

## Programme for Government 2020/21 SAMH Briefing

### Introduction

This year's Programme for Government is unlike any other, as it seeks to respond to the needs of the country following the outbreak of coronavirus and set Scotland on the path to recovery. The long-term effects on our mental health are not yet known, but at SAMH we have been thinking a great deal about the areas that now require attention and investment. Above all, we know the mental health system was struggling before coronavirus. We need to be ambitious in our thinking: restarting, renewing or maintaining is not going to be enough.

### Children and young people's services

We welcome the commitments to improve mental health support for children and young people: how we respond to the mental health needs of our children and young people in the coming months will be crucial to our ability to recover from this pandemic.

For several years, SAMH has been calling for urgent action on children and young people's mental health. Almost two years ago, the Scottish Government published an audit of rejected referrals to CAMHS, which included 29 recommendations for improving the experience for children, young people and their families.<sup>1</sup> At the time, the Minister for Mental Health accepted all 29 recommendations and established a Children and Young People's Mental Health Taskforce.<sup>2</sup>

In the months that followed, it was frustrating to see the lack of action on the ground, with the rate of rejected referrals (over 20%) remaining steady over the course of the last two years.<sup>3</sup> Moreover, statistics published this week show a 55% decrease in the number of young people referred to CAMHS between April and June this year.<sup>4</sup> This means a build-up of unmet need, which will need substantial transformational investment, as well as targeted resources and effort to address.

#### SAMH calls for:

- A 'multi-agency assessment system' – a central referral hub in each local authority area, through which all young people seeking mental health support are guaranteed to access the help they need when they need it.
- No further delay to the implementation of school based counselling, which was expected to be completed by the start of this academic year – full implementation is now expected by the end of October 2020.
- Reconsideration of the year long delay to the implementation of the community mental wellbeing service for 5-24 year olds – SAMH is dismayed by this delay, with this support service urgently needed now more than ever.

<sup>1</sup> Scottish Government, [Rejected Referrals to CAMHS audit](#), 2018

<sup>2</sup> Children and Young People's Mental Health Taskforce, [Recommendations](#), July 2019

<sup>3</sup> ISD Scotland, [Child and adolescent mental health services \(CAMHS\) waiting times](#)

<sup>4</sup> ISD Scotland, [Child and adolescent mental health services \(CAMHS\) waiting times](#)

### People with existing mental health problems

There has, rightly, been a focus on population-level mental health in the last few months. However, people who were already experiencing mental health problems have been hard hit, with the withdrawal of support services and uncertainty about when these will resume.

It's clear that coronavirus has affected the people SAMH supports, most of whom have serious mental health problems. In May we carried out a survey of 458 of our service users, from across 31 of our services to find out how coronavirus was affecting them. Half of respondents said they felt anxious or scared about the virus. Many attributed these feelings to the disruption caused by the pandemic: respondents talked about the cancellation of weekly activities; being frightened; and missing their friends. A central point is that almost a quarter (24%) of respondents said they did not have access or know how to use technology. As we look forward to remobilising mental health services, we can't rely exclusively on technology to provide the support needed.

We also need to make sure we have a properly joined-up system. Many people with mental health problems receive the bulk of their support through statutory and third sector social care providers. These services have been under severe strain for many years, and this is likely to worsen as the financial impact of recent events begins to take effect. We must see the NHS and social care as two interlinked parts of the same structure, which places equal emphasis on each. Integrated Joint Boards (IJBs) are doing important work in integrating health and social care. However, it's clear that budget constraints are affecting progress.<sup>5</sup> The Health and Sport Committee has highlighted that there is wide variation in IJB budget allocations,<sup>6</sup> while Audit Scotland has outlined that there are difficulties in agreeing budgets which, in turn, means strategic plans 'lack important detail'.<sup>7</sup>

#### **SAMH is calling for:**

- **The creation of a Minister for Social Care post as part of the Review into adult social care.**
- **The Scottish Government, councils and NHS Boards to tackle the regional disparities in IJB budget allocations and difficulties in strategic planning.**
- **An end to short-termism in local commissioning of social care services, with five year contracts introduced as a statutory minimum.**

### Active living

It's not all about mental health services: we need to use all the tools we have to tackle mental health problems, and that includes physical activity and sport. Being active can be highly effective in maintaining good mental health and managing poor mental health.<sup>8</sup> However, people with

<sup>5</sup> COSLA, [The wellbeing of communities is at risk when core budgets are under threat](#), 2020

<sup>6</sup> Scottish Parliament, [Integration of Health and Social Care](#), August 2016

<sup>7</sup> Audit Scotland, [Health and Social Care Integration](#), December 2015

<sup>8</sup> Teychenne, M. et al., [Do we need physical activity guidelines for mental health: What does the evidence tell us?](#), 2010

mental health problems can face a number of barriers to participating in physical activity, and tend to be less active than those without.<sup>9</sup>

Mental health problems can negatively affect self-esteem, energy and motivation, making it harder for people to participate in physical activity.<sup>10</sup> Moreover, people who live in deprived areas are not only more likely to have poor mental health,<sup>11</sup> but are also less likely to meet physical activity guidelines<sup>12</sup> and less likely to access to greenspace.<sup>13</sup> We must make working with sports clubs, council and leisure trust facilities and sporting governing bodies an urgent priority to ensure we make the most of the opportunity to use this accessible and often free way of supporting Scotland's mental health.

**SAMH is calling for:**

- Continued Scottish Government funding and support for Action 31 of the Mental Health Strategy 2017-2027.
- The working group on social prescribing of physical activity to encourage IJBs to commission a range of opportunities specifically for people with mental health problems, with direct funding from Scottish Government.
- The National Performance Framework to measure people's satisfaction with their local greenspaces -to supplement the current indicator on access - so that the quality of green space in Scotland can be evaluated.

### Psychological Therapies

As the Scottish Government has highlighted, the pace of change in improving waiting times for psychological therapies has not been good enough. Moreover, statistics published this week show a 44% decrease in the number of people referred,<sup>14</sup> which will have inevitably resulted in a build-up of unmet need. This needs addressed, as NHS Boards continually failed to meet the waiting time target before coronavirus. The latest psychology workforce statistics also show an 8.6% vacancy rate overall; the highest rate that has ever been reported at this time of year.<sup>15</sup>

**SAMH is calling for:**

- An independent inquiry into psychological therapy provision across Scotland and the failure of NHS Boards to meet the 18 week waiting time target.
- Substantial investment in psychological therapies, including funded training.

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<sup>9</sup> Schuch, F. et al., [Physical Activity and Incident Depression: A Meta-Analysis of Prospective Cohort Studies](#), 2018

<sup>10</sup> Knapen, J. et al., [Exercise therapy improves both mental and physical health in patients with major depression](#), 2014

<sup>11</sup> Public Health Scotland, [Impact of deprivation on health](#) [accessed 25<sup>th</sup> August 2020]

<sup>12</sup> Scottish Government, [Scottish Health Survey 2018](#), 2020

<sup>13</sup> Scottish Government, [Scottish household survey 2018: annual report](#), September 2019

<sup>14</sup> ISD Scotland, [Psychological therapies waiting times](#)

<sup>15</sup> ISD Scotland, [Psychology Services Workforce in Scotland](#), June 2019