

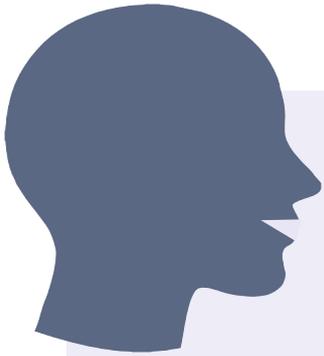
**Listen.
Learn.
Change.**

A draft action plan for mental health in Tayside 2020 in
response to 'Trust and Respect' Independent Inquiry Report

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The views of people with lived experience and staff as acceptance criteria



The Health and Social Care Alliance Scotland (The ALLIANCE) alongside the Stakeholder Participation Group reviewed the report written in December 2018 **Hearing the voices of people with lived experience** and identified the following 11 key points as key areas to measure improvement by.

Building a long term recovery approach to services that focuses on holistic care as opposed to a medical model by facilitating the breaking down of barriers, not just across health and social care services but across all services that support people – including housing, education and social security.

Provide carers with support to best carry out their role effectively for those with mental ill health by sharing information on support groups and local resources and how to talk to someone in crisis and mitigate extreme experiences of mental ill health.

Ensuring learning from adverse incidents to inform future practice and staff training.

Creating a system of services that work together in an integrated way – in particular mental health, substance abuse and suicide prevention.

Formally evaluate the Third Sector's contribution to mental health services in Tayside and the role they can play in sustainable delivery of joined up services to ensure these services are maximising impact.

Better access to early intervention services focused on achieving improved personal outcomes.

Stronger investment in preventative, community assets which build and support a person's wellbeing as well as avoiding mental ill health escalating into a crisis.

Mental health awareness training should be required for those employed by statutory agencies, schools and training as teachers in order to best support young people with their mental wellbeing.

Promoting a therapeutic environment within and around services to assist people in thriving with the support of mental health services.

Person-centred assessments driven by personal situation and needs rather than process and service capacity. While respecting confidentiality, the role of family carers should be seen as a valued part of the assessment process with the promotion of advance statements and other tools to assist with anticipatory care planning.

Enabling culture change and empowering staff to support a therapeutic environment through the provision of staff training. Services should provide staff training on person-centred care and compassionate leadership principles and enable participation in values-based reflective practice and the Scottish Government 'What Matters to You' initiative.

Employee Participation Group themes

Mental Health Employee Participation Group feedback

62% of respondents stated that there were insufficient staffing levels on wards or in departments.

"Bank staff not appropriately trained or at appropriate grade"

"Due to savings targets vacancies are not filled but we are expected to deliver same levels of service, despite growing demands of service"

35% of respondents had either witnessed or experienced bullying. Respondents described a range of consistent concerns for colleagues, or from their own experiences, as a result of bullying.

"Bullied staff ignored by management and the people who are bullying seem to be allowed to continue"

"You don't feel you have a voice"

Staff
communication
and
engagement

Open and
honest
dialogue

Inclusive
of
Everyone

Collaboration
built on trust
and respect

The action we will take

Staff will work in a mentally healthy environment and feel their wellbeing is a priority for their employers

Staff engagement in the co-creation and development the service strategy

All staff offered exit interview

Develop 'Leadership, Accountability, Culture, Engagement and Communications' project

Embed a value-based culture change

Clear line management organisational charts and personal development reviews (PDRs) for all staff

1. Introduction

This draft Action Plan sets out the Tayside approach to delivering the 51 Recommendations of the Independent Inquiry into Mental Health services in Tayside: Trust and Respect published on 5 February 2020.

The Board of NHS Tayside fully accepted the recommendations of Trust and Respect at its meeting on 27 February, 2020. Despite the limitations presented by COVID-19 since early March 2020, mental health has remained a priority for NHS Tayside and the Tayside

Executive Partners, and engagement with all key stakeholders has continued in virtual and digital ways.

The mental health strategic programme continues with engagement of all partners and support from Scottish Government. The action plan is the first key milestone in the journey to improve mental health services in Tayside and is also the first pillar of the co-creation of the Tayside Mental Health and Wellbeing Strategy which will be published in early 2021.

2. Context and background

In May 2018, the Board of NHS Tayside commissioned the Independent Inquiry into Mental Health Services in Tayside, recognising that an in-depth examination of mental health services would offer anyone who wanted to contribute the opportunity to provide their views and experiences of receiving or delivering care and treatment across Tayside.

This Listen. Learn. Change. draft Action Plan is a partnership response to Trust and Respect.

It is an ambitious programme of work to achieve the co-creation of modern, evidence-based mental health services establishing Tayside as a centre of excellence.

3. Partnership working and leadership

In order to address the recommendations in the Independent Inquiry, a statement of intent was released by the Tayside Executive Partners, who are:

Chief Executive, NHS Tayside

Chief Executive, Angus Council

Chief Executive, Dundee City Council

Chief Executive, Perth & Kinross Council

Chief Superintendent, Police Scotland, Tayside Division

The Statement of Intent sets out a strategic commitment to making all necessary improvements so that people from all communities across Tayside receive the best possible mental health and wellbeing care and treatment.

This includes a joint aim to ensure that those people with mental ill health are supported to recover without fear of discrimination or stigma. The Scottish Government announced a support package for mental health services in Tayside in January 2020 including:

- *Multi-disciplinary clinical and practice support, bringing specialists from across a range of mental health specialities and backgrounds to provide peer support and challenge*
- *Communications and engagement expertise*
- *Organisational development expertise to support culture change*
- *Royal College of Psychiatrists' UK College Centre for Quality Improvement (CCQI) to assess the quality of clinical services and areas for improvement*
- *Engagement with the Royal College of Psychiatrists to provide peer support, senior mentorship support and guidance in conjunction with other key clinicians in Scotland*
- *Programme management support to enable delivery of NHS Tayside's improvement plans*
- *Healthcare Improvement Scotland support to address the quality of adult community health services*

To establish a true, system-wide collaborative, the Tayside Executive Partners, in the form of their governance group the Strategic Leadership Group (SLG), will invite national organisations to contribute to the programme. This will include Healthcare Improvement Scotland, Scottish Ambulance Service, NHS24 and See ME Scotland, with the aim of establishing a common understanding and strategic support for the scope of work to achieve the shared vision of sustainable, safe, effective and person-centred improvements.

The commitment to joint working by all partners has resulted in the draft Action Plan setting out a programme which puts people at the heart of services. This joint working will place people receiving mental health supports and services, their families, friends and carers at the centre of all future clinical and service models and any future changes to service re-configuration.

The co-creation and co-production approach, led by the collective leadership principles, is an inclusive and system-wide approach to the mental health needs of our population with

strong and honest two way engagement and feedback with all stakeholders that will treat all previous experiences as opportunities for system learning.

The Tayside Executive Partners will ensure the programme of work detailed in the Action Plan will deliver a Tayside Mental Health and Wellbeing Strategy.

The mental health and wellbeing of the population is key to success and therefore mentally healthy staff and the mental health and wellbeing of staff will also feature in our work alongside the need to consider culture, leadership, kindness and compassion to develop and deliver the local strategy.

The national Mental Health Strategy (2017-2027) also commits to working with employers on how they can act to protect and improve mental health and support employees experiencing poor mental health, and we will involve large local employers in our projects to ensure this work is embedded locally.

4. Our planned and collaborative response to the Independent Inquiry

NHS Tayside's Chief Executive has stated that "no matter how many actions we put into a plan, we must focus on those with lived experience first and foremost". To do this our efforts will go towards engaging with and listening to the people of Tayside and taking on board what they have shared with us already.

The first major milestone in Trust and Respect is the delivery of a detailed programme plan by 1 June 2020 which will set out immediate actions, investments in staff training and development and

a comprehensive programme of work to be undertaken to ensure all 51 recommendations are addressed in full.

The 51 recommendations cover five cross-cutting themes:

1. *Strategic service design*
2. *Clarity of governance and leadership responsibility*
3. *Engaging with people*
4. *Learning culture*
5. *Communication*

A key and critical element of this work will be to work together with people living with mental health conditions and ill health, their families and carers, and health and social care staff. We will immediately work on addressing the issues raised in the Independent Inquiry report to build good quality mental health services that meet people's needs and build a working environment that supports our staff.

In 2019 we commenced our approach to build on quality improvement work to develop the organisational culture, leadership and clinical governance along with our staff. Our leaders will create and maintain positive, inclusive and compassionate working cultures.

The ambitions for the Tayside population (world class, person centred, effective, and safe services) are only possible if staff at all levels are working in environments where they are supported to perform at their best.

The new future and ways of working will be inclusive, structured, and disciplined, with frequent two-way communication and feedback mechanisms in place allowing all stakeholders to understand and get involved in the processes to design and develop the Tayside Mental Health and Wellbeing Strategy. We will engage widely, providing a range of ways people can get involved and influence the future mental health supports and services in Tayside. Choices will be accessible for people with mental illness, their families and carers.

Our person-centred approach will focus on actively listening to people to enable recovery and better outcomes, challenging and lifting the stigma and discrimination often surrounding mental health, and putting mental health on an equal par with physical health, whilst developing services that are robust and appropriate for our times, incorporating the best of supportive digital technology throughout.

5. Our plans

Mental health and wellbeing of the population is a top priority for Tayside. This includes a drive to involve all organisations who provide support and services to and with the people who live here. In Tayside, we are commencing an important journey, after listening to those who have lived experience of mental illness, the experiences of their carers and families.

In response to 'Trust and Respect', we are beginning a fundamental redesign of mental health services and our aim is to listen, learn and change, ensuring the promotion of mental health and wellbeing underpins all aspects of our services. We want to be proud of our service and the support we

give, we want to make a difference but most importantly we are willing to listen, to learn from the past and change the future.

The main emphasis of our strategic change programme is to develop the detail, gain agreement on the response and merge the draft action plan with the Tayside Mental Health and Wellbeing Strategy 2020-2030.

The 10-year strategy for all age groups will be informed by a range of work including the Scottish Government's Mental Health Strategy 2017-2027.

The local plan will reflect the needs of people living in Tayside and importantly the

experience of people using our services. The contents of the strategy will be consistent with the Integration Joint Boards' vision for improvements in mental health provision.

We have taken on board the recommendations in Trust and Respect and embraced the opportunity to deliver mental health in a way that no other area in Scotland does – ensuring all those accountable hear the voices of the public and, in particular, people with lived experience, their families and carers.

Going forward the key stakeholders measuring the success of this work will be the

people of Tayside who will be equal partners in the process to:

- *Influence the scope of our work and participate in the design, development and final production of the Tayside Mental Health and Wellbeing Strategy*
- *Co-create, design, develop and generate as well as comment on any papers related to the strategy development*
- *Be an equal stakeholder in engagement activity that is digitally generated by Tayside in the interim period*

6. Conclusion

In conclusion, 'Listen. Learn. Change.' sets the framework for an ambitious programme of change over the coming years as a means for ensuring delivery of the actions, commitments and a shared accountability for implementation.

In developing the programme of work in response to the Independent Inquiry, all partners in our local authorities and health and social care organisations across Tayside have come together to present this draft action plan for improvement.

The lead for ensuring delivery of this draft action plan will be Kate Bell, NHS Tayside's Interim Director of Mental Health. It is therefore proposed that oversight, leadership, co-ordination and management of the actions noted here will be merged with the programme of work to develop the single Mental Health and Wellbeing Strategy as one strategic planning initiative under the auspices of Tayside Mental Health and Wellbeing Strategy Board, chaired by Kate

Bell, with membership from across a wide range of stakeholders. The Independent Inquiry response, Mental Health and Wellbeing programme (strategy and change programme) work will have a dedicated and specialist programme management team.

We agreed on five strategic themes linking each recommendation to tasks and activities required to achieve change that will result in sustainable improvement in mental health service provision.

1. *Single Tayside Mental Health and Wellbeing Strategy*
2. *Whole-system Change Redesign Programme*
3. *Quality Improvement, Learning and Care Governance*
4. *Governance, Leadership and Accountability*
5. *Culture, Engagement and Communications*

7. Draft Action Plan template

1. Single Tayside Mental Health and Wellbeing Strategy (Recommendations 3, 13, 27, 33, 39)					
Recommendation 3	Engage with all relevant stakeholders in planning services, including strong clinical leadership, patients, staff, community and third sector organisations and the voice of those with lived experience of Mental Health			Outcome: System wide Tayside Mental Health and Wellbeing Strategy	RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim Director of Mental Health, NHS Tayside	NHS Tayside will lead and be accountable for the co-creation and production of the Strategy	NHS Tayside and key partners to approve and endorse draft strategy	Oct 20	<ol style="list-style-type: none"> Establish the Strategic Leadership Group (This group will consist of the members of the Executive Partners Group and be the Governance Board for the Strategy and Change Programme 2020) Set out the decision making committees/ dates for supporting /endorsing /approving the Programme Definition and Governance paper and Draft Action to be submitted to SG 01 June 2020. Establish and set up the Mental Health and Wellbeing Strategy Board (This group is the strategic lead group, directing the stakeholder management and engagement at all levels within Tayside – building on the work of the Tayside Mental Health Alliance.) Undertake review of current services "As is" Develop Programme Definition Document (PDD) Develop Programme Plan Develop Comms and engagement strategy detailing how we will virtually connect with all stakeholders Develop our infrastructure for programme development (Strategy and Change Programme) Establish Strategy writing process and timeline Assemble a draft Tayside Mental Health and Wellbeing Strategy Develop an action plan to engage and invest with medical staff 	
Team Involved (<i>more team members will be added as we develop these plans</i>) – All members of the SLG supported by Kate Bell, Lesley Roberts					
Recommendation 13	Ensure that there is urgent priority given to strategic and operational planning of community mental health services in Tayside. All service development must be in conjunction with partner organisations and set in the context of the community they are serving. <u>Interdependent with Recommendation 5</u>			Outcome: Strategic Governance in place to oversee Independent Inquiry and Mental Health and Wellbeing Strategy	RAG – Amber Date – Mar 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	

	(SLG)			
Team Involved (more team members will be added as we develop these plans) – Grant Archibald				
Recommendation 27	Provide adequate staffing levels to allow time for one-to-one engagement with patients.	Outcome: Develop model of Multi-Disciplinary Team based working as an enabler for Shifting the Balance of Care (SBC) to deliver a model of Right person, right place, right time, aligning the resources in line with demand and capacity		RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Kate Bell Interim Director of Mental Health, NHS Tayside	Tayside Integrated Leadership Group (ILG) will lead and be accountable for the delivery of this action.	Short term Review of Caseloads	July 2020	<p>Our in-patient areas are working towards accreditation with the RCPsych: There has been a review of the staff members and skill mix of the team within the past 12 months. This is to identify any gaps in the team and to develop a balanced workforce which meets the needs of the ward/unit.</p> <p>WORKFORCE PROJECT</p> <ol style="list-style-type: none"> Review existing working practices Implement Health and Care (Staffing) (Scotland) 2019 and the Nursing Workforce Tools that are mandated for use. Develop tool Repeat workforce tool to clarify resources available and needed. Develop model within strategy to balance out the need of general and specialist support. CAMHS, Children and Young People project factored into the scope of the strategy (which will be a person-centred MDT approach of Right Person, Right Place, Right Time, aligning the resources re demand and capacity.) Implement job planning for Medical staff to deliver sustainable care Develop a medical workforce strategy
		New model that balances out the need for generalist and specialist - shifting the balance of care.	Sept 2020	
Team Involved (more team members will be added as we develop these plans) – Mike Winter, Karen Anderson, Director of AHPs, Charlie Sinclair, Exec for HR/Workforce, Keith Russell, Social Work Leads, Lesley Roberts				
Recommendation 33	Focus on developing strategies for prevention, social support and early intervention for young people experiencing mental ill-health in the community, co-produced with third sector agencies.	Outcome: Chapter of strategy will include mental health and wellbeing of CYP, universal services through to specialist interventions required and include transition model.		RAG – Green Date - Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Chair of the Children's Collaborative	All 3 Local Authorities	Reporting to the Mental Health	June 20	The strategy will include in its scope work with children and young people and plan from mental health and wellbeing of CYP, universal services through to specialist interventions required and include work on transition to ensure the new CAMHS specification is scoped into the work also.

		and Wellbeing Strategy Board.	Aug 20 Oct 20	<ol style="list-style-type: none"> 1. Develop project focusing on Children and young people's mental health. 2. From this develop writing team for this chapter 3. Agree transition model 4. Develop and agree strategy chapter. 5. Develop stronger links between physical and mental health services
Team Involved (more team members will be added as we develop these plans) - Chair of the Children's Collaborative				
Recommendation 39	Consider the formation of a service for young people aged 18 – 24, in recognition of the difficulties transitioning to adult services and also recognising the common mental health difficulties associated with life events experienced during this age range. This may reduce the necessity for these patients to be admitted to the adult in-patient services.			Outcome: Service for young people aged 18 – 24 RAG – Green Date - Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Lorna Wiggin Director of Acute Services, NHS Tayside	NHS Tayside will lead and be accountable for the delivery of this action supported by Integrated Children and Young People's Service Planning group.	Draft model of service for young people aged 18 – 24	Aug 20	<p>The MHWS will include in its scope work with children and young people and plan from mental health and wellbeing of CYP, a staged model of universal services through to specialist interventions is required and will include work on transitions to ensure the new CAMHS specification is scoped into the work.</p> <ol style="list-style-type: none"> 1. Consider the overlap and pathways for Children and Adult 2. To ensure strategy has a Children and Young People chapter 3. Co-create and design a Transitions project to ensure a robust and seamless transition process is developed and in place through to age 24. <p>NOTE - Already rolled out transition of children and Adolescents in Angus (16-18 year olds) for those who were already in CAMHS (existing and new referrals)? Now keeping all adolescents and at 17 years and 4 months, an individual transition plan is triggered. This has been occurring for 10 months and has not been interrupted by COVID.</p> <p>A staged approach for transition for Dundee and Perth/Kinross is in its early stages, but COVID had impacted on bringing together adult and CAMHS teams with the client, so this needs to be re-focused when recovery occurs.</p>
Team Involved (more team members will be added as we develop these plans) - Dr Peter Fowlie AMD Women and Children's Services, Lorna Wiggin, Dr Joy Oliver, Dr Chris Pell, Arlene Wood (Transition)				

2. Whole System Mental Health Change Programme Recommendations 2, 14, 16, 20, 24, 26, 35, 41

Recommendation 2	Conduct an urgent whole-system review of mental health and well-being provision across Tayside to enable a fundamental redesign of mental health and wellbeing services for Tayside.			Outcome: New Clinical and service models with proportionate service configuration – a completed whole system review with recommendations for new model of care	RAG – Amber Date – Nov 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim Director of Mental Health, NHS Tayside	NHS Tayside	Develop programme of work for delivery of future models of care	May 20 Sept 20	Design and develop the 2021-2030 Tayside Mental Health and Wellbeing Strategy and Service Change delivery Programme 2020-2023. <ol style="list-style-type: none"> To review work completed to date. Full review of mental health supports and services Co-create, design and develop Strategy as in strategic theme 1, recommendation 3 with accompanying detailed plans. Recognised that Clinical engagement of all staff key to delivery Programme Director, Lesley Roberts will lead and be responsible for the delivery of this action.	
Team Involved (<i>more team members will be added as we develop these plans</i>) – Lesley Roberts, Programme Director MHWS, Programme Team and all relevant Stakeholders					
Recommendation 14	Consider developing a model of integrated substance use and mental health services.			Outcome: New model of integrated substance use and mental health services	RAG – Amber Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Dr Drew Walker, Director of Public Health	TBC by SLG	Develop draft model	Sept 20	Set up and develop a model of integrated substance use and mental health services <ol style="list-style-type: none"> Consider workforce requirements Consider models of integrated care Develop model and service configuration Incorporate this integrated substance use model into the strategy Alcohol and Drug Partnerships (ADPs) within localities will lead and be accountable for the delivery of this action (reporting to ILG)	
Team Involved (<i>more team members will be added as we develop these plans</i>) - Dr Jane Bray, Dr Emma Fletcher, Substance misuse Leads - Dr Fiona Cowden and Dr Tim Elworthy					
Recommendation 16	Prioritise the re-instatement of a 7 day crisis resolution home treatment team service across Angus.			Outcome - 7 day crisis resolution home treatment team service across Angus.	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Gail Smith Chief Officer,	HSCP Angus on behalf of Tayside	7 day crisis resolution home treatment team	Aug 20	Assumption for the requirement is that 24/7 translates as 7 days a week. This is currently a service priority for Angus there are already pre-existing plans to deliver a 7-day home treatment model that	

Angus Health and Social Care Partnership		service across Angus.		<p>have been approved and funded.</p> <ol style="list-style-type: none"> Reinstate Community Mental Health Services / Crisis Resolution & Home Treatment Team and Hospital Interface project Develop specification Propose 7 day service model and set out in the Strategy and Programme Delivery Plans Explore the views of clinicians and other stakeholders: How was previous service viewed <p>Community Mental Health Services / Crisis Resolution & Home Treatment Team and Hospital Interface project</p> <p>Note: Angus has very strong third sector involvement. (We will assess level of need for this within Angus as we may look to 2 or 3 site delivery to aid sustainability.)</p>	
Team Involved (more team members will be added as we develop these plans) – Bill Troup					
Recommendation 20	Consider the development of a comprehensive Distress Brief Intervention training programme for all mental health staff and other key partners to improve pathways of care for individuals in acute distress.			Outcome - Distress Brief Intervention training programme developed and implemented	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Bill Troup Head of Mental Health Services, Angus HSCP	HSCP Angus on behalf of Tayside	Distress Brief Intervention training programme proposed and approved by MHWS Board	Aug 20	<ol style="list-style-type: none"> Set out the business case for DBI in Tayside Reinstate Community Mental Health Services / Crisis Resolution & Home Treatment Team and Hospital Interface project Develop training and process for implementation. To ensure DBI is within the strategy <p>Community Mental Health Services / Crisis Resolution & Home Treatment Team and Hospital Interface project</p>	
Team Involved (more team members will be added as we develop these plans) – Bill Troup					
Recommendation 22	Develop clear pathways of referral to and from university (Dundee, Dundee College, St Andrews, Abertay, University Of Highlands and Islands) mental health services and the crisis resolution home treatment team.			Outcome – Student referral pathway	RAG – Amber Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Keith Russell, Associate Nurse Director, Mental Health and Learning Disabilities	NHS Tayside	Pathway drafted Pathway complete	July 20 Aug 20	<ol style="list-style-type: none"> Collaborate with Universities (Update - There has been 2 meetings with the University of Dundee and University of Aberdeen regarding this action and the existing pathway is being reviewed.) Establish what they currently provide and see what is required to achieve recommendation. 	

Team Involved (more team members will be added as we develop these plans) - Keith Russell, Sara Vaughn					
Recommendation 24	Involve families and carers in end-to-end care planning when possible.			Outcome – Clear policy for family and carer engagement	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Claire Pearce NHS Tayside Nurse Director	Care Planning Collaborative HIS, NHS Tayside	Build into NHS Tayside Care Planning Processes Learn from Adverse Events	July 20 Sept 20	<ol style="list-style-type: none"> 1. Establishment of a care planning collaborative to include families and carers 2. Review of Triangle of Care Implementation 3. Review of the Mental Health Person Centred Care Planning Standards 4. Review of Standing Operating Procedures for Anticipatory Care Planning 5. Carry out training with staff on person centred care and the benefits to patient outcomes when family and carers can be involved in Care Planning 6. The audit tool will be used monthly and compliance reported to the relevant quality improvement or Governance groups. Themes for learning have been identified from the audit cycles and have been incorporated into the learning sessions within the Continuous Professional Development Programme. 7. Next steps include developing an Assessment and Documentation Pathway Collaborative to support the development of clear documentation pathways to ensure consistency. 8. Develop and undertake training to learn from adverse events 9. Focus has been on in-patients – we plan to extend to integrated CMHT 	
<p>PLEASE NOTE: A Care Planning Collaborative was set up in September 2018 across General Adult Mental Health In patient wards to support the development and implementation of the Standards. The Standards are comprised of 11 standard statements with associated guidance and an audit tool that collects qualitative data. The scope of these Standards is to include the care plans of all Mental Health and Learning Disability Nurses across the range of Mental Health and Learning Disability services in Tayside.</p> <p>In January 2019 the Standards underwent a consultation process across NHS Tayside Mental Health Services and were endorsed by the Nurse Director in May 2019. Following the launch of the Standards these have been presented to all clinical teams and referenced by the MWC in their recently published Person Centred Care Plans, A Good Practice Guide. The NHS Tayside Mental Health Nursing Standards for Person Centred Care Planning have been recognised nationally by receiving a Highly Commended award in the Inpatient Category at the Mental Health Nursing Forum, Scotland, and Awards Ceremony in November 2019.</p> <p>See <i>Tayside Mental Health Nursing - Standards for Person-Centred Care Planning</i>¹</p>					
Team Involved (more team members will be added as we develop these plans) - Donna Robertson Johnathan MacLennan, Tracey Williams - Improvement Fellows, Tom Imms, Design approach Rodney Mountain Systems Thinking, Stakeholder Participation Group members (recent lived experience), Bill Troup, Arlene Mitchell, Evelyn Devine					
Recommendation 26	Make appropriate independent carer and advocacy services available to all patients and carers.			Outcome - single referral point for advocacy	RAG – Amber Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	

Arlene Wood Associate Director of Mental Health	All HSCPs	Independent advocacy services exist in each of the 3 areas (HSCP's).	Sept 20	1. To ensure achievement of a single referral point for advocacy in the strategy	
Team Involved (more team members will be added as we develop these plans) – Arlene Wood, HSCP Advocacy Services Leads, Third Sector Organisations					
Recommendation 35	Ensure the creation of the Neurodevelopmental Hub includes a clear care pathway for treatment, with the co-working of staff from across the various disciplines not obfuscating the patient journey. The interdisciplinary of the hub may give rise to confused reporting lines or line management structures/ governance issues. A whole system approach must be clarified from the outset.			Outcome - Clear care pathway for treatment within Neurodevelopmental Hub	
				RAG – Amber Date – Sept 2020	
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Lorna Wiggin Director of Acute Services, NHS Tayside	NHS Tayside Acute Services	Creation of the Neurodevelopmenta l Hub, Clear pathway	Sept 20	1. Identify the Clinical Leadership (Post advertised) NOTE - Clinical Leadership post not filled but interim measures in place to progress leadership for Neurodevelopment HUB. Two senior psychologists lead this and have dedicated hours for improvement and the progression of the pathway 2. Creation of the Neurodevelopmental Hub NOTE - Continued shared pathway work is being undertaken with paediatrics to continue the development of the Neurodevelopment HUB 3. Clear pathway NOTE - Neurodevelopment pathway being developed and test of changes occurring within this; 4. Move this into paediatrics in recognition of prescribing needs and specialist clinics Capacity still being built into support a move to paediatrics, in recognition of prescribing needs and specialist clinics; 5. External contractor (Healios) Trial agreed to commence in 3 weeks (Mid June), to test neurodevelopment pathways for 3 streams of clinical need. 6. System improvements for internal Neurodevelopment pathway to be created from Healios trial.	
Team Involved (more team members will be added as we develop these plans) - Dr Pete Fowlie, Lorna Wiggin					
Recommendation 41	Consider offering a robust supportive independent advocacy service for parents and carers of young people who are engaged with Child and Adolescent Mental Health Services. This may include carer support groups.			Outcome - Independent advocacy service for parents and carers of young people who are engaged with Child and Adolescent Mental Health Services.	
				RAG – Amber Date – Sept 2020	
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	

Lorna Wiggin Director of Acute Services, NHS Tayside	NHS Tayside	Independent advocacy service	Oct 20	<p>There is a recognition of the need for the child's views to be held paramount, work is well progressed to achieve this.</p> <p>1. Establish a single referral point for advocacy (to include parent and carers of young people advocacy) in the strategy</p> <p>NOTE – CAMHS website being redesigned and developed to create uniformity of advocacy information that matches information included in standard referral letters, which include signposting for local support services / tools.</p> <p>1st June 2020 locality sign posting being included in all letters to clients / families until website can be finalised.</p> <p>Advocacy Services - we plan to work with these partners to achieve this²</p>
Team Involved (more team members will be added as we develop these plans) - Lorna Wiggin, Diane Caldwell				

3. Quality Improvement, Learning and Care Governance Recommendations 4, 8, 11, 15, 18, 19, 23, 25, 28, 31, 34, 36, 37, 38, 40, 51					
Recommendation 4	Establish local stakeholder groups as a mechanism for scrutiny and improvement design to engage third sector, patients' representatives and staff representation.		Outcome - Establish local stakeholder groups		RAG – Green Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Jane Duncan Director of Communication and Engagement	NHS Tayside	Mental Health and Wellbeing Strategy Board – Inclusive Membership, Communication and Engagement Group	June 20	<ol style="list-style-type: none"> 1. Establish Organisational Lead for Public and Patient Involvement (Mental Health) 2. Mental Health and Wellbeing Strategy Board - to ensure achievement of strategy. 3. Develop a sustainability model for participation and scrutiny. 4. Stakeholder Participation and Engagement sub-group to have accountability for quality assurance and ongoing scrutiny and review. 5. Communication and Engagement sub-group to develop plan. (Work to include sample groups and sharing information through web platforms, develop Community Engagement plans Scotland/HIS.) 6. Review should be done on what is currently in place and decide if there is any strengthening to be done. 	
Team Involved (more team members will be added as we develop these plans) - Lesley Roberts, Arlene Mitchell, Bill Troup, Chris Wright, Margaret Dunning					
Recommendation 8	Deliver timely, accurate and transparent public reporting of performance, to rebuild public trust in the delivery of mental health and wellbeing		Outcome - External reporting plan		RAG – Amber

services.				Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Hazel Scott Director of Planning & Performance/Assist Chief Executive	NHS Tayside	NHS Tayside Annual Operating Plan Care Governance Committee (public forum)	July 20	<p>NHS Tayside website, provides updates and Tayside Annual Operating Plan will fulfil this function.</p> <ol style="list-style-type: none"> Requires a piece of work to review what is currently being provided Determine future reporting. Implement a reporting process. SLG will agree this. Ensure that existing clinical governance and risk structures are consistent in mental health services
Team Involved (<i>more team members will be added as we develop these plans</i>) – Bill Nicol, Arlene Wood, Sarah Lowry, Diane Campbell AD Clinical gov. And risk Elaine Henry AMD Clin. Governance				
Recommendation 11	Ensure that the policy for conducting reviews of adverse events is understood and adhered to. Provide training for those involved where necessary. Ensure that learning is incorporated back into the organisation and leads to improved practice.		Outcome - Clarity on policy and supporting training programme with process to incorporate learning back into organisations	
				RAG – Green Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Claire Pearce NHS Tayside Nurse Director	NHS Tayside and HSCP Clinical Quality Leads	Policy Compliance Training System Wide Learning's from Adverse Events	Sept 2020	<ol style="list-style-type: none"> Agreed that actions should be addressed individually into <ol style="list-style-type: none"> (Policy Compliance) Ensure that Quality Performance reviews in mental health provide timely scrutiny of adverse events. Strengthen the reporting framework to board level (Training) Use learning from adverse events to prevent future occurrence (System Wide Learning's from Adverse Events) Work already underway needs collated and reported to ensure consistent approach to policy compliance <p>Update - System Wide Adverse Event Learning Forum in place - first 2 meetings had approximately 100 professionals from across Tayside in attendance. Third session interrupted by Covid19 but plans for reinstatement being discussed</p>
Team Involved (<i>more team members will be added as we develop these plans</i>) - Care Governance - Clare Pearce, Diane Campbell, Elaine Henry				
Recommendation 15	Develop comprehensive and pertinent data-capture and analysis programmes, to enable better understanding of community need and service requirement in the community mental health teams.		Outcome - Report on metrics of the need and service requirement in the community mental health teams.	
				RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
	Business unit	Develop data and data-	July	<ol style="list-style-type: none"> Agree data – Dr Christmas will lead this – he is very experienced/knowledgeable in data use and systems

Dr Drew Walker Director of Public Health	All agencies to work collaboratively	capture process Develop analysis Collate into Strategic Needs Assessment of MH	20 Aug 20 Oct 20	<p><i>NOTE - Previously we have found that there is a lot of data presented at QPR but often not accepted. Therefore we plan that the data will be cross-checked by clinicians and that the clinicians understand this and it feels relevant and accurate to them. A process will be set up to do this.</i></p> <ol style="list-style-type: none"> 2. Review data capture process 3. Review metrics and outcome measure across the scope of the programme 4. Ensure Strategic Needs Assessment feeds into metrics and outcomes (clinical and patient reported outcomes) are clear <p>Clinical leads supported by Business Intelligence Unit/ISD/LIST analysts/Public Health/Programme Team/ and HSCP information teams</p>
Team Involved (more team members will be added as we develop these plans) - Dr David Christmas, (Dr Jane Bray, Dr Emma Fletcher Public Health Consultants, Sarah Lowry)				
Recommendation 17	Review all complex cases on the community mental health teams' caseloads. Ensure that all care plans are updated regularly and there are anticipatory care plans in place for individuals with complex/ challenging presentations.		Outcome - Establish process and frequency for updating care plans	
				RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Keith Russell NHS Tayside Associate Nurse Director	NHS Tayside/ Health and Social Care Partnerships (particularly social work leadership)	Robust audit tool. Process for review Schedule for reviews Report on lessons learned	July 20 Aug 20 Sept 20 Oct 20	<ol style="list-style-type: none"> 1. Ensure that there are robust audit tools in place to review complex cases 2. Process for review 3. Schedule for regular audit of this cohort 4. Report on lessons learned.
Team Involved (more team members will be added as we develop these plans) - Keith Russell, Bill Troup, Chris Lamont, Arlene Mitchell				
Recommendation 18	Plan the workforce in community mental health teams in the context of		Outcome - To develop new model for General Adult	
				RAG – Green

continuous care provision across all community services.				
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Elaine Henry Associate Medical Director for Medical Workforce	NHS Tayside	Workforce plan (draft)	Sept 20	<ol style="list-style-type: none"> 1. Develop a workforce Plan for Mental Health. (Draft in development) 2. First Priority - Reconfiguration of General Adult Psychiatry (<i>Workforce project to ensure that we cover all areas of service.</i>) 3. Reduce locum dependency by 50% to next summer
Team Involved (<i>more team members will be added as we develop these plans</i>) - Arlene Wood, Elaine Hendry, Mike Winters, Keith Russell				
Recommendation 19	Prioritise the development of safe and effective workflow management systems to reduce referral-to-assessment and treatment waiting times. This should also include maximum waiting times for referrals.		Outcome - To develop Workflow Management System with Mental Health Services.	
				RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Jane Bruce AMD Primary care Arlene Wood Associate Director of Mental Health and Learning Disabilities	Tayside Mental Health Integrated Leadership Group	Draft workflow management system	Oct 20	<ol style="list-style-type: none"> 1. Undertake root cause analysis of why they are viewed to be blocks and review current model 2. Within the Workforce Plan for Mental Health, develop Current Workflow Management System with Mental Health Services. 3. Medical staff engagement across primary and secondary care interface <p><i>Note - Currently working at inpatient level with leadership colleagues /CRHTT to develop capacity and flow model based on Readiness for Discharge tool already developed.</i></p>
Team Involved (<i>more team members will be added as we develop these plans</i>) - Mike Winter, Keith Russell, Johnathan MacLennan and Leads of Community Mental Health Teams				
Recommendation 23	Develop a cultural shift within inpatient services to focus on de-escalation, ensuring all staff are trained for their roles and responsibilities.		Outcome - New observation protocol	
				RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Keith Russell Associate Nurse Director of Mental Health and Learning Disabilities	Least Restrictive Care Collaborative	Revised and rewritten Observation Protocol for all inpatient mental health and learning disability inpatient services in NHS	Oct 20	<ol style="list-style-type: none"> 1. Observation Protocol Implementation 2. This falls under the current remit of the IOP (Improving Observation Practice) group, as well as LRC (Least Restrictive Caring) group (meeting since 2018). [<i>The early recognition and response of a deteriorating patient sits within both groups; the practical side in LRC for training and development, and the preventative side (a stage earlier in the process) within IOP.</i>] <p>Proposal to develop a revised restrictive intervention reduction team for all NHS Tayside with a specific lead for mental health has been developed and discussed at Exec level – attached. See Restrictive Intervention reduction plan³ and Draft Mental Health and Learning Disabilities Observation Protocol⁴</p>

		Tayside		<u>NHS Tayside are the first board in Scotland to do this - and as a result we have other boards wanting to do it with us.</u>	
Team Involved (more team members will be added as we develop these plans) - Johnathan MacLennan, Donna Robertson, Diane Campbell (Role in nursing education and clinical risk)					
Recommendation 25	Provide clear information to patients, families and carers on admission to the ward, in ways which can be understood and remembered.			Outcome - Clear comms plan for patients, families and carers on admission to the ward	RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Arlene Wood Associate Director of Mental Health and Learning Disabilities	NHS Tayside	Easy read comms for patients, families and carers on admission to the ward	Oct 20	<ol style="list-style-type: none"> 1. Review all patient information leaflets (PiLs) 2. Engage service users and representatives to consider what could be done to improve the type and format of PiLs 3. Update leaflets, consider web based information, apps and other digital forms of information (This work also links to recommendation 24) 	
Team Involved (more team members will be added as we develop these plans) - Johnathan MacLennan, Danielle Gorrie, Advocacy Lead (Name TBC), Arlene Wood					
Recommendation 28	Ensure appropriate psychological and other therapies are available for inpatients.			Outcome - Appropriate psychological and other therapies are available for inpatients	RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kevin Power Director of Psychology	Perth & Kinross on behalf of Tayside Exec Partners	95% of inpatient staff who will have trauma-informed training commensurate to their role	Dec 20	<ol style="list-style-type: none"> 1. IOP Steering group to develop an implementation plan for the protocol. 2. Position statement for inpatient psychology for the next three years. 3. Development of a programme that starts with a reflective practice session around the NES 'Opening Doors' animation followed by LearnPro, then Survive and Thrive and Safety and Stabilisation, through to expert/train-the-trainer level appropriate to role. QI and Practice development leads have taken part in the Scottish Trauma Informed Leaders raining and link closely with NES around developments in Tayside to ensure a contemporary approach. 4. Appoint an 8b 0.4 WTE Clinical Psychologist to support the development and roll out of training and they will also play in instrumental role in ensuring revised restrictive intervention reduction programme is both trauma informed and psychologically safe. 	
Team Involved (more team members will be added as we develop these plans) - Professor Kevin Power, Psychology Services					
Recommendation 29	Reduce the levels of ward locking in line with Mental Welfare Commission for Scotland guidelines.			Outcome – The guidance on ward locking is updated, approved and shared with all staff.	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	

Kate Bell NHS Tayside Interim Director of Mental Health	NHS Tayside	Establish and implement revised guidance on ward locking	Aug 20	<ol style="list-style-type: none"> 1. Embed MWC Right in Mind Pathway across all In Patient Services 2. Work with the MWC - We are working with Ian Cairns at the MWC regarding this action and the MWC have plans to review Rights, Risks and Limits to Freedom which is the MWC publication that primarily sets out their position on door locking) 3. Review design and technology innovations to management of ward door locking. 	
Team Involved (more team members will be added as we develop these plans) – Keith Russell					
Recommendation 30	Ensure all inpatient facilities meet best practice guidelines for patient safety.			Outcome - Ensure all inpatient facilities meet best practice guidelines for patient safety	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Keith Russell NHS Lanarkshire Associate Nurse Director	NHS Tayside	Approved Standards reached	Aug 20	<ol style="list-style-type: none"> 1. Build on work achieved to date around health & safety, Royal College of Psychiatry accreditation. 2. Establish the best practice for all Mental Health Inpatient facilities and set out a plan to deliver 3. Engage and involve patients and local mental health representatives in this process and ensure a person centred approach is taken where possible. 4. Roll out structured patient safety programme reflecting of National SPSP safety principles <ol style="list-style-type: none"> i. Least Restrictive Practice ii. Physical Health iii. Leadership and Culture iv. Communication 5. Devise a programme for the roll out of Royal College Psychiatrists Quality Network Accreditation to include: <ol style="list-style-type: none"> i. Standards for inpatient mental health service (1 ward started) ii. Standards for inpatient learning disability service iii. Standards for rehabilitation iv. Standards for crisis response v. Standards for Intensive Psychiatric Care Units (started) 	
Team Involved (more team members will be added as we develop these plans) - Johnathan McLennan, Dr Chris Pell, Arlene Wood, Clinical risk and governance teams					
Recommendation 31	Ensure swift (timeous) and comprehensive learning from reviews following adverse events on wards.			Outcome - Adverse Events training provided by Healthcare Improvement Scotland	RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Dr Stuart Doig Consultant	NHS Tayside Quality Improvement Team	Training package	July 20	<ol style="list-style-type: none"> 1. Review of all outstanding adverse events and ensure learning is shared 	

Forensic Psychiatrist		Implementation Plan	Aug 20	<i>Note: Dr Doig has very good experience and has attended team based quality review workshops, he will provide this training – supported by others.</i>		
Team Involved (more team members will be added as we develop these plans) - Dr Stuart Doig, Keith Russell, Tracey Passway						
Recommendation 34	Ensure that rejected referrals to Child and Adolescent Mental Health Services are communicated to the referrer with a clear indication as to why the referral has been rejected, and what options the referrer now has in supporting the patient.			Outcome - To ensure strong referral plan to CAMHS is within the strategy, including communication process		RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan		
Lorna Wiggan Director of Acute Services, NHS Tayside	NHS Tayside Quality	Discrete Referral Codes	Oct 20	<ol style="list-style-type: none"> Audit rejected referrals. NOTE - Audit completed and identified duplication of referrals and coding issues, which has impacted on accuracy of information and data Review referral management to CAMHS NOTE - Successful small test of change completed with GPs to improve referral Review communication process and content NOTE - New acknowledgements letters for all referrals being sent out which also includes information on support services / tools available in their local area. 		
Team Involved (more team members will be added as we develop these plans) - Lorna Wiggan, Diane Caldwell, Peter Fowlie/ Mike Winter, Dr Pascal Scanlan						
Recommendation 36	Clarify clinical governance accountability for Child and Adolescent Mental Health Services.			Outcome - Ensure clear clinical governance structure for CAMHS is within the strategy		RAG – Green Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan		
Lorna Wiggan Director of Acute Services, NHS Tayside	NHS Tayside with Local Authorities for CYP known to SW	Clinical Governance Forums	Oct 20	<ol style="list-style-type: none"> Ensure clear clinical governance structure for CAMHS is within the strategy NOTE - Women, Children and Families Clinical Governance Structure been in place for 2 months; Accountability to CAMHS oversight group & local Clinical Governance Committee framework continues to operate. 		
Team Involved (more team members will be added as we develop these plans) - Lorna Wiggan, Diane Caldwell						
Recommendation 37	Support junior doctors who are working on-call and dealing with young people's mental health issues.			Outcome - Develop strong support process for junior doctors within workforce plan		RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan		
Mike Winter NHS Tayside Associate Medial Director	NHS Tayside	Develop programme of work for future model as part of	Aug 20	<ol style="list-style-type: none"> Workforce planning to agree a mechanism, process and develop the system for sharing and applying. Consider the role of out of hours social work, Mental Health Officers, Mental Health liaison 		

		future rotation		roles 3. Ensure that there is a Consultant on call and available to support decision making. (This is part of workforce strategy to retain and support trainees)
Team Involved (more team members will be added as we develop these plans) - Mike Winter, Peter Fowlie, George Doherty				
Recommendation 38	Ensure statutory confidentiality protocols for children and young people are clearly communicated to all staff. The protocols should also be shared with patients and families at the outset of their treatment programme, so that parents and carers know what to expect during the course of their child's treatment.			Outcome - To develop confidentiality protocols and share with parents and carers RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Lorna Wiggin Director of Acute Services, NHS Tayside	NHS Tayside	CAMHS updated website	TBC	<ol style="list-style-type: none"> Exploration of the exact protocols referred to. NOTE- Staff undertake annual education around confidentiality (LearnPro) Develop if they do not exist and share as required to ensure an inclusive and best practice approach is applied when working with children, young people and their families. Review process and make materials available to staff and families. NOTE - CAMHS Referrer acknowledgement letters are sent out to patients and families to explain service programming and information signposting that may be useful. The CAMHS website is under development to better support and help communicate the journey of the child through the service, inclusive of signposting to other helpful resources.
Team Involved (more team members will be added as we develop these plans) - Lorna Wiggin, Diane Caldwell				
Recommendation 40	Ensure comprehensive data capture and analysis systems are developed to appropriately manage waiting lists and service users' expectations. Work should be undertaken to look at what data is available and what could be useful to inform decision making on service development/monitoring of services. This should be aligned to national reporting requirements.			Outcome - To develop metrics and outcomes around waiting times (including service users expectations) ensuring these take account of national reporting requirements RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Lorna Wiggin Director of Acute Services, NHS Tayside	NHS Tayside and HSCP for community based all waiting time targets	CAMHS Data Dash Board	June 20	<ol style="list-style-type: none"> Ensure comprehensive data capture and analysis systems are developed to appropriately manage waiting lists and service users' expectations. NOTE - Data Dash Board completed and in use. Work should be undertaken to look at what data is available and what could be useful to inform decision making on service development/monitoring of services. This should be aligned to national reporting requirements. NOTE- Aligned Data Dash Board.
Team Involved (more team members will be added as we develop these plans) - Lorna Wiggin, Diane Caldwell, Sarah Lowry, Hazel Scott				

Recommendation 51	Ensure that all external review processes are embraced wholeheartedly and viewed as an opportunity to learn and develop. Managers should ensure that all staff receive details of the recommendations from reviews and are included in the analysis and implementation.			Outcome - Culture of embracing external review to be embedded.	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Scott Dunn NHS Tayside Head of Organisational Development	NHS Tayside	TBC	TBC	<ol style="list-style-type: none"> 1. Ensure that all external review processes are embraced wholeheartedly and viewed as an opportunity to learn and develop, e.g. SLG to review the Independent Inquiry Report and share back as a Leadership Team on ‘what this report means to me’. 2. Staff review of the Independent Inquiry Report on reflection of the report to understand if there were any aspects that weren’t picked up. 3. Ensure that all reviews and action plans being created in response to the Independent Inquiry are fully engaged and visible to staff throughout the process 4. Managers to ensure that all staff receive details of the recommendations from reviews and are included in the analysis and implementation. 5. Clinical governance and risk management team to ensure that all reviews sit within existing reporting and scrutiny framework 	
Team Involved (<i>more team members will be added as we develop these plans</i>) - Keith Russell, Scott Dunn, Organisational Development					
4. Governance, Leadership and Accountability Recommendations 5, 6, 7, 9, 10					
Recommendation 5	Review the delegated responsibilities for the delivery of mental health and wellbeing services across Tayside, to ensure clarity of understanding and commitment between NHS Tayside and the three Integration Joint Boards. This should include the decision to host General Adult Psychiatry inpatient services in Perth & Kinross Integration Joint Board.			Outcome - Detail of assignment of delegated responsibility for Mental Health Functions. <u>See interdependency recommendation 13 above</u>	RAG – Amber Date – Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim Director of Mental Health	NHS Tayside	Draft Integration Schemes	Aug 20	<p>This requires a Tayside wide approach to developing the review process detailing a common service specification with common metrics and outcomes to ensure all services are adequately described, quantified and resourced accordingly.</p> <p>The Mental Health and Wellbeing Strategy Board will deliver on this.</p> <ol style="list-style-type: none"> 1. Establish the process and set up a group with representative of relevant stakeholders i.e. Integration Joint Boards (IJBs), Chief Officers (Scottish Government and Integration Unit as required) 2. Work up all relevant intelligence required – Strategic Needs Assessment 	

				Plans 4. Review current Dundee, Angus, Perth & Kinross Integration Schemes with a view to reassigning Mental Health Functions across Health and Social Care Partnerships based on population need
Team Involved (<i>more team members will be added as we develop these plans</i>) - Bill Nicoll, Chief Officers				
Recommendation 6	Ensure that Board members (NHS and Integration Joint Boards) are clear about their responsibilities, confident and empowered to challenge and make sound decisions. Review their selection, induction and training processes in preparation for their important role.			Outcome - Established roles and responsibilities of NHS Tayside Board.
				RAG – Green Date – June 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Grant Archibald NHS Tayside Chief Executive	NHS Tayside	Roles and responsibilities of Tayside MHWB SLG Board Selection, induction and training processes	July 20 Aug 20	<ol style="list-style-type: none"> Detail of roles and responsibilities of Tayside MHWB SLG Board Ensure that Board members (NHS and Integration Joint Boards) are clear about their responsibilities, confident and empowered to challenge and make sound decisions. Review their selection, induction and training processes in preparation for their important role. Use Clinical governance team to provide scrutiny and challenge to data
Team Involved (<i>more team members will be added as we develop these plans</i>) - Margaret Dunning (Board Secretary)				
Recommendation 7	Provide sufficient information to enable NHS board members to monitor the implementation of board decisions.			Outcome - Provide sufficient information to enable board members to monitor the implementation of board decisions.
				RAG – Green Date – June 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan
Margaret Dunning NHS Tayside Board Secretary	NHS Tayside	Programme Governance developed with regular reporting plan	June 20	<ol style="list-style-type: none"> Develop regular reporting which will identify current standards/new standards to inform those within the NHS Board Governance Committees and Mental Health Strategic Leadership Group (SLG) (Develop Highlight reports) Link with Business unit and governance team to provide information and context.
Team Involved (<i>more team members will be added as we develop these plans</i>) - Margaret Dunning (Board Secretary), Sarah Lowry, Diane Campbell				

Recommendation 9	Clarify responsibility for the management of risks within NHS Tayside and the Integration Joint Boards, at both a strategic and operational level.			Outcome - Risk Strategy (including risk register)	RAG – Green Date – June 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Grant Archibald Chief Executive, NHS Tayside	NHS Tayside	NHS Tayside Risk Management Strategy Corporate and IJB Risk Registers	TBC	<ol style="list-style-type: none"> 1. Establish a Risk Management Strategy on behalf of the Executive Partners to oversee the programme - including Risk Register for Mental Health 2. Discussion on the full breadth of Mental Health Services in Tayside and how that works under the four organisations, including clear responsibility for decisions. 3. Regular review of Risk Management at Mental Health Integrated Leadership Group <p><i>NOTE - Work underway with the NHS Tayside Resilience Unit- Hilary Walker, this is linked to the QPR outputs. We plan to link Clinical Governance and resilience: Not sure of overlap at present. We are working on workforce risk currently.</i></p>	
Team Involved (more team members will be added as we develop these plans) – Grant Archibald					
Recommendation 10	Ensure that there is clarity of line management for all staff and that all appraisals are conducted effectively. (Medical, Nursing, Management Leads)			Outcome - clear line management organisational charts and Personal development reviews (PDR's) for all clinical staff	RAG – Amber Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
George Doherty NHS Tayside Director of Workforce	NHS Tayside	Clear line management schematic for all clinical staff & social care staff employed by councils but working with an integrated model of care.	Aug 20	<ol style="list-style-type: none"> 1. Review organisational charts, line management arrangements 2. Detail in the Level 2 Action Plan - outlines the steps with TURAS and the progress made against it 3. Job planning for all Doctors in Mental health: Support from AMDs in other directorates to deliver this 	
Team Involved (more team members will be added as we develop these plans) – Dr Stephen Cole AMD for Appraisal, Mike Winter , Arlene Wood, Mike Winter, Keith Russell, HSP Lead officers/Diane Caldwell					

5. Culture , Engagement and Communications Recommendations 1, 21, 42, 44, 45, 47, 48, 49, 50

Recommendation 1	Develop a new culture of working in Tayside built on collaboration, trust and respect	Outcome – Staff are working in a Mentally Healthy environment and feel their Wellbeing is a priority	RAG – Amber
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				for their employers. Incorporate communication plans and workforce plan for continuous improvement approach to becoming a learning organisation (including development and learning opportunities)	
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Grant Archibald NHS Tayside Chief Executive	NHS Tayside Corporate Wellbeing Group	Communication plans Organisational Development Plan	July 20 Aug 20	<ol style="list-style-type: none"> The programme will develop communication plans that include processes of how we ensure key messages are communicated to all staff describing the response to the inquiry and the steps we will be taking to ensure a continuous improvement approach to becoming a learning organisation. This will include development and learning opportunities for all mental health staff at all levels to ensure a consistent application of values and behaviours is practiced by all. 	
Team Involved (<i>more team members will be added as we develop these plans</i>) – Peter Stonebridge, Medical Director, Claire Pearce, Nurse Director Kate Bell, Director of Mental Health, George Doherty, Director of Workforce					
Recommendation 21	Foster closer and more collegiate working relationships between the crisis resolution home treatment team and community mental health teams and other partner services, based on an ethos of trust and respect.			Outcome - To develop and embed multi-disciplinary and team based approach to joint working.	RAG – Green Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim Director of Mental Health	NHS Tayside	Workforce plan Mental Health and Wellbeing Strategy	Sept 20 Oct 20	<ol style="list-style-type: none"> Develop into the Organisational Development Plan Ensure regular professional supervision is planned for all staff with a line manager/or professional lead This work will include Management and Leadership development with all areas including Community Mental Health Services / Crisis Resolution & Home Treatment Team and Hospital Interface Work Stream Priority area for Consultant recruitment. <p>Mike Winter, Keith Russell, HSP Lead officers</p>	
Team Involved (<i>more team members will be added as we develop these plans</i>) - Johnathan MacLennan, Bill Troup – on behalf of HSCP, Scott Dunn, Arlene Wood					
Recommendation 42	Ensure all staff working across mental health services are given opportunity to contribute to service development and decision making about future service direction. Managers of service should facilitate this engagement.			Outcome – Demonstration of Staff engagement co-creation and development the service strategy.	RAG – Green Date – June 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Kate Bell Interim	NHS Tayside Organisational	Tayside Mental Health and	June - Oct	To be rolled up into the actions that are being created against Recommendation 3. This will include further developing and embedding Partnership working with trade unions as the standard	

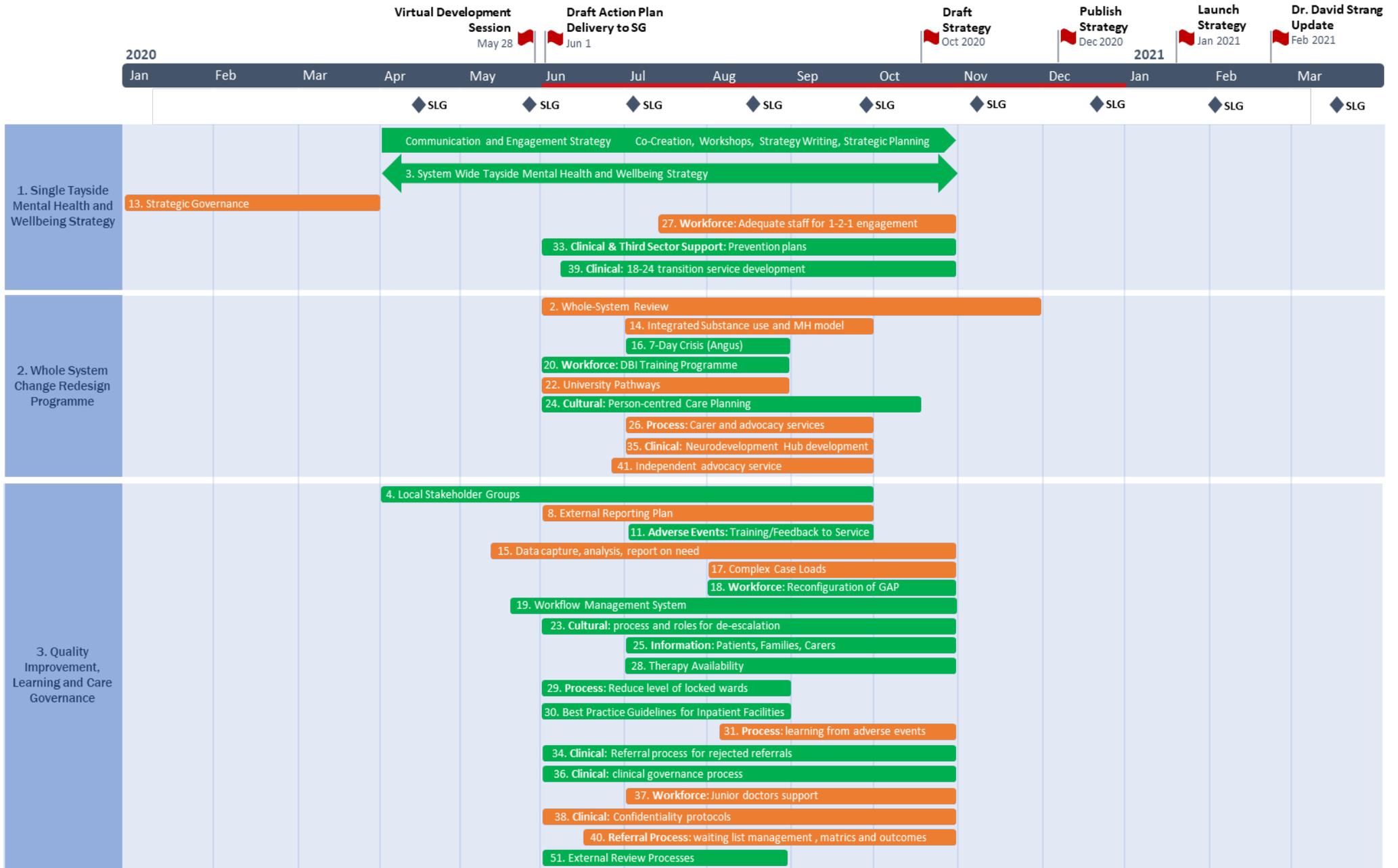
Director of Mental Health Christopher Smith	Development, HR	Wellbeing Strategy	20	employee relations model at all levels of decision making. Within this the next step would be to actively agree what and where staff would be best to contribute and how getting their input would work	
Team Involved (more team members will be added as we develop these plans) – Christopher Smith can lead – Kate Bell, Jackie Bayne, Arlene Woods, Organisational Development, Business as usual functions, Scott Dunn, Mike Winter, Keith Russell, Arlene Wood, HSP Lead officers, Diane Caldwell					
Recommendation 43	Prioritise concerns raised by staff by arranging face-to-face meetings where staff feel listened to and valued.			Outcome - Staff to be actively listened to and valued - engage in co-producing the strategy	RAG – Green Date - Immediate and Ongoing
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
George Doherty Director of Workforce	NHS Tayside, all 3 HSCPs	Process developed and agreed	June 20	<ol style="list-style-type: none"> Establish process and implement, spread and sustain Communicate process to staff and ensure staff feel valued and engaged and explore the issues with trust and identify areas for development. It was noted that this would initially be discussed at the Mental Health Strategy Board and then progressed forward by the local Partnership Forums 	
Team Involved (more team members will be added as we develop these plans) - Scott Dunn, Diane Campbell, Mike Winter, Elaine Henry, John Davidson DME for trainees					
Recommendation 44	Arrange that all staff are offered the opportunity to have a meaningful exit interview as they leave the service. This applies to staff moving elsewhere as well as those retiring.			Outcome - All staff offered exit interview	RAG – Amber Date – June 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
George Doherty Director of Workforce	NHS Tayside	Exit interview policy updated	June 20	<ol style="list-style-type: none"> Change current policy to ensure all staff leaving/exiting/retiring from Mental Health Services are offered an exit interview Exit interviews themes to be reported back to ILG and SLG for follow-up action 	
Team Involved (more team members will be added as we develop these plans) - George Doherty, HR Director					
Recommendation 45	Prioritise recruitment to ensure the Associate Medical Director post is a permanent whole-time equivalent, for at least the next 2 years whilst significant strategic changes are made to services.			Outcome - Appointment of the right medical staff and combination of medical staff to deliver the role of Associate Medical Director	RAG – Amber Date – June 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Peter Stonebridge, Medical Director, NHS Tayside	NHS Tayside	Full time compliment of Associate	June 20	<ol style="list-style-type: none"> Develop job description and advertise and appoint to this post. Promote local interest and recruit retain current medical staff to take up this opportunity Contribute to Mental Health Recruitment and Retention Plan (Drafting at present) 	

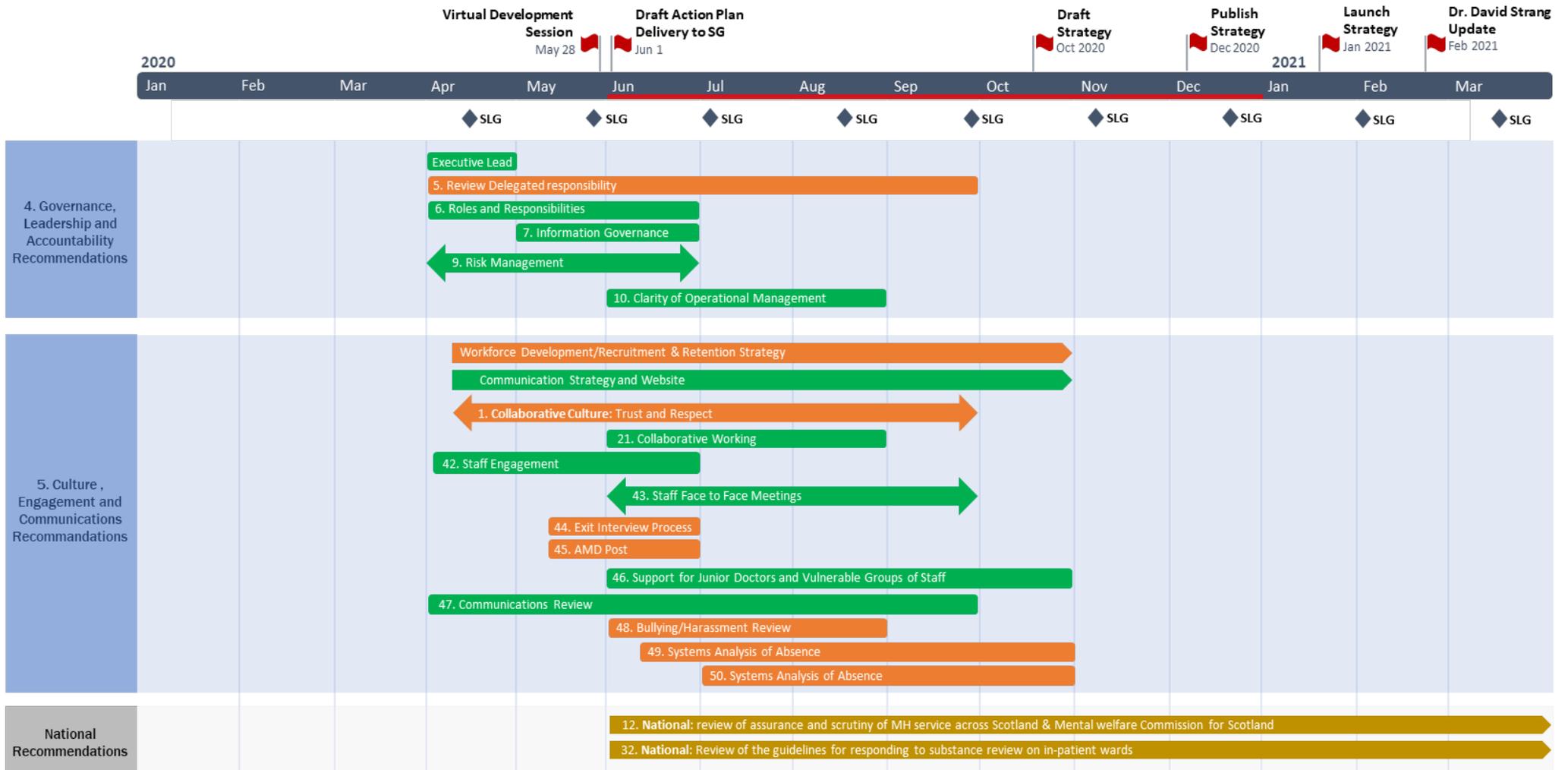
		Medical Director in post			
Team Involved (<i>more team members will be added as we develop these plans</i>) – Peter Stonebridge					
Recommendation 46	Encourage, nurture and support junior doctors and other newly qualified practitioners, who are vulnerable groups of staff on whom the service currently depends.			Outcome - To set up Current Issues RCA focus group	RAG – Green Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Mike Winter Associate Medical Director	NHS Tayside	Current Issues RCA focus group	Oct 20	<p>All NQPs in MH and LD join action learning sets for their first 12 months in post - this work has been nationally recognised and won the Innovations in Education Award at the 2019 Scottish Mental Health Nurse Forum Awards. This work is highly evaluated by participants each year.</p> <ol style="list-style-type: none"> A very detailed action plan is submitted quarterly as part of the JDC remit Nursing - Practice Development Team will set-up and review focus groups to determine root cause analysis to identify the scale of all current issues for newly qualified practitioners. To set up Current issues RCA focus group - regular report to ILG with report of themes to SLG Use Workforce board (early progress PS and CP) to develop a culture of shared learning and support and respect across all of NHS T Work with Directorate of Medical education to embed the recommendation from GMC visits and deliver a supportive training environment that makes Tayside a positive lifelong career choice 	
Team Involved (<i>more team members will be added as we develop these plans</i>) - Donna Robertson, Mike Winter, Keith Russell, Peter Fowley					
Recommendation 47	Develop robust communication systems both informally and formally for staff working in mental health services. Uses of technology are critical to the immediacy and currency of communications.			Outcome - Visible Interactive, inclusive and accessible, web based Mental Health Communications and Engagement Plan	RAG – Green Sept 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Jane Duncan, Director of Communications and Engagement, NHS Tayside	NHS Tayside	Implement dedicated web based technological approaches to communication with staff	April 20	<ol style="list-style-type: none"> Build on the excellent work achieved during COVID19 to communicate with the public and people with Lived Experience Continue to develop relevant materials to ensure people are informed across all Mental Health Services in Tayside in order to continuously improve the effectiveness of the communication platforms we currently use are. Create a micro-site for Mental Health and create Recruitment and Retention materials for all job families in Mental Health 	

		groups			
Team Involved (<i>more team members will be added as we develop these plans</i>) – Jane Duncan					
Recommendation 48	Ensure that bullying and harassment is not tolerated anywhere in mental health services in Tayside. Ensure that staff have confidence that any issues or concerns they raise, will be taken seriously and addressed appropriately.			Outcome - Training Development Plan agreed, Value Based Cultural changes embedded	RAG – Amber Date – Aug 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
George Doherty Director of Workforce	Tayside Mental Health Integrated Leadership Group	Employee Participation Group engagement validation and sign off the Action Plan	May 20	<ol style="list-style-type: none"> Mental Health Integrated Leadership Group to review the themes within the Employee Participation Group survey commissioned by David Strang for the independent Inquiry Report as a measure of success. Understand and review what discussion around bullying and harassment within all Tayside Mental Health Services are occurring at both Local Partnership Forums and within the wider context of the service. <p>Note - George Docherty – Employee Director.</p>	
Team Involved (<i>more team members will be added as we develop these plans</i>) – Arlene Wood					
Recommendation 49	Ensure there are systems analysis of staff absences due to work related stress. These should trigger concerns at management level with supportive conversations, taking place with the staff member concerned.			Outcome - Cultural change embedded	RAG – Amber Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
George Doherty Director of Workforce	NHS Tayside	Promoting, Staff MH and Wellbeing Plan agreed and approved by NHS Board and all 3 councils	Oct 20	<ol style="list-style-type: none"> Promote Attendance and Managing absence systems embedded. Creation of workforce plan to raise the profile to promote recruitment and retention. Develop ‘Leadership, Accountability, Culture, Engagement and Communications’ project. Reduce work related stress- Ensure job roles and expectations are clear and detailed in the service specification supported by strategy, and local objective setting and job plans. To implement more robust Promotion of Attendance and Managing absence systems. Communication aspects within workforce plan to include recruitment and retention chapter - raising the profile of Tayside. <p>Note - that although current SSTS system is good from reporting standpoint, it can be hard to utilise in regards to stress as it doesn’t differentiate the reason behind stress and therefore makes it harder to understand and manage work related stress.</p>	
Team Involved (<i>more team members will be added as we develop these plans</i>) – Christopher Smith, Arlene Wood, Employee Director (<i>Staff Mental Health & Wellbeing work will be led by Director of Workforce & Employee Director</i>)					
Recommendation	Ensure there are mediation or conflict resolution services available within			Outcome - Develop ‘Leadership. Accountabilitv.	RAG – Amber

50	mental health services in Tayside. These services should exist to support and empower staff in the rebuilding of relationships between colleagues, between managers and their staff, and between the services and the patients, during or after a period of disharmony or adverse event. This includes NHS Tayside's mental health services' relationship with the local press.			Culture, Engagement and Communications' project.	Date – Oct 2020
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Jane Duncan, Director of Communications and Engagement, NHS Tayside	NHS Tayside	Proposed Mental Health OD Plan to be quantified and approved by the Director of Mental Health	TBC	<ol style="list-style-type: none"> 1. Develop 'Governance - Leadership and Culture' Workstream of MHWS. 2. Set what will be achieved by when relating to the Mental Health Organisational Development Plan 3. Human Resources and the Local Partnership Forums to understand how mediation and conflict resolution services are accessed locally, what improvements can we make with the services, how do we more effectively promote the services with management and staff and how to make them more accessible to management and staff 4. Work with medical staff to build a culture of respect and trust. 5. Ensure staff are confident that they can challenge harmful behaviours. 	
Team Involved (<i>more team members will be added as we develop these plans</i>) - George Docherty/Whistle blowing champion Non-exec, Employee Director, Diane Campbell / Mike Winter / Elaine Henry for medical staff engagement					

National Recommendations 12, 32					
Recommendation 12	Conduct a national review of the assurance and scrutiny of mental health services across Scotland, including the powers of Healthcare Improvement Scotland and the Mental Welfare Commission for Scotland.			Outcome - Liaise with Scottish Government to support Tayside input to the national plans	Date - TBC
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Donna Bell Director of Mental Health	SG Mental Health Directorate	TBC	TBC	<ol style="list-style-type: none"> 1. The Quality and Safety Board to consider the lessons learned from National and local Mental Health Strategies on the need for dedicated Strategic Change capability to spread improvements 2. To consider the need for a Director of Mental Health at Board level to deliver change that results in sustainable improvement in outcomes 3. Agreement that any actions against this recommendation should be addressed by the Scottish Government. <i>(Health and Safety Quality Review from the Scottish Government)</i> 	
Team Involved <i>(more team members will be added as we develop these plans)</i> – Donna Bell					
Recommendation 32	A national review of the guidelines for responding to substance misuse on inpatient wards is required			Outcome - Liaise with Scottish Government to support Tayside input to the national plans	Date - TBC
Named Lead	Lead Organisation	Milestones	Date	Implementation Plan	
Donna Bell Director of Mental Health	SG Mental Health Directorate	Draft Framework to be established	Aug 20	<ol style="list-style-type: none"> 1. Scottish Government to consider the relationship between Mental Health, Alcohol and Substance misuse in relation to combined approaches and services 	
Team Involved <i>(more team members will be added as we develop these plans)</i> – Donna Bell					





¹[Tayside Mental Health Nursing - Standards for Person-Centred Care Planning](#)

²Advocacy services

[Partners in Advocacy in Dundee](#) has a specific remit relating to Advocacy and Mental Health for children and young people 21 and under

[Angus Independent Advocacy Project](#) supports children under 16 who have been impacted by the Mental Health (Care and Treatment) (Scotland) Act 2003.

[Independent Adovocacy Perth & Kinross](#) offers support similar to the Angus Independent Advocacy Project as above.

[Who Cares Scotland for LAC \(Care experienced\) Children](#) also work with Kinship care and LAC at home kids.

[The Clan Law Society](#) has an excellent reputation for Child Rights and offer legal support, in some areas offering a legal representative.

[The Children and Young People's Commissioner Scotland](#), particularly Bruce Adamson, who has an incredible reputation. They can be approached by individuals in respect of learning their rights and can get support from the Commissioner to challenge.

³[NHS Tayside Prevention and Management of Violence and Aggression – Restrictive Intervention Reduction Core Function Establishment Proposal](#)

⁴[Draft Mental Health and Learning Disabilities Observation Protocol](#)

For further information contact Kate Bell on kate.bell6@nhs.net

1 June, 2020 (date submitted)