**Health, Social Care and Sport Committee: Pre-budget Scrutiny 2024-25**

**SAMH Submission**

**Introduction**

SAMH welcomes the opportunity to contribute to the committee’s pre-budget scrutiny. We are at a critical moment for mental health in Scotland. Global and local events are combining to create enormous challenges for people across the country; in particular, the ongoing legacy of the Covid-19 pandemic and rising cost of living has impacted, and will continue to impact, our mental health and wellbeing. For these reasons it is crucial that mental health and associated spending is prioritised in the 2024-25 budget. Equally important is the need for greater transparency around mental health and associated spending to ensure the impact of spending commitments can be better assessed and evaluated.

The recent publication of the Scottish Government and COSLA Mental Health and Wellbeing Strategy provides an opportunity to refocus our efforts to improve Scotland’s mental health and wellbeing. This will require radical reform and investment in our mental health system including support for the third sector, which provides a large proportion of mental health care and interventions.

**Mental Health Spending**

Mental health spending as a proportion of frontline NHS spend is decreasing despite the Government’s commitment to increase spend to 10% of frontline spend. In 2011-12, 9.12% of the budget was spent in mental health but this has fallen to 8.78% in 2021/22.[[1]](#footnote-1) This comes in the context of mental health spending being cut – through reprioritisation - by £38m in the 2022-23 Emergency Budget Review.[[2]](#footnote-2) While the 2023-24 budget reinstated the £38m it did not go beyond this and so represented a real terms reduction in support for Scotland’s mental health. Reversing this trend should be a key priority for the 2024-25 budget.

Mental health service provision – statutory and non-statutory – is not sufficient to meet demand. While pressures on the mental health system were exacerbated by the Covid-19 pandemic, problems have been longstanding. For example, the 18 week waiting time standards for psychological therapy and CAMHS have never routinely been met, including prior to the pandemic. The latest available data shows that only 79.8% of people started their psychological therapy within 18 weeks of referral;[[3]](#footnote-3) and only 74.2% of children and young people who’s referrals were accepted by CAMHS were seen within 18 weeks.[[4]](#footnote-4) Worryingly, just under a quarter (24.2%) of young people referred to CAMHS in the latest quarter had their referral rejected, a rate of rejection that has stayed near static for years despite increased investment in CAMHS and the CAMHS workforce.[[5]](#footnote-5) While increased investment in CAMHS has been welcome, this has not been enough to meet increasing demand, with referrals to CAMHS increasing year on year since the pandemic.[[6]](#footnote-6)

It is clear significant investment and reform is required to improve our mental health system. We welcomed commitments from the Scottish Government in the 2021-22 programme for government to increase mental health spend over the course of the parliament by 25%, ensuring that at least 10% of frontline NHS spend goes to mental health.[[7]](#footnote-7) We believe action to achieve this should urgently be taken in the 2024-25 budget, with the 10% target a minimum aspiration.

While an increase to 10% of frontline NHS spending on mental health would be an improvement on the current position, this lags behind spending in England. In 2021/22 under NHS England’s Long Term Mental Health Plan, 13.8% of local health spend is being allocated to mental health (including learning disabilities and dementia).[[8]](#footnote-8) We should be aiming to at least match this level of spend.

Resource commitment out with frontline NHS and health spending to support mental health and wellbeing should also be a key priority for the 2024-25. This should include a focus on early intervention, prevention and community resilience. At a minimum the welcome funding of both the adult and young people’s Communities Mental Health and Wellbeing funds[[9]](#footnote-9) (established through the Mental Health Recovery and Renewal Fund) should be retained and made permanent, rather than operating on an annual basis. This would provide security to the projects funded through these essential funds and the people they support. The continuation of the community funds should be accompanied by more rigorous data and scrutiny of the funds impact, particularly on the outcomes for individuals and families. Findings from the year one evaluation of the Communities Mental Health and Wellbeing Fund for adults should be built on with ongoing reporting of both the adult and child’s funds impact on the wider mental health system, as well as data on caseloads and the funds reach.[[10]](#footnote-10)

Primary care continues to be the key point of contact for people seeking support for their mental health. Achieving improved community psychological wellbeing support will require expansion of primary care mental health provision. We warmly welcomed the Scottish Government’s 2022 announcement to implement new Mental Health and Wellbeing Primary Care Services, backed by £40 million of funding by 2024-25.[[11]](#footnote-11) We are extremely concerned that recruitment to these new services has been delayed by last year’s emergency budget.[[12]](#footnote-12) The Scottish Government must urgently ensure the funding and development of these vital promised services. It is not clear from the newly published Mental Health and Wellbeing strategy if the full £40m commitment for mental health and wellbeing primary care services will be honoured, with the strategy only containing high level commitments for enhanced support in primary care.[[13]](#footnote-13) We believe the 2024-25 budget should reaffirm the original proposals for multi-disciplinary mental health primary care services backed by secure funding.

**Transparency and Traceability of Spend**

A key issue which we believe requires urgent attention is the need to increase the transparency and traceability of mental health spending – both spending from within overall health spending and spending from other budget portfolios. It is essential that spending can be better tracked to evaluate its effectiveness.

The lack of traceability has been a longstanding issue. In their 2018 audit of children and young people’s mental health Audit Scotland found that determining accurate spending levels on children’s mental health, both at a NHS and local authority level, was impossible.[[14]](#footnote-14) Issues included poor or uncomprehensive data collection and sharing, particularly between bodies with shared responsibility for mental health (e.g. NHS, local authorities and Integrated Joint Boards) and challenges in identifying and tracking cross portfolio spending (i.e. mental health related expenditure in education etc.).[[15]](#footnote-15)

To improve traceability, at a minimum we believe all actions outlined in the various newly published or upcoming mental health related strategies and delivery plans should include clear costings. This should include actions within the Creating Hope Together: Suicide Prevention Action Plan 2022-2025; the upcoming delivery plan for the new Mental Health and Wellbeing Strategy; and the upcoming self-harm strategy. We would also like to see the mental health spending disaggregated to a more granular level in the budget, beyond level 3.

**About SAMH**

Around since 1923, SAMH is Scotland’s national mental health charity. Today, we operate over 70 services in communities across Scotland, providing mental health social care support, addictions and employment services, among others. Together with national programme work in See Me, respectme, suicide prevention, and physical activity and sport, these services inform SAMH’s policy and campaign work to influence positive social change.

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