Briefing for the Public Petitions Committee

**Petition Number:** PE 1716

**Main Petitioner:** Karen McKeown and Gillian Murray

**Subject:** Full review of mental health service provision across the NHS in Scotland

Calls on the Parliament to urge the Scottish Government to carry out a full review of mental health services across the NHS in Scotland, to ensure that policy and practice is delivered consistently across the country

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**Background**

Mental health problems exist on a continuum, from symptoms which interfere with emotional, cognitive or social function, to the most severe clinically diagnosed mental illnesses. Examples include common mental health problems such as depression and anxiety, and severe and enduring mental health problems, such as schizophrenia.

The exact prevalence of mental health problems is difficult to estimate, primarily due to the numbers of people who do not seek treatment, but also because of difficulties in accurately recording them in a non-acute setting. Nevertheless, the Scottish burden of disease study estimates that mental health problems are the second largest health burden in Scotland.

In the petition, the Petitioners mention two gentlemen who died by suicide and call for a number of actions to prevent cases like this happening again. The data on deaths by suicide is more complete, with 680 recorded suicides in Scotland in 2017. The following graph shows the trend in suicide rates in Scotland since 1982.
According to the Scottish Public Health Observatory, the rate of suicide has generally decreased since 1992, but the age distribution has changed, with the highest rate now found in the 35-44 age bracket.

Treatment

Treatment for mental health problems is predominantly delivered in the community by primary care professionals such as GPs and community psychiatric teams. A relatively small amount of care is now delivered in inpatient facilities.

The delivery of mental health services is for the 14 territorial health boards to decide, although there are national access standards which they must aim to meet, namely:

- **Child and Adolescent Mental Health Services (CAMHS) waiting times**
  - The standard is for at least 90% of young people to start CAMHS treatment within 18 weeks of referral. During the quarter ending December 2018, 4,523 children and young people started treatment at CAMHS in Scotland and 72.8% were seen within 18 weeks\(^1\).

- **Psychological therapy waiting times** – the standard is for 90% of patients to commence Psychological Therapy based treatment within 18 weeks of referral. In the quarter ending December 2018, 78% of people were seen within 18 weeks\(^2\).

Clinicians may also be guided by professional guidelines and standards.

The treatment of people with mental health problems is overseen by the Mental Welfare Commission. The Mental Health (Care and Treatment)

\(^1\) ISD Scotland (05 March 2019) [CAMHS in Scotland: Waiting times, service demand and workforce](https://www.isdscotland.org/Health-Topics/CAMHS/Waiting-times.html)

\(^2\) ISD Scotland (05 March 2019) [Psychological therapies waiting times](https://www.isdscotland.org/Health-Topics/Psychological-Therapies/Waiting-times.html)
(Scotland) Act 2003 gives the Commission the authority to carry out investigations and make related recommendations as it considers appropriate in a number of circumstances. These circumstances include suspected deficiencies in care and treatment.

Previous investigations conducted by the Commission have considered the care and treatment of individuals prior to suicide.

**Scottish Government Action**

In March 2017, the Scottish Government published a new [Mental Health Strategy: 2017-2027](https://www.gov.scot/). The strategy contained several ambitions. These included that access to the most effective and safe care and treatment for mental health problems should be available across Scotland and that there should be parity of esteem between physical and mental health problems.

The strategy also contained an ambition to provide safe and effective treatment that follows clinical guidelines and is accessed in a timely way. In addition, it aims to ensure appropriate mental health professionals are accessible in Emergency Departments and through other out-of-hours crisis services.

The prevention of suicide and self-harm is also being addressed in the national [Suicide prevention action plan: every life matters](https://www.gov.scot/). The action plan sets out 10 key actions with the aim to reduce the number of suicides in Scotland by 20% by 2022. These key actions include:

- Establishment of a national Suicide Prevention Leadership Group
- The creation and implementation of refreshed mental health and suicide prevention training.
- Making recommendations to service providers on differing models of crisis support.
- Developing appropriate reviews into all deaths by suicide and ensuring these are shared and acted upon.

Other recent announcements from the Scottish Government around mental health include:

- a [review](https://www.gov.scot/) of forensic mental health services, and
- a [review](https://www.gov.scot/) of mental health and incapacity legislation.

Mental health services in Tayside are also currently under review. NHS Tayside commissioned an independent review of services following 10 suicides in the region. The review is being chaired by David Strang, the former Chief Inspector of Prisons.
Scottish Parliament Action

At the start of this parliamentary session, the Health and Sport Committee undertook a short inquiry into mental health services and CAMHs.

More recently, the Public Petitions Committee commenced an inquiry into mental health support for young people and the Public Audit and Post-Legislative Scrutiny Committee considered the Audit Scotland report on children and young people’s mental health.

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20 March 2019

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