

# **MINUTES OF THE EIGHTH MEETING OF THE CROSS PARTY GROUP ON MENTAL HEALTH AND AGM ON 20 SEPTEMBER 2013 IN THE SCOTTISH PARLIAMENT**

## **1. PRESENT**

Malcolm Chisholm MSP (Convenor); Mark MacDonald MSP; Mary Scanlon MSP; James Hendry (Secretary); Alastair Cook; Billy Watson; Lynda Wallace; Tom Jennings; Eileen Hone; Thomas Byrne; David Wright; Martin Bell; Iain Freer; Martin Adam; Chrys Muirhead; Frances Simpson; Steve Platt; Jude Clarke; Hunter Watson; Steven Friel; Jo Anderson; Seonaid Stevenson; Joe Morrow; Magda Czavnecka; Steven Platt; Luke Jeavons and Mandy Reid.

### **In attendance**

Rebecca Middlemiss (Minutes)

## **2. APOLOGIES**

Apologies for absence were received from: Anne-Marie Barry; Mark Renn; Andrew Muir; Nick McFadyen; Belinda Hacking; Karen Addie; Richard Simpson MSP; Shirley Young; James Kiddie; Gwenn McCreath; Dorothy Carroll; Susan Donnelly; Fiona Forbes; Faye Keogh; Peter Glissov; Margaret Ross; Cath Logan; Brian Magee and Shane Buckeridge.

## **3. MINUTE OF THE MEETING HELD ON 23 May 2013 (previously circulated)**

The minutes of the meeting held on 23 May were accepted as an accurate record of the meeting.

## **4. MATTERS ARISING**

Hunter Watson noted that there are changes forthcoming to the Mental Health (Scotland) Act and that this should be considered as a possible topic for future meetings.

Malcolm Chisholm confirmed that the next meeting is to be held jointly with the CPG on Health Inequalities. A criterion for selecting future topics is forthcoming and this will be discussed at the next meeting. It may be that changes to the Mental Health Act are relevant as they are in the new legislative programme.

Mary Scanlon pointed out that amendments to the Adults with Incapacity Act would be a helpful topic to cover.

## **5. PRESENTATIONS**

Malcolm Chisholm Introduced the presentations and confirmed the presentations are to coincide with National Suicide Prevention Week.

“Two Too Many” – Campaign on Suicide Prevention run by the Scottish Association for Mental Health. The speakers were Mr Billy Watson (Chief Executive, SAMH) and Lynda Wallace.

The presentation given by Billy Watson is attached.

Lynda Wallace gave a presentation detailing the experiences that she and her family had when her son Craig committed suicide in 2011.

Following the presentations Malcolm Chisholm thanked both speakers for contributions which were informative and comprehensive. He then invited comments from the group.

Jude Clarke stated that it had been a privilege to hear Lynda speak and pointed out that there can be issues of confidentiality around young people who have suicidal thoughts and whether GPs should reveal information to parents. There are also issues around support given to families.

Billy Watson confirmed that there is lots of information available to families. Much of the information given out would be signposting people to other organisations and he recognises there is a need to ensure that the capacity is there for support to be provided. Thus far developments have been largely policy driven and in future the delivery of support needs to be more collaborative and there is a need to improve the dissemination of information. On issues around confidentiality patients can ask for information to be shared. The critical incident review into Craig’s treatment recognised that there had been a lack of reading of case notes and that open discussions in hospital would have prevented this. This is a message that needs to get across to health professionals.

Lynda Wallace noted that confirmed that Craig had been on a waiting list for Cognitive Behavioural Therapy but that none had come up and that secondary care cannot refer patients to psychological therapy from acute therapy. When in the family room at the hospital a nurse had put post it notes with information for support services on the table and walked away, this had caused the family much anger and frustration.

Mary Scanlon commented that this issue has been on the agenda for a long time and she is dismayed at the lack of support that was given and that their experience of Choose Life had not been good. Mary Scanlon went on to ask if there has been a 17% reduction in suicide rates and how do rates in Scotland compare with other countries.

Billy Watson confirmed that Northern Ireland now has the worst suicide rates and that Scotland, on average is now in line with European levels.

Steven Platt confirmed that Scotland until last year had the highest suicide rate in the UK and that this has now been taken over by Northern Ireland. Europe wide Scotland is now average but England and Wales are both much lower than average.

On the presentation by LW SP noted that what she was describing when talking about her son was someone who was severely depressed and asked whether the GP had suggested some kind of pharmacological treatment. He noted that it is unlikely the CBT would have been of benefit without this. Treatment in general is sub-optimal and that there needs to be a focus on early intervention.

Lynda Wallace confirmed that Craig had been started on Citalapram two weeks before his death.

Steven Platt asked Billy Watson what the target groups for the campaign were. He noted that the focus of that campaign had been ABC-1 even though suicide is higher amongst those in lower socio-economic groups and men.

Billy Watson confirmed that the campaign sought to address responders and that the ABC-1 group are more likely to be decision makers in the house and pick up on changes in behaviours. The campaign target audience was communities and was designed to initiate a community response. There are plans to start a campaign focussed on lower socio-economic groups and men and this will be rolled out in the next 3-4 years.

Chrys Muirhead commented that she has three sons who have all been through the psychiatric system all of whom have encountered problems with a diagnosis. CM asked BW what money had been raised through the campaign and noted that many of Lynda Wallace's points were about the system and the campaign should encourage improvement.

Billy Watson confirmed that the cost of the campaign was £200,000, there were 12,000 potential donors identified but that this was not intended to be a fund raising campaign.

Joe Morrow thanked Lynda Wallace and Billy Watson for their presentations and commented that this is important work at a political and social level. The task ahead is really about the history of mental health services provision and he very much welcomed the opportunity to debate these issues. What is required is an open forum where messages can go out to a wider audience.

Hunter Watson commented that there are scales of depression and that in this kind of situation the appropriate questions are not being asked.

Linda Wallace responded that in the Critical Incident Review it was reported that two mental health assessments were started and not completed.

James Hendry thanked Lynda Wallace for coming and for sharing her story. As someone who is responsible for managing and providing mental health services hearing of the family's experiences had been deeply uncomfortable. JH confirmed that Critical Incident Reviews and Fatal Accident Inquiries do have an effect on organisations and the individuals involved. The question is where to go from here, is it about awareness or is it about interventions.

Billy Watson commented that there is a policy report forthcoming from the Scottish Government Suicide Prevention Strategy Group and that this will determine where the support goes. He noted that the Government don't have all the answers, they don't own this issue and that communities and individuals also own the issue. Efforts need to be coordinated and funded. He recommended that the group should make time to review the publication.

Mark McDonald MSP commented that he is one of the younger people in the room but that he and a number of others his age have been affected by suicide and experienced loss. He noted that there have been reductions but that the numbers are still very prevalent. The Health and Sport Committee have been holding an enquiry to look at health inequalities and this issue fits in to that agenda. Income inequalities and links to improving the lives of people in general apply across all income groups and this issue should be fed in to that.

Malcolm Chisholm confirmed that the next meeting of the group is to be held jointly with the Cross Party Group on Health Inequalities.

David Wright commented that he had been struck and moved by his involvement in a recent missing person's campaign. His experience was that the compassion and interest in this issue are high and he commended the SAMH campaign.

Jude Clarke commented that it seems that the issue is that mental health services are too hung up on diagnosis. There could be an assets approach where mental wellbeing is not just about a diagnosis.

## **6. ANNUAL GENERAL MEETING AND ELECTION OF OFFICE BEARERS**

The Minutes of the previous AGM held in September 2012 were accepted as accurate. Malcolm Chisholm will continue as Convener of the group. Mary Scanlon MSP and Mark Mc Donald MSP were elected as Co-Conveners of the group. The Royal College of Psychiatrists will continue to provide the Secretariat for the group.

## **7. REQUESTS FROM ORGANISATIONS TO JOIN THE GROUP**

The group approved the membership of Scottish Health Action on Alcohol Problems and Roshni.

Hunter Watson commented that the group Psychiatric Rights Scotland would like to be recognised as formal members.

## **8. ANY OTHER COMPETENT BUSINESS**

Mary Scanlon suggested that possible future topic for the group could be to invite Alex Neil MSP and look at getting in to work and remaining in work. People who get in to work have less contact with mental health services.

Seonaid Stevenson from Roshni thanked Lynda Wallace for her powerful presentation. Roshni is an organisation who addresses issues which affect minority ethnic communities in Scotland and is committed to creating services that will ensure improved outcomes for minority ethnic community members. This includes mental health services. Seonaid Stevenson will keep the group informed as they will be running roundtable events looking at the mental health of ethnic communities.

Magda Czarnecka from FENICKS advised the group that they are an organisation who provide therapeutic help for the Polish community. They are dealing with more and more requests for support from people who avoid other support due to problems with communication. This can be a problem when accessing services and has a greater impact on lower socio-economic groups. The impact on ethnic groups is increasing and that there should be more language translation services to assist in removing barriers to accessing services.

## **9. DATES AND TIMES OF FUTURE MEETINGS**

### **5<sup>th</sup> December 12.30 CR 4 – Jointly with CPG on Health Inequalities**

A further date in September 2014 (also for the AGM) would be agreed and sent round as soon as possible.