

Minister for Mental Health  
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NHS Board Chairs and Chief Executives  
IJB Chief Officers  
Local Authority Chief Executives  
Local Mental Health Services Leads

1<sup>st</sup> May 2020

Dear All,

### **Covid-19 – Mental Health Services - Principles**

We all share the same desire that safe and effective mental health services continue to be provided for those who need them during Covid-19. As Health leaders we have made it clear that the NHS is open and that anyone who needs treatment should continue to access it as and when they need it, especially when delays could pose both an immediate and long term risk to people's health. It is my expectation that this message also applies to mental health services.

The Cabinet Secretary on 17<sup>th</sup> March in Parliament, referring to sections 1 and 78 of the National Health Service (Scotland) Act 1978, placed the NHS on an emergency footing for three months. I wrote to NHS Boards Chief Executives on 27<sup>th</sup> March about mental health services and support for staff wellbeing during the pandemic. I asked for contact details for mental health leadership teams. I asked to be kept informed of significant changes to mental health services.

I now write to offer a set of Principles that build on existing Mental Health Act Principles, which will be familiar.

This guidance is designed to support active local decision making and promote consistency to provide safe, person-centred and effective service responses for people using NHS and local authority social care services during Covid-19 mobilisation. I would ask that the Principles are used to guide considerations of any changes to care and/or treatment for all patients under the care of the NHS or who may be accessing local authority directly provided, or externally commissioned mental health services. For the most part however this is operational advice which will be relevant for those managing waiting lists and referrals.

It is likely that further guidance or advice will issue from the Scottish Government in this period as we respond to questions from local services and as we enter next stages including recovery.

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I wish to thank you for the ongoing positive engagement at this time and I hope this information is helpful.

If you have any questions relating to the content please speak to Luska Jerdin in the Scottish Government Directorate for Mental Health in the first instance. Luska can be contacted at [Luska.Jerdin@gov.scot](mailto:Luska.Jerdin@gov.scot)

*Clare Haughey*

**CLARE HAUGHEY**

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## The Principles

These Principles are provided for use within the context of the COVID-19 pandemic and are effective for the same period.

The purpose is to:

1. remind Health Boards and Local Authorities of guidance, including the Mental Health Act Principles, already in place which will help guide decision-making at this time.
2. provide advice on a number of operational questions relating to mental health services which have arisen since 27<sup>th</sup> March.

NHS Boards and local authorities are rightly currently prioritising their service offer on the basis of responding to risks and needs, with consequent changes to services, staff and accommodation.

During the Covid-19 pandemic, clinical community and hospital services must continue in response to people whose mental health and wellbeing are at particular risk and/or in crisis, including where changes in arrangements for the provision of care and treatment would lead to unacceptable risk and detriment. The Cabinet Secretary has advised that waiting times standards for CAMHS and Psychological Therapies apply during this period. However Performance and Improvement activities have been paused during the pandemic. The Mental Health Services team will write to each NHS Board summarising the progress reached in development of Annual Operation Plans and the point from which Performance and Improvement activities will recommence when normalisation arrangements are in place.

Rapid service transformation opens new possibilities for service improvement over time, particularly through the use of technology where that meets patient need. Scottish Government's Mental Health Team will do its utmost to support everyone in this rapid transformation.

There will be many questions in relation to the implications of COVID-19 where there are no clear right or wrong answers. It is useful to be reminded of the existing frameworks which help at this time. People should be treated with dignity and respect and should expect their human rights to be protected at all times. It is important that changes are implemented in a person-centred way wherever possible.

When considering decisions where there are no clear right or wrong answers, it is helpful to consider if what is being proposed is:

- Reasonable
- Proportionate
- Justifiable

It will also be important that we optimise public mental health and safeguard the wellbeing and resilience of staff by following relevant Staff Governance Standards and the principles of the Fair Work Convention's Fair Work Framework.

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## Existing Guidance

It is advised that the Adults with Incapacity Guidance and other relevant guidance in circulation such as the Health and Social Care Standards should be used to guide all considerations of treatment and care for all people.

These include:

### **The ten principles of the Mental Health (Care and Treatment) (Scotland) Act**

<https://www.gov.scot/publications/mental-health-care-treatment-scotland-act-2003-code-practice-volume-1/pages/2/>

### **Learning Disabilities and Autism Spectrum Disorder Clinical Guide**

<https://www.sclد.org.uk/wp-content/uploads/2020/03/Managing-patients-with-ID-FINAL.pdf>

### **The Health and Social Care Standards**

[http://www.newcarestandards.scot/?page\\_id=15](http://www.newcarestandards.scot/?page_id=15)

In addition the following advice applies:

## RESPONSIVE

### **New referrals triage and support:**

- For all new referrals to mental health services there should be contact with the patient and/or family and carer to discuss their situation. This should be carried out wherever possible by phone or secure videoconference.
- This contact should either identify those patients who need a prioritised assessment or facilitate signposting and self-help, optimising the full range of Digital Services available.
- Referrers should be informed about the outcome.
- Patients who meet the local criteria for assessment should be offered an assessment appointment as soon as possible via telephone or secure video conference (e.g. Near Me).

### **Waiting Lists:**

- The Cabinet Secretary has confirmed that the Treatment Time Guarantee set out in the Patient Rights (Scotland) Act 2011 has not been suspended at this time.
- A letter was sent on 17<sup>th</sup> March to boards from Malcolm Wright, Director General Health and Social Care and Chief Executive NHS Scotland, clarifying the approach to waiting list management and saying that waiting lists will be maintained and managed throughout this period. This avoids detriment to patients as a result of Covid-19 Pandemic and helps us maintain a true picture of the wider impact of Covid-19. **This statement applies to all waiting lists, including mental health waiting lists for Psychological Therapies and CAMHS.**
- The Minister for Mental Health requests that patients on the waiting list (and where appropriate their families) are kept informed of their situation.

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- This is important at all times but is particularly important now as services have been reprioritised, people's needs may have changed and because of the general level of increased anxiety and stress during the Covid-19 Pandemic.
- Thought should be given to the new circumstances brought by COVID-19, including on those shielding, and other vulnerable groups who are being asked to self-isolate. Mental health services may wish to give consideration to targeting of any underutilised mental health and clinical psychology support to take account any deterioration in the mental health of those in the shielding and self-isolating groups.
- **Health Boards in conjunction with HSCPs are therefore asked to provide the Scottish Government with their existing policies for managing waiting lists, and additionally describe what they are doing during the Covid-19 pandemic emergency period.**
- A reminder of the usual arrangements for management of waiting lists:
  - Those waiting the longest should be contacted first;
  - Those contacted who meet your services local priority criteria for assessment should be offered an appointment – during the Covid-19 pandemic, via Near Me video link) and provide any treatment required;
  - Anyone contacted who does not your meet criteria for assessment, should be offered advice, information and online support, including digital services, but also reminded that they should re-contact the service in the future if their needs change.

## INCLUSIVE

### Non-discrimination and Equality

- The public sector equality duties apply. Treatment must be fair and equitable with no discrimination; importantly this includes those people who are affected by Covid-19.

### Vulnerable Groups

- Additional care should be taken with people who are vulnerable at this time.
- Service users with specific needs should be particularly considered. For instance those with a learning disability, neurodevelopmental disorder or dementia who may not understand and/or have difficulty accessing or complying with Scottish Government Covid-19 guidance.
- All SG Covid-19 guidance can be found at <https://www.gov.scot/collections/coronavirus-covid-19-guidance/>

## NEEDS LED

### Efficient caseload management

- Prioritisation of the existing caseload must be based on clinical assessment of need.
- Some people will require increased contact and support, whilst others may experience a reduced or adapted service based on need. This should be explained to people and their family/carers.

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- Your continuity plans will prioritise those who receive care and treatment. Care and treatment must comply with the health guidance provided by The Scottish Government during the Covid-19 Pandemic.

## SAFE

### Minimisation of infective risk

- Face to face therapeutic contact should only occur where there is no telephone or video alternative, or where the required service cannot be delivered other than face to face (e.g. emergency assessments, physical monitoring, and intensive home support).
- Face to face contact should follow Scottish Government's Chief Medical Officer and Chief Nursing Officer clinical guidance <https://www.gov.scot/news/protecting-our-frontline-staff>, and Health Protection Scotland's guidance on PPE <https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/>, and provision of the necessary equipment must be provided for staff.
- Inpatient transfer between wards and hospitals must be minimised.
- People should be assessed and treated in the community wherever possible. <https://www.gov.scot/publications/coronavirus-covid-19-clinical-advice/>

## COLLABORATIVE

### Partnership between Services

- Every opportunity for collaborative working between services should be taken to maintain the integrity of whole system mental health service provision.
- Multidisciplinary and cross sectoral working should be maximised to ensure effective decision making processes and good quality, consistent service delivery.
- NHS and HSCP Mental Health leadership teams should ensure that they include local authority and relevant mental health organisations in their communications about any changes to mental health services in their area.

### Escalation

- Health Boards and local authorities (working closely with third sector providers) must have an effective and robust COVID escalation of concerns procedure.
- The Scottish Government must be advised about any critical issue that would prevent the delivery of basic safe service continuity.
- Service Providers are directed to collectively and timeously report concerns and their response to the Scottish Government Mental Health Services Team at [COVID19MentalHealth@gov.scot](mailto:COVID19MentalHealth@gov.scot)

## INVOLVEMENT

### Listen to and support family/carers

- The family or carers will have a wealth of information about the individual and how they have been and how best they can be supported.
- Carers' views should be taken into account, recorded and responded to.

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## DATA COLLECTION

### Psychological Therapy and CAMHS waiting times data collections to continue

- Cabinet Secretary has confirmed that there will be no suspension of the Treatment Time Guarantee during the Covid-19 outbreak and waiting lists should continue to be managed throughout this period.
- Psychological Therapies and CAMHS waiting times data are independently collected and quality assured by ISD, (now part of Public Health Scotland). The CAMHS publication is classified as National Statistics. Advice from ISD was sought regarding the feasibility of continued data collection during the Covid-19 crisis.
- NHS Boards are asked to continue to submit data for CAMHS and Psychological Therapies as normal.
- The next publication release is due in early June and is scheduled to include January to March information.
- ISD will review data quality after the March submission and provide detailed caveats with any analysis.

## WORKFORCE

- As employers NHS Boards and local authorities will wish to both optimise public mental health and safeguard the wellbeing and resilience of staff at this time.
- Employers will already have local arrangements in place to support staff wellbeing. It is vital that these support structures are updated in the context of Covid.
- Employers should also be signposting colleagues to support they can access, including through trade unions and professional bodies.
- We ask that mutual aid approaches are taken across health and social care services in order to ensure equity of access.
- It will also be important to be transparent about what and how support is being provided, if fast track pathways for staff are provided to mental health/wellbeing support, this should be articulated openly within the context of decision making about available Mental Health and wellbeing support for both the public and staff.
- The Minister for Mental Health has a specific remit within Scottish Government for health and social care workforce wellbeing; organisational wellbeing champions have been identified via NHS Chief Executives, IJB Chief Officers and Local Authority Chief Executives to support this agenda.

**If you have questions about this paper please contact:**

[COVID19MentalHealth@gov.scot](mailto:COVID19MentalHealth@gov.scot)

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