’s social media sites and circulated to mental health providers, community centres, contacts and projects throughout West Lothian. The events were on 8 October in Howden Park Centre in the afternoon and on 10 October in Bathgate Academy in the evening. 44

people attended the events and 10 people participated in the discussions about mental health. The main groups represented at the public events were from third sector service providers and staff, including General Practice staff.

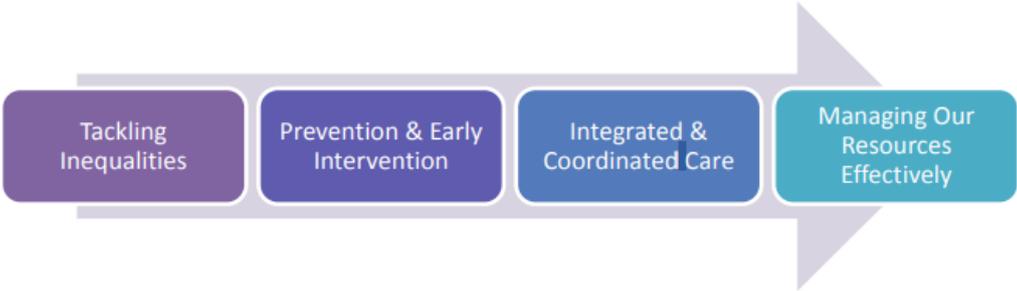
Specific service user feedback was gathered through and facilitated by the Mental Health Advocacy Project (MHAP) Community Representatives Group. The Community Representatives Group offers a supported structure for groups of service users to have their collective voices and views heard to inform planning. 7 service users contributed to the discussion at the Community Representatives meeting in October following the same structure as the engagement pro-formas: addressing what currently works well and suggesting areas for improvement.

A copy of the full feedback summary can be accessed [here](#). Feedback was analysed alongside refreshed data and expert opinion from clinicians and service providers to identify the following emerging key themes for mental health service development in West Lothian:



# 7. Our Strategic Priorities

Achieving sustainable health and social care systems and improving health and wellbeing outcomes in West Lothain requires transformational change over time. The Integration Joint Board’s Strategic Plan 2019 to 2023 identifies four strategic priorities for service development:



## Tackling Inequalities

We recognise that addressing both health and social inequalities within our communities must be at the heart of our commissioning plans. Social circumstances such as those outlined below can impact our health and wellbeing:

Childhood Experience	Housing	Education	Social Support
Family Income	Employment	Sense of Community	Access to Health Services

Deprivation plays a significant part in how well we live. People living in some communities are more likely to be living in poorer health and to die younger with higher rates of cancer, stroke, diabetes and heart disease. People with disabilities are more likely to have lower educational achievements, higher rates of poverty and poorer health outcomes. Unpaid or family carers are more likely to have poorer health than the general population which can impact people achieving their own personal outcomes and goals.

We will work with our partners to reduce the impacts of social circumstances on health through:

- ❖ Ensuring services are accessible to all based on need, and barriers to care are addressed
- ❖ Prioritising prevention, primary and community services to maximise benefit to the most disadvantaged groups
- ❖ Supporting services and initiatives to reduce the impacts of inequalities on health and well being
- ❖ Working with community planning partners to address underlying social inequalities that result in health inequalities
- ❖ Offering income maximisation assistance to families and access to specialist benefits and money advice

### Prevention and Early Intervention

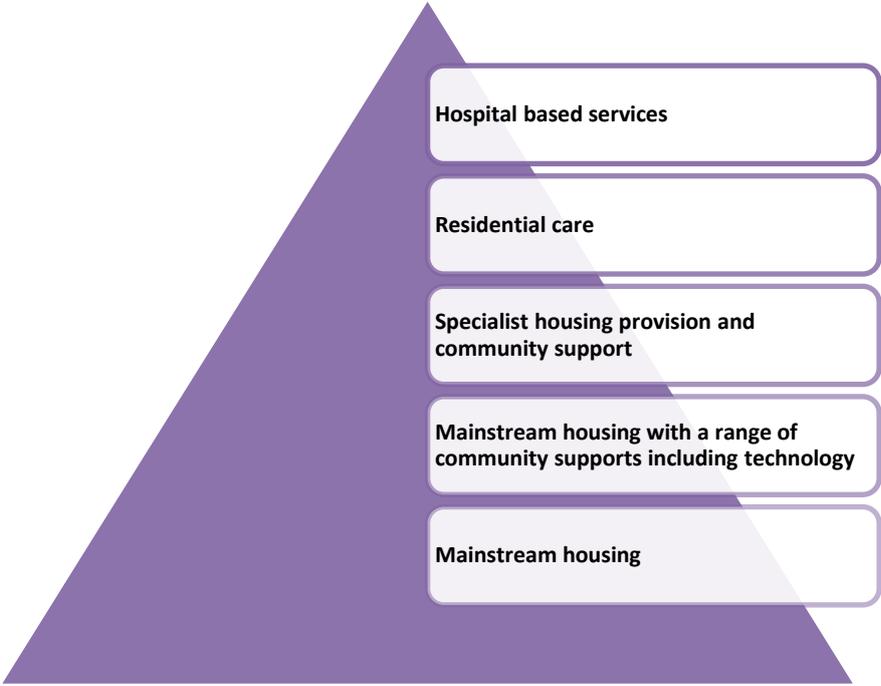
West Lothian's population is changing. Based on projected demographics we know that we must deliver our services in different ways and must focus on early intervention. We will continue to develop community supports and housing models to support those at greatest risk ensuring that people are able to live independently in local communities for as long as possible. Further development of care teams will transform how day-to-day health and social care is provided by the right person at the right time.

### Integrated and Coordinated Care

The messages from our recent public engagement events show that people want to be able to live in their own homes for as long as possible. They want services to be personalised to their specific needs and delivered in a joined up way that offers consistency and opportunities to access the local community.

Development of mental health services in West Lothian will focus on avoiding admission to hospital, supporting discharge from acute care and maintaining patients in the community wherever possible. The aim is to develop a service model which moves towards a preventative and

outcomes focussed approach with an emphasis on caring for people in their own homes and communities whilst providing safe in-patient care for those who need it. We will continue the development of our multi-disciplinary mental health teams to ensure that care is co-ordinated and person centred.



Managing Our Resources Effectively

To improve experience, reduce waiting times and ensure people get faster access to the treatment they need, we will review and develop our services to ensure that people are directed at the right time to the supports and services which best meet their needs.

We recognise there are substantial challenges in the recruitment of health and social care staff in Scotland. Having a workforce with the right skill, at the right time and in the right place provides the foundation for the delivery of effective health and social care services. Our transformational change programmes will link closely to the IJB’s Workforce Development Strategy to ensure that development of our workforce aligns to our strategic priorities.

## 8. Finance

Budget plans continue to be developed across health and social care functions with officers working collaboratively with partners to ensure that strategic plans for delegated health and social care functions across the IJB, Council and Health Board are aligned to financial plans.

Deatiled below is an annual average of total planned spend in West Lothian during 2020/2021 on services for those living with mental health problems.



## 9. Next Steps

The Mental Health Commissioning Plan is designed to run for 4 years from 2019 to 2023. Some of the priorities outlined in the plan have an end date beyond the life of the commissioning plan as they are linked to developments with a longer timescale. Decisions on the investment and disinvestment of resources will require to be made as the actions outlined below are progressed.

A comprehensive action plan will support the development of services for people with mental health problems and will incorporate the strategic priorities contained in this commissioning plan. Progress will be monitored via the Mental Health Planning and Commissioning Board and the IJB's Strategic Planning Group.

The MH Commissioning Plan will be reviewed annually against the IJB's Strategic Plan in the form of an annual report which will summarise activity, progress and performance for the year.

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>1. Community Mental Health Team</b>							
	Build on work from previous plan to establish Community Mental Health Teams (CMHT) in the East and West Localities of West Lothian	- Implement agreed Community Mental Health Team model	1,2,4,5	ICC P&EI	CMHT standards & accreditation	January 2020	General Manager Mental Health/Clinical Director
		- Develop performance framework for measuring the impact of the teams through the cycle of the commissioning plan	3,9	MRE	Performance framework developed and performance reported	June 2020	General Manager Mental Health/Clinical Director

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>2. Develop an accommodation model and supports which are fit for the future</b>							
	Build on work completed as part of the previous plan and develop accommodation model to support people in the community	<ul style="list-style-type: none"> <li>- Complete profiling work to determine needs of the local population including those supported out with West Lothian and establish baseline position for performance monitoring</li> </ul>	2,9	ICC, MRE	Service user profiling completed - projection of future need included	January 2020	Service Manager Community Mental Health  Group Manager Adult Services
		<ul style="list-style-type: none"> <li>- Through service user and stakeholder engagement, finalise a vision and model for mental health housing and community supports which includes a range of housing options to deliver flow of supported people to the community</li> </ul>	2, 4,9	ICC, MRE	Proportion of people cared for within West Lothian increased  Reduction in delayed discharges	March 2023	General Manager Mental Health  Service Manager Community Mental Health
		<ul style="list-style-type: none"> <li>- Commission services which provide care and support aligned to new models of housing and support to better meet the needs of people living with mental health problems</li> </ul>	1,2,4	P&EI, TI	Revised support contract in place with third sector	June 2020	Senior Manager Older People
		<ul style="list-style-type: none"> <li>- Link in with development of Housing First model to ensure the needs of people living with mental health problems are reflected</li> </ul>	1,2,4,	P&EI, TI	Housing First model developed	June 2020	Group Manager Community Mental Health  Senior Manager - Housing

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>3. Shifting the balance of care</b>							
	Integrated Mental Health Service management team structure	- Implement a revised model of management which integrates the management structure for acute and community based services across health and social care	8, 9	MRE, ICC	New team structure operational	April 2020	General Manager Mental Health
	Maximise opportunities to work with the Third Sector for community supports	- Develop a strategy for growing Third Sector involvement in community mental health drawing on learning from community wellbeing hubs. Work alongside identified organisations to maximise the funding opportunities available to the Third Sector to develop range of community supports	1,4,5	TI, P&EI	Third Sector strategy in place	December 2020 to March 2023	General Manager Mental Health
	Development of a 'safe space' model of care	- Explore options for the development of a safe space/place of safety to support people who are intoxicated or in distress as an alternative to hospital attendance	7,9	EI, MRE	Model of care and support developed and implementation plan agreed	April 2023	General Manager Mental Health

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>4. Supporting families and carers</b>							
	There is a duty for local authorities to provide support to carers, based on the carer's identified needs which meet the local eligibility criteria	- Review unpaid carers Advocacy in West Lothian	1, 2, 3, 4, 6, 8	EI&P, TI	Review in line with Carers Strategy	2020	Team Manager Business Support
		- Complete review and publish revised carer's strategy in line with the Carers (Scotland) Act 2016	1, 2, 3, 4, 6, 8	EI&P, TI	Strategy published	2020	Team Manager Business Support
		- Support all carers to access information, support and services in line with the Council's Carers Eligibility Framework	1, 2, 3, 4, 6	EI&P, TI	Review of Commissioned Services	2023	Group Manager Business Support
<b>5. Ensuring choice through Self-Directed Support</b>							
	Focus on market development to ensure people have access to opportunities which enable personal outcomes to be met	- Ensure practitioners and business support services and other stakeholders are involved in shaping market development	2, 3, 8, 9	ICC, MRE	Market Facilitation plan updated and published	Annual update 2020-2023	Team Manager Business Support
		- Ensure service users and carers have a say in how future services should be developed.	1, 3, 4, 8, 9	EI&P, TI, MRE	Feedback provided through Service users Forums	Annual update 2020-2023	Team Manager Business Support
		- Ensure those receiving SDS have information and advice to allow to support them to achieve their personal outcomes.	1, 3, 4, 9	EI&P, TI	Review of Commissioned Services	2021	Group Manager Business Support

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>6. Access to services and waiting times</b>							
	Consider development of a robust service for people requiring assessment for Neuro-Developmental Disorders (NDD)	- Explore staffing resource required and synergies with national and pan-Lothian developments	1,3,4,9	ICC, MRE	New service operational	December 2020	General Manager Mental Health Clinical Director
	Review Liaison Service as part of wider pan-Lothian review of liaison services	- Explore staffing model required and synergies with national and pan-Lothian developments	1,3,4,9	ICC, MRE	Revised service operational	December 2020	General Manager Mental Health Clinical Director
	Ensure people who need services have access to them within agreed timescales	- Through analysis of Demand, Capacity, Activity and Queue (DCAQ), develop a clear understanding of waiting times for psychology and psychiatry services	3,9	MRE, P&EI	Report on findings	April 2020	General Manager Mental Health Clinical Director Psychology Lead
		- Develop an action plan for delivery of sustained improvement in access and waiting times for both psychology and psychiatry services	3,9	ICC	Actions plans developed	June 2020	General Manager Mental Health Clinical Director Psychology Lead

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
		- Explore staffing resource required and synergies with national and pan-Lothian developments	9	MRE ICC	New service operational	December 2020	General Manager Mental Health Clinical Director
		- Explore staffing model required and synergies with national and pan-Lothian developments	9	MRE ICC	Revised service operational	December 2020	General Manager Mental Health Clinical Director
<b>7. Suicide strategy</b>							
	Development of a strategic approach to suicide prevention in West Lothian	- Through consultation and engagement, develop West Lothian Suicide Prevention Strategy	3,4,5,7	P&EI TI	Strategy in place	July 2020	General Manager Mental Health
		- Develop an action plan to implement the recommendations of the strategy	3,4,5,7	P&EI TI	Action plan developed	September 2020	General Manager Mental Health
<b>8. Mental Health Officer Service</b>							
	Establishing a sustainable MHO service	- Review existing provision and implement a revised model to ensure a sustainable Mental Health Officer service across West Lothian	9	MRE	Revised structure in place	March 2021	General Manager Mental Health Head of Social Policy

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>9. Supporting good physical health</b>							
	People with mental health problems have opportunities to improve physical health	- Benchmark services against agreed standards for physical health care checks for people with long term psychiatric treatment and implement improvement plan	5	TI, P&EI	Improvement plan in place and performance measures identified	June 2021	Service Manager Community Mental Health  Clinical Nurse Manager
	Develop community links to support people to achieve better physical health	- Explore opportunities to move away from medical models of support to encourage people to access local leisure opportunities which support improved physical health	1, 5	TI, P&EI	Performance measures to be identified	March 2023	General Manager Mental Health
<b>10. Mental health and wellbeing - focus on prevention</b>							
	Focus on prevention through involvement with the Community Planning Partnership's Health and Wellbeing Group	- Develop work via the Community Planning Partnership's Health and Wellbeing Group which has a specific focus on mental health in communities	1,4	TI, P&EI	Implementation of public mental health approach	March 2023	Head of Strategic Planning
		- Link with CMHT and hub developments to ensure people have access to college, employment and social opportunities	4	TI, P&EI	To be developed	March 2023	General Manager Mental Health

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
<b>11. Access to information</b>							
	People have access to the information they need, when they need it and in an appropriate format.	- Ensure appropriate arrangements are in place for both carers of people living with mental health problems and service users themselves to access information and advice. This should include options for technology enabled care.	1, 2, 3, 4, 6, 7, 8	EI&P, TI, ICC, MRE	Review of Commissioned Services	2021	Group Managers Business Support and Support at Home
		- Ensure all information, advice and advocacy services are reaching those living with mental health problems	1, 2, 3, 4, 6, 7, 8	EI&P, TI	Review of Commissioned Services	2021	Team Manager Business Support
<b>12. Transitions</b>							
	Refine transition pathways to ensure better experience for people using services	- Undertake a review of operation of the Lothian wide transitions policy from CAMHs to adult services in West Lothian	4	P&EI ICC	Review complete with action plan developed	March 2022	Service Manager Community Mental Health  Clinical Nurse Managers
		- Consider further work to be done in relation to early onset dementia linking in the commissioning plan for older people	1,6	P&EI	Measures to be identified in OP commissioning plan	March 2022	Service Manager Community Mental Health  Clinical Nurse Managers

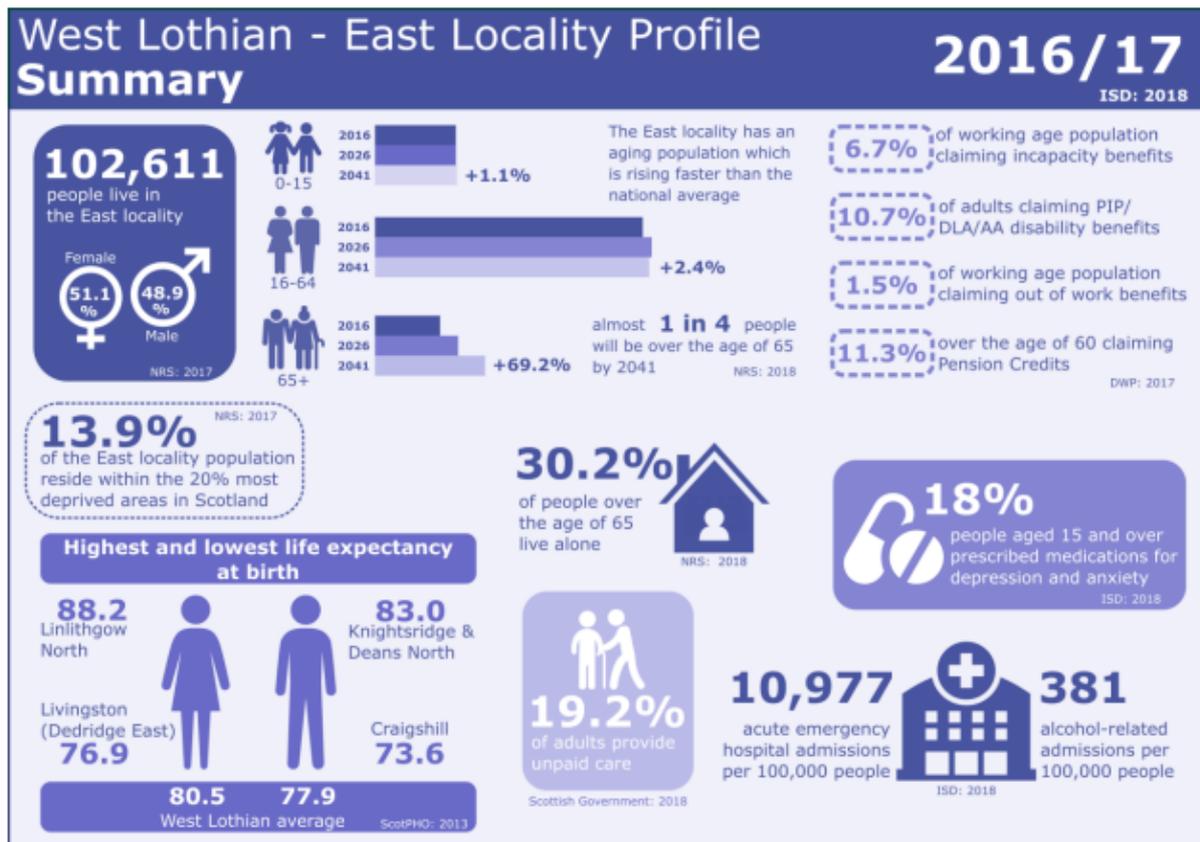
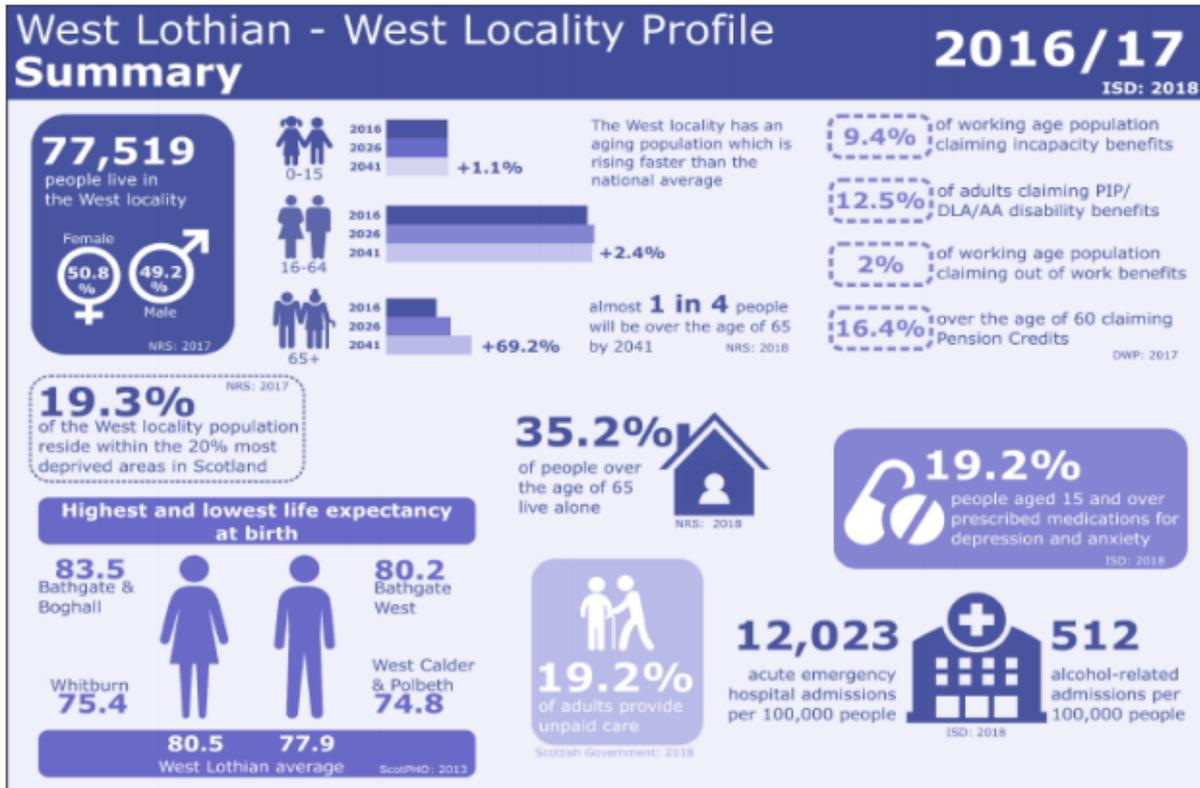
## **10. Monitoring and Review**

A performance management framework will be developed to underpin the strategic commissioning plan. The performance framework will provide a mechanism for measuring progress and impact in relation to each of the priorities outlined in the plan.

The Mental Health Planning and Commissioning Board which meets at least 6 times per year will oversee the implementation of the Mental Health Commissioning Plan. The Board will provide performance and progress reports to the Strategic Planning Group.

Formal updates on progress in relation to the commissioning plan will be submitted to the Integration Joint Board every 6 months.

# Appendix 1 - Details



# Appendix 2 - 2016 Needs Assessment

The following 14 recommendations were identified in the independently commissioned needs assessment completed in 2016 grouped into the following areas:



- ✓ **Recommendation 1:** In future, these priorities should be needs-led and not service-led.
- ✓ **Recommendation 2:** Consideration should be given to strengthening the contribution of the Third Sector; particularly in areas of lower speciality community based supports.
- ✓ **Recommendation 3:** Inclusion of 'support for carers' in future priorities.
- ✓ **Recommendation 4:** Taking cognisance of the recent NHS National Clinical Strategy and accepting issues of resource constraint and growing demand, the Integrated Joint Board to reassess the current balance of regionally and locally delivered mental health services to ensure the most beneficial and sustainable arrangements are put in place to deliver quality care as close as practicable for service users and carers; such a review to include consideration of opportunities arising from GP clusters.
- ✓ **Recommendation 5:** A comprehensive review is required, to address issues of capacity, capability and flow across the Acute, Rehab and Community Support services.
- ✓ **Recommendation 6:** A review of management arrangements for Mental Health services in light of the evidence provided in this study.

- ✓ **Recommendation 7:** A review of services for the 'Distressed' with the aim of delivering an expanded range of services and enhanced early intervention. It would seem appropriate that future services are based on a Stepped Model of Care.
- ✓ **Recommendation 8:** The Integrated Joint Board to develop a statement of Vision and Values to which all Mental Health services should subscribe; this to emphasise the centrality of Recovery and the benefits of engagement and co-production with service users and carers.
- ✓ **Recommendation 9:** We would recommend consideration of developing an enhanced psychological therapies service, including implementation of a robust and well-resourced Stepped Model of Care; where a broader range of non-specialist staff and organisations (including the third sector) deliver psychological therapies (such as advocated in 'The Matrix - A Guide to Delivering Evidence Based Psychological Therapies in Scotland' NHS Education for Scotland, 2014).
- ✓ **Recommendation 10:** Given the evidence of variable joint working between agencies and disciplines, we would recommend consideration of strengthened multidisciplinary teams across both in-patient and community settings.
- ✓ **Recommendation 11:** Consideration be given to a single point of referral for Adult services.
- ✓ **Recommendation 12:** Given this study has noted variable engagement with, and empowerment of, service users and carers, we would recommend consideration of developing a Service User and Carer Involvement Framework and Strategy.
- ✓ **Recommendation 13:** Development of a workforce strategy for Mental Health services to address identified issues of recruitment, retention, sickness absence and an ageing workforce.
- ✓ **Recommendation 14:** A review is required of transition arrangements between CAMHS and Adult Services given the evidence supplied in this study.

# Appendix 3 - National Health and Wellbeing Outcomes

The 9 Scottish Government Health and Wellbeing outcomes:

<b>1</b>	<b>People are able to look after and improve their own health and wellbeing and live in good health for longer.</b>
<b>2</b>	<b>People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.</b>
<b>3</b>	<b>People who use health and social care services have positive experiences of those services, and have their dignity respected.</b>
<b>4</b>	<b>Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.</b>
<b>5</b>	<b>Health and social care services contribute to reducing health inequalities.</b>
<b>6</b>	<b>People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.</b>
<b>7</b>	<b>People who use health and social care services are safe from harm.</b>
<b>8</b>	<b>People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.</b>
<b>9</b>	<b>Resources are used effectively and efficiently in the provision of health and social care services.</b>

## Appendix 4 - Links

Below are several strategies and strategic plans that complement the development of the Commissioning plans:

[West Lothian IJB Strategic Plan 2019-23](#)

[West Lothian IJB Participation and Engagement Strategy 2016-26](#)

[West Lothian Autism Strategy 2015/25](#)

[Active Travel Plan for West Lothian 2016-2021: Making Active Connections](#)

[West Lothian Children's Services Plan 2017-20](#)

[West Lothian Local Housing Strategy 2017-22](#)

[West Lothian People Strategy 2018/19-2022/23](#)

[West Lothian Anti-poverty Strategy 2018/19-2022/23](#)

Legislative context

[Community Empowerment \(Scotland\) Act 2015](#)

[Adults with Incapacity \(Scotland\) Act 2000](#)

[Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#)

[Mental Health \(Scotland\) Act 2015](#)

[Public Health etc. \(Scotland\) Act 2008](#)

[Community Care and Health \(Scotland\) Act 2002](#)

[Social Work \(Scotland\) Act 1968](#)

[The Equality Act 2010](#)

[The Equality Act 2010 \(Specific Duties\) \(Scotland\) Regulations 2012](#)

[Transport \(Scotland\) Act 2005](#)

National Strategies

[Mental Health Strategy 2017-2027](#)

[Suicide prevention action plan: every life matters](#)