

Towards a mentally flourishing Scotland

Local discussion events – Tayside

In Tayside we held three local discussion events, inviting a wide group of stakeholders from Health, Local Authorities, the voluntary sector and service users.

- Angus – 12th February at Stracathro Hospital
- Dundee – 15th February at Ashludie Hospital
- Perth – 25th February at the Dewars' Centre

About a hundred people attended the events, which all followed the same format. Dr Karen Adam (Consultant in Public Health Medicine) explained the purpose of the events, giving some background on the importance of flourishing mental health, and a flavour of the evidence base that supports it. There was a brief presentation summarising the discussion document 'Towards a mentally flourishing Scotland', and introducing the questions for discussion. Participants then spent an hour and a half in facilitated and scribed round-table discussions structured around the questions. Brief feedback was given from each group on the day.

The scribed responses have been collated and are set out below. There were many common themes that arose in all three events, where a response was specific to one locality this has been noted separately.

Q 1 What shared objectives and actions for local delivery should be made for 2008 – 11 which would be deliverable, measurable and valuable?

Responses common to all three localities:

Theme 1: Partnerships

- Multi-agency joined up approach – wider than health and social work
- Involve voluntary sector more, recognise their contribution
- Stakeholder/public involvement in setting priorities
- Single shared priorities
- Joined – up strategic documents
- Shared reporting
- Need a common language – a mental wellbeing glossary?
- Strategic leadership
- Key role for Community Planning Partnerships / Community Health Partnerships
- Recognise that partnership working requires time

Theme 2: Community focus

- Build capacity and networks within communities to address issues, support people
- empowering communities and individuals to take responsibility
- Develop/build on/support community activities that improve wellbeing and provide a broad range of options for social prescribing
- Raise awareness of importance of wellbeing among community activists to get awareness raised in community

Theme 3: **Targeting**

- Children & schools – more awareness raising and anti-stigma work (this was the most frequent response overall)
- Parents (early years) & families – support, positive skills
- Workplaces (statutory organisations as exemplars – HR policies)
- Also mentioned - people in care homes, looked-after children, ethnic minorities, carers
- Whole population approach but also
- Targeting deprivation
- Be careful not to stigmatise areas or groups by targeting them

Theme 4: **Approaches**

- Holistic
- may need to engage by dealing with ‘other’ issues (first)
- De - medicalised
- Proactive outreach
- Motivational support
- Mainstream ‘empowering’ projects
- Promote Positive Steps

Theme 5: **Training for professionals**

- Multi agency
- Awareness/ Mental health first aid
- Make wellbeing an integral part of all contacts
- Embedded in practice
- Recognising levels of wellbeing
- Part of health and social work curriculum (and others)

Theme 6: **Stigma**

Actions at all levels to reduce stigma e.g.

- In schools
- Workplaces
- Service delivery
- Localising national campaigns
- Encourage integration of groups

Theme 7: **existing activity**

- Current lack of knowledge of activities that do exist
- Need for ‘mapping’ – across all sectors
- Need for evaluation / what has been evaluated?
- ‘directory’ needs to be accessible – professionals and public

Locality-specific responses

Angus

- Need to re-constitute a local multi-agency group to take this forward, with the right members to effect change and engage with communities
- Older people’s services need to re-engage with mental wellbeing agenda
- Local actions to target people in care homes

- Look at ways of streamlining process of checking community volunteers – barriers to involvement

Dundee

- Broaden out social prescribing – both what activities can be prescribed and who can prescribe – not only GPs
- Engage pharmacists in wellbeing agenda – to have wellbeing-promoting conversations
- Use evidence of what works. Collect baseline measures e.g. WEMWEBS
- Promote wellbeing like physical health e.g. 5 conversations a day (like 5 fruit & veg)
- Someone in the Community Planning Partnership with a specific remit to drive the wellbeing agenda forward
- Training for fostering empowerment / discouraging dependence

Perth

- Cross reference actions and tie in to Single Outcome Agreement
- Improve opportunities for people to volunteer
- Use lived experience (in schools/elsewhere?) and value this
- Use local media for campaigning
- Incorporate wellbeing objectives with managed clinical networks
- Work with other services – people who are not in touch with health may be in touch with CAB etc.
- Get rid of the word Mental – use more positive terms

Q2. What national supports would help you to meet these objectives and actions?

We would want the National programme to continue to do strategic lobbying

- to get mental wellbeing in to all ministerial portfolios as a cross-cutting priority ‘to promote and maintain mental wellbeing’
- to ensure that wellbeing is maintained in performance measures

Continuing National- based research and development for all to draw on e.g:

- work on the use of WEMWBS
- Mental Health Indicators group
- Work on social prescribing
- Evaluation of partnership interventions in complex community settings

Responses common to all three localities:

- Sustainable resources
- Continued work with media
- Continued national campaigns e.g. See Me and Choose Life
- Research – evaluation / best practice guidance
- Support for the use of WEMWEBS
- Embed wellbeing in the curriculum for health (and other) professionals’ training
- Clear national priorities reflected across all relevant partners
- Support for local training to embed the wellbeing approach
- Address legal issues and benefits

Locality-specific responses

Angus

- National website with links to local activities

Dundee

- Support for social marketing

Perth

- Support for community development approaches
- Resources to support wellbeing agenda
- Engagement of GPs via QOF
- Make Healthy Communities a national collaborative
- Streamlined reporting and less red tape

Q3: How can progress be tracked and performance assessed?

Responses common to all three localities:

Theme 1: Structures/mechanisms

- Accountability – global but co-ordinated through a specific person
- Single outcome measures across statutory organisations
- Joint reporting
- Not current HEAT targets – short timescales, wrong questions
- Incorporate as underpinning element of HEAT targets / Single Outcome Agreement
- Use Health Scotland evaluation guides
- National tracking (may result in less local ownership)
- Measurable outcomes must be set locally to achieve targets
- Involve stakeholders in identifying appropriate indicators
- Recognise that outcomes might appear in a different ‘place’ than the intervention happened i.e. parenting programmes

Theme 2: Indicators

- Awareness of activities
- Decreased anti-depressants
- Uptake of services/evidenced interventions – and retention
- Indicators of engagement/community activity/participation
- Wellbeing at work – stress questionnaire
- ASK what is beneficial
- Reduction in suicide (?)
- How many conversations a day (i.e. developed social networks)
- Feel good/have fun
- Do things they enjoy
- WEMWEBS
- Measure peoples voices I local communities – challenging
- Scales for self assessment of wellbeing (included in other behaviour change interventions e.g. smoking cessation)
- Measure people moving on from services and what to, not just throughput/new clients
- Hospital admissions

- Reduced hazardous drinking
- Satisfaction questionnaires
- Measure impact of interventions on self esteem, confidence etc.
- Safer environment (perceived?)
- Local health statistics

Angus

Access to citizens' panels to gather information about progress/performance – regular surveys already take place in Angus

Perth

- Use of CPD Employee Review and Development (Council) to track progress
- Use of community engagement standards
- Wider measures re employability, housing