

Scottish Government Response to the Independent Review into the Delivery of Forensic Mental Health Services

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Ministerial Foreword



In March 2019, the former Minister for Mental Health, Clare Haughey, commissioned an independent review into the delivery of forensic mental health services chaired by Derek Barron, Director of Care at Erskine.

I want to take this opportunity to thank Derek Barron and his team for their hard work, dedication and resilience in bringing the final report together during a global pandemic.

Patients in the forensic mental health system are among the most marginalised people in our society. Forensic mental health services are highly specialised and assess, treat and risk manage people with significant complex needs. Services must be designed to provide readily accessible, high quality clinical care in Scotland within a level of security that is the least restrictive alternative whilst keeping our wider communities (including those who provide this care) safe.

Over the past decade, there has been a shift in emphasis: the number of patients being treated at the State Hospital has been in decline, medium secure services are provided in the North, West and East of the country, and there have been developments in low secure and community service provision. The review has been an opportunity to recognise the work of these services, understand the issues across the whole system, and take a strategic view to improve our services for patients, families, carers, staff and the public.

I very much welcome that the review took a rights based approach. The Millan Principles - which underpin mental health legislation in Scotland - are throughout the recommendations of the review and equality is at the forefront of recommendations about service change.

It is right that the review focussed on low secure and community services. These are provided and managed locally and whilst they are a very small part of any large Health Board or Health and Social Care Partnership, they are crucial to the system of forensic mental health care.

The recommendations emphasise participation of service users and respect for carers. The Scottish Government considers these to be important not only in service provision but in service improvement and reform. I would like to take this opportunity to express my thanks to all those who met with the review team or who contributed, especially those with lived experience, their families and carers.

The Scottish Government welcomes the Independent Review final report and its recommendations. The report is thoughtful, considered and provides a good basis for collaborative working that can bring forensic mental health services together in a way that works for patients, families, carers, clinicians and the public.

Scottish Government Response to the Independent Review Recommendations

This paper represents a formal Scottish Government response to the Independent Review into the Delivery of Forensic Mental Health Services, and should be read in conjunction with the final report of the Independent Review [Independent Forensic Mental Health Review: final report - gov.scot \(www.gov.scot\)](http://www.gov.scot). The Independent Review sets out recommendations in themes and the Scottish Government response is similarly framed. The themes are:

Strategic governance and oversight - recommendations 1&2
Women's pathways - recommendations 3&4
Capacity and transitions - recommendations 5-21
Person-centred practices - recommendations 22-42
Specific populations - recommendations 43-58
Sharing information and expertise - recommendations 59-67

The response to each recommendation indicates the Scottish Government view on the recommendation and what the next steps will be.

The Scottish Government is committed to a collaborative and inclusive approach to inform future reforms and to working with partners to take forward recommendations. The Scottish Government will support work that will deliver improvements for patients, carers and families and to ensure recognition of forensic mental health services as an invaluable part of health provision in Scotland.

Whilst recognising that a range of partners will be involved in the delivery of the changes needed, this approach illustrates the commitment of the Scottish Government to addressing the issues raised by the Independent Review.

Theme One: Strategic Governance and Oversight - Recommendations 1 & 2

Recommendation 1. It is recommended that a new NHS Board should be created for forensic mental health services in Scotland.

The Scottish Government agrees that change is needed. The potential for negative impacts on patients as described by the Independent Review must be addressed with urgency to ensure our forensic mental health services are fit for purpose. We must do more collectively to support people we care for, including improving transitions that may be delayed by reasons of procedural blockages or service capacity. While the need for change is clear, we recognise that there remains a range of views on the best way to address these problems, including the possible creation of a new NHS Board for forensic mental health services in Scotland, as described by the Independent Review.

We agree with the Independent Review that all services must prioritise person-centred practices underpinned by a commitment to upholding human rights. With this as a starting point, the Scottish Government will work in collaboration with service providers and those with lived experience to explore a full range of options for governance, strategic change and increased partnership working across the forensic mental health landscape.

The Scottish Government will establish and lead a short life working group, bringing together our key stakeholders, to agree a clear plan for addressing the recommendations of the Independent Review that will deliver increased support for planning, collaboration and improvement of forensic mental health services in Scotland.

The Scottish Government emphasises that the group will not revisit the work of the Independent Review. On the contrary, recognising the extensive input to the Independent Review from those with lived experience, carers and professional groups, the short life working group will consider how best to bring forward the change that is needed. Change is essential, for the reasons clearly set out in the Independent Review final report. This short life group will be strictly time limited, with an expectation of its work concluding early in 2022.

Recommendation 2. The definition and purpose of 'forensic mental health services' should be reviewed by the Scottish Government at a multi-disciplinary, multi-agency level to help inform the establishment of the new Forensic Board.

The Scottish Government agrees that it is timely to review the definition of forensic mental health services. This will be part of the remit of the short life working group considering an improved governance, planning and collaboration approach for forensic mental health services in Scotland.

Theme Two: Women's Pathways - Recommendations 3 & 4

Recommendation 3. A high secure service for women should be opened in the State Hospital within nine months of the publication of this Review.

Recommendation 4. The Short Life Working Group set up in response to the Forensic Network's report on the Women's Service and Pathways should reform to complete its work related to women's pathways across medium secure, low secure and community forensic settings.

The Scottish Government agrees that high secure mental health care provision for women is needed in Scotland. However, the timescale proposed is unrealistic for the establishment of a safe, person centred service. We will support the creation of a ward within the State Hospital as an interim solution and we will continue to work with the State Hospital Board and its management team to develop this resource in a way that will support longer-term provision and improvement across women's forensic mental health services aligned to the response to recommendation 4.

The Forensic Mental Health Managed Care Network (Forensic Network) is making arrangements for the Short Life Working Group to reform. The Scottish Government considers that the remit of the group should continue to include national, regional and local planning for services for women. Planning for a long term solution for high secure provision in collaboration with the interim service at the State Hospital will be an important part of improving women's pathways in forensic mental health services.

Theme Three: Capacity and Transitions - Recommendations 5 - 21

Data Collection and Reporting

Recommendation 5. The Scottish Government should commission the Information and Statistics Division (ISD) of NHS National Services Scotland to develop a data management system to accurately collect, monitor and report on performance across forensic mental health services, including on service capacity and the timeliness of people's transitions.

The Scottish Government recognises the importance of good quality data and information in managing services, transitions and in improving the quality and performance of services. We will work with Public Health Scotland, the Forensic Network and providers of forensic mental health services to assess what is needed in data management systems, in the context of work to improve the availability and quality of performance and outcomes data in all mental health services.

Information and Statistics Division (ISD) is now part of Public Health Scotland. The Forensic Network is conducting a review of data currently collated to consider gaps or information that may be helpful for services in future.

Pressures on Medium Secure Services

Recommendation 6. NHS Greater Glasgow and Clyde plans to extend medium secure provision at Rowanbank Clinic should be progressed.

The Scottish Government will maintain close awareness of NHS Greater Glasgow and Clyde's progress on the business case developed in 2019 for extension of medium secure provision as part of monitoring the capacity across the forensic estate.

Recommendation 7. The data management system developed for forensic mental health services by the Information and Statistics Division (ISD) of NHS National Services Scotland should collect, monitor and report delays incurred by people assessed as ready to transfer to a different level of security. Any delay of four months or over must be reported to the Scottish Government.

We will work with Public Health Scotland, the Forensic Network and providers of forensic mental health services to assess what is needed in data management systems, in the context of work to improve performance and quality outcomes data in all mental health services.

Delays Affecting Discharges into the Community

Recommendation 8. The data management system developed for forensic mental health services by the Information and Statistics Division (ISD) of NHS National Services Scotland must collect, monitor and record delayed discharges in a way that is as transparent as data collected in the acute (physical health) sector.

Scottish Government agrees that definitions and recording of delayed discharges requires reform to assist with improving patient flow through secure mental health services. We will work with Public Health Scotland, the Forensic Network and providers of forensic mental health services to assess what is needed in data management systems, in the context of work to improve performance and quality outcomes data in all mental health and social care services. Learning from existing data management systems will be an important part of this work.

Recommendation 9. The management bodies of all forensic mental health services must identify anyone waiting for accommodation or support packages in the community to the extent that their discharge from these services - or their eligibility to start the process towards conditional discharge - has been delayed for six months or more.

Recommendation 10* The new Forensic Board must work with social work teams and local authority housing departments to ensure that the commissioning process in each area provides appropriate support services and accommodation options for people with the need and risk profiles typical of individuals within the forensic mental health system.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Recommendation 11*. The new Forensic Board must work with social work teams and local authority housing departments to develop an accommodation strategy that ensures individuals have access to community accommodation.

The Scottish Government will work with territorial Health Boards, Integrated Joint Boards and Local Authorities to ensure that suitable accommodation and support packages are in place to address delayed discharge of patients and to work on an accommodation strategy for people leaving forensic inpatient services. Scottish Government is currently progressing work to improve delayed discharge data pertaining to forensic inpatients.

Recommendation 12. Commissioners of community support and accommodation services should ensure that remuneration for people working in these services reflects the complexity of the forensic cohort and the need to retain skilled staff.

The Scottish Government supports this recommendation in line with our commitment to promote Fair Work.

Recommendation 13. We recommend that people in low secure units should be given the right to make an application to the Tribunal where they are being detained in conditions of excessive security.

Recommendation 14. A legal duty must be put on a relevant authority to provide appropriate accommodation, services and support for people who are due to be discharged from a secure hospital into the community. The Review considers the relevant authority should be the local authority.

The Scottish Government will give thorough consideration to amending the primary legislation so as to develop an appeal process against excessive security conditions for patients detained in low security. However this work must be cognisant of the recommendations of the Independent Scottish Mental Health Law Review.

The Scottish Government agrees ensuring that people who are approaching readiness to leave inpatient forensic mental health care can access appropriate accommodation, services and support promptly is vital to their successful reintegration into the community.

There are already legal duties on local authorities in the Mental Health (Care and Treatment) Scotland Act 2003 and the Scottish Government will work in collaboration with service providers and those with lived experience to explore why these existing duties are not sufficient and develop any necessary changes to legislation. However, legislative change is only one available route to improve provision of care in the community. It is therefore important that we work with local authorities to explore a range of ways in which this could be achieved.

Recommendation 15. The Scottish Government should review with clinicians in both inpatient and community teams, as well as MAPPAs and police representatives, the current discharge planning process for restricted patients to identify any aspects that can be streamlined while continuing to protect the public

and supporting the best chance of a successful and sustainable discharge for people.

The Scottish Government is taking forward a programme of reviewing all of the processes and procedures for restricted patients. The aim of this review is to ensure all processes and procedures are as effective and efficient as possible. This will include the discharge planning process. All of those involved in the process will have the opportunity to be involved with the completion of the review expected by December 2022.

Recommendation 16. The update of the Scottish Government’s Memorandum of Procedure on Restricted Patients should be available in an accessible format to increase transparency around the processes and the flexibility within it, and the role of Scottish Ministers more generally. This work should be prioritised.

The Scottish Government is taking forward a programme of reviewing all of the processes and procedures for restricted patients. The Memorandum of Procedure will be revised as part of this programme. This is an iterative process and chapters of the Memorandum will be made available after each process is reviewed.

The complete Memorandum will be available when the review programme has concluded. Scottish Government expects the updated Memorandum of Procedure to be accessible to any interested person and for there to be regular updating of guidance in the future.

Recommendation 17*. The Scottish Government and the new Forensic Board need to identify funding to ensure that no one leaving forensic inpatient services has to go into debt for housing costs to complete overnight stays to accommodation as part of their required pre-discharge plan.

The Scottish Government agrees that no-one should be in debt because of housing costs incurred as part of their pre discharge plan from forensic inpatient services. We will work with Integrated Joint Boards, Health Boards and Local Authorities to facilitate pre-discharge plans and to address underlying financial challenges

Community Forensic Mental Health Teams

Recommendation 18*. The new Forensic Board should define the service remit of Community Forensic Mental Health Teams (CFMHTs).

The Scottish Government agrees that community provision is a crucial component of the forensic mental health system and the principle of providing least restrictive care. In the Coronavirus (COVID-19): mental health - transition and recovery plan we committed to supporting the collaborative development, implementation and

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

assessment of quality standards for mental health services. The Forensic Network is gathering information on current provision as a starter for this work.

Recommendation 19. CFMHTs should be appropriately resourced based on future projected demand as bottlenecks in low and medium secure services are eased.

The Scottish Government will write to all territorial Health Boards and Integrated Joint Boards to establish capacity planning mechanisms for community provision.

Prison Issues

Recommendation 20. The data management system developed for forensic mental health services by the Information and Statistics Division (ISD) of NHS National Services Scotland must be able to collect, monitor and report on transfers and delays to transfers into forensic mental health services from prisons.

The Scottish Government recognises the importance of good quality data and information in managing services, transitions and in improving the quality and performance of services. We will work with Public Health Scotland, the Forensic Network, Scottish Prison Service and providers of forensic mental health services to assess what is needed in data management systems, in the context of work to improve performance and quality outcomes data in all mental health services.

Recommendation 21*. The system of multiple assessments to facilitate transfers from prison should be reviewed with the aim of streamlining the process to the benefit of the person in need of forensic inpatient services. At the latest this should be reviewed by the new Forensic Board, however the Review considers that this could be reviewed sooner than that.

The Scottish Government agrees that this work should begin as a priority to examine and address the extent and causes of multiple assessments. We will work with the Forensic Network and other partners to understand the causes and work on solutions to improve the system of assessment and admission for the benefit of persons in need of forensic inpatient services. A plan to move toward an 'admission first' approach for persons who need treatment in a mental health setting and there is disagreement on level of security or location of service is needed. The aim should be to ensure that admissions to forensic mental health inpatient services are not delayed.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Theme Four: Person-Centred Practices - Recommendations 22-42

Care and Treatment

Recommendation 22. There should be an equality of esteem between the professions in a high functioning forensic mental health service. This should be evidenced in practice and language used.

The Scottish Government agrees that the strength and success of forensic mental health services is in their multi-disciplinary nature and the value that each profession and role brings to the team. For our part, in working with partners to take forward these recommendations we will ensure that there is an equality of esteem in the way that we work with different professions.

Recommendation 23*. The new Forensic Board should consider how best to fund social work posts embedded within the multi-disciplinary teams (MDTs) in forensic mental health services, in order to maximise interdisciplinary working.

The Scottish Government recognises the vital role Mental Health Officers (MHO) play in providing forensic mental health services and in supporting patients' treatment and recovery. As a range of MHO delivery models currently exist, we will work with territorial Health Boards, Integrated Joint Boards, Local Authorities and social work professional bodies to explore the relationship between funding posts and interdisciplinary working.

Recommendation 24. People should be supported to participate as much as possible in decision-making about their care and treatment. Staff should proactively involve people in both formal and informal conversations about their care. Staff must communicate in a style that best enables people to understand what is happening and to voice their opinions.

Recommendation 25. Staff should proactively inform people about their right to request a copy of information held about them. People need to be supported to make such requests if desired and to express their wishes about what information they receive and how this is communicated to them.

Recommendation 26. General information and advice for people within the forensic mental health system should always be provided in accessible formats, including Plain English and Easy Read versions. Staff should ensure that any additional information required to ensure a person's understanding and ability to participate in decisions about their own care and treatment plans are converted to such formats as required.

The Scottish Government notes that mental health legislation sets out that service providers must offer information and support. This is to enable patients and their carers to take part in decisions about care and treatment and consider the views of the patients, family members and carers when agreeing a care plan.

It is fundamental to person centred care for people to be supported to participate as much as possible in decision-making about their care and treatment. This

includes accessible information both about individual care and general information and advice.

We will write to Health Boards to ascertain how they ensure that people using forensic mental health services are supported to participate.

Recommendation 27. Each unit within the forensic mental health system must appoint a named staff member as a Carer's Contact. This person must have received training in carer's rights and have sufficient knowledge to answer a carer's initial questions and signpost them to further information and support services.

The Scottish Government agrees that a named staff member in each unit within the forensic mental health system is beneficial as an addition to the contact that carers have with the clinical team.

Recommendation 28*. The new Forensic Board should be funded to establish an advocacy service for forensic carers. This service will provide expert support to help carers navigate the forensic mental health system, represent their views and find satisfactory resolution to complaints.

Recommendation 29*. The new Forensic Board should work in collaboration with existing carer organisations and advocacy services to develop a) information targeted at new forensic carers, and b) information and training for organisations supporting forensic carers.

The Scottish Government agrees that information and support for carers should be improved. We will work with Health Boards, Health and Social Care Partnerships and Local Authorities to engage existing carer organisations and advocacy in improving support for carers.

Recommendation 30*. Until such times as the new Forensic Board is formed, individual Health Boards should put in place a system to reimburse travel expenses of those family members (or other carers) who have to travel to visit a person receiving forensic mental health services out of area. Once established, the new Forensic Board should continue to ensure financial support is in place.

The Scottish Government will explore with Health Boards, Health and Social Care Partnerships, Local Authorities and carer organisations to establish what support can be available to carers and families visiting a person receiving forensic mental health services out of area.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Recommendation 31. Where a person receiving forensic mental health services has indicated their consent, family members (or other carers) should be actively supported to take part in the Care Programme Approach process and their opinion recognised as that of an expert by experience. As part of this, their availability should be taken into account when scheduling these meetings.

Recommendation 32. Where a person receiving forensic mental health services has indicated their consent, family members (or other carers) should be proactively informed by the clinical team whenever a change is made to the person's care and treatment.

Recommendation 33*. The new Forensic Board and people receiving forensic mental health services and their family members (or other carers) should co-design informal and formal feedback processes that address the specific vulnerabilities of these groups in the forensic system.

The Scottish Government agrees that it is important for patients, family members and carers to be involved in the care and treatment provided and support should be given to enable participation. Each forensic mental health services should therefore work to improve involvement and engagement of family members and carers in the care and treatment of patients. Further, using the work of the Forensic Carer Forum and Carers Coordinators group, both supported by the Forensic Network, examples of best practice should be highlighted, shared and built upon to improve engagement and participation of family members and carers.

Recommendation 34. The Scottish Government should re-inforce the use of its guidance on transferring Suspension of Detention plans (SUS) issued in 2018 with clinical teams and identify any ongoing barriers (clinical, administrative or cultural) prior to refreshing and reissuing to all clinical teams, as part of its ongoing update of the Memorandum of Procedure on Restricted Patients.

The Scottish Government is taking forward a programme of reviewing all of the processes and procedures for restricted patients. The Memorandum of Procedure will be revised as part of this programme. In the meantime we will re-issue the guidance on transferring suspension of detention plans and will ensure that consideration to transferring plans is given in all cases where Scottish Ministers' approval to transfer is required.

Recommendation 35. At pre-transfer Care Programme Approach meetings, it must be made clear to the person that the option to transfer existing SUS is available. Reasons for not carrying SUS forward should be clearly discussed with the person. Their own obligations for ensuring that their SUS is carried on as planned once transferred must also be clearly explained.

The Scottish Government agrees that clear information about suspension of detention plans (SUS) must be provided to the person and to receiving services at pre-transfer Care Programme Approach meetings, so that existing SUS plans can be continued wherever possible following transfer.

Social and Environmental Conditions

Recommendation 36. The poor state of repair of current inpatient environments, including outside space where it is provided, should be addressed by individual Health Boards to ensure they are therapeutic spaces which demonstrate a value being placed on the people detained there.

Recommendation 37. Evidence-based design of therapeutic environments should inform the planning stages of all renovations and new developments within the forensic estate.

Recommendation 38. Everyone subject to detention within the forensic inpatient services should have their own single room.

The Scottish Government agrees that the physical environment in which forensic mental health care is provided is important, both in terms of supporting recovery and the dignity of all who live, visit and work in these environments. This is particularly prevalent for those patients who receive long-term treatment within the forensic mental health care system.

Many inpatient services were built within the last twenty years but routine maintenance, redecoration and replacement of furnishings will become ever more important in the years to come, as these environments age. We will work with Health Boards, the Forensic Network and others to prioritise work to assess and improve physical environments in the forensic estate.

Recommendation 39*. The new Forensic Board should, under the direction of the Nurse Director, establish multi-disciplinary 'Best Practice' standards to guide least restrictive practices. These must have the principle of person-centred practice at their core and should be applied consistently across all forensic inpatient settings.

The standards must include guidance around enabling people to: access privacy to support relationships with family and friends; access bedrooms; access personal belongings; and, access technology – this should be accompanied by staff training to ensure they can confidently support a positive risk approach to technology.

The Scottish Government agrees that quality standards for forensic mental health services have an important role in ensuring consistency of care and least restrictive practice. In the Coronavirus (COVID-19): mental health - transition and recovery plan we committed to supporting the collaborative development, implementation and assessment of quality standards for mental health services.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Recommendation 40. The Scottish Government should respond timeously to the Technology and Communications Group’s updated report, which the Review hopes will reflect an enabling, rather than a risk averse approach in its recommendations.

The Technology and Communications Group’s updated report has been received by the Scottish Government and is currently under consideration. We will work with the Forensic Network and others to take forward its recommendations as appropriate.

Recommendation 41. The Scottish Government, together with forensic mental health services, should monitor the availability of placement providers to ensure there are sufficient available to support the rehabilitation of people in forensic inpatient services and to sustain them for people discharged back into the community.

Recommendation 42. The Scottish Government should re-engage with Allied Health Professionals to finalise their draft guidance aimed at supporting people with criminal convictions and mental health conditions into work, volunteering or education.

The Scottish Government agrees that placements, work, volunteering and education are essential elements of recovery and rehabilitation. We will engage with forensic mental health services and with Allied Health Professionals to take forward these recommendations to improve availability and facilitate guidance.

Theme Five: Specific Populations - Recommendations 43-58

People with Learning Disabilities

Recommendation 43. There must be a presumption that people with a learning disability who are accused of an offence will be supported to go through the criminal justice system. They should only be diverted to hospital where this has not been possible.

Recommendation 44. The Scottish Government should commission a study to examine the experiences of offenders with a learning disability compared with offenders in the general population and offenders with a mental illness

Whilst decisions on procedure and disposal are for independent courts, the Scottish Government agrees that people with learning disability who are accused of an offence should be supported. We have provided funding for Supporting Offenders with Learning Disabilities (SOLD), a third sector organisation which aims to ensure that nobody in the justice system is at a disadvantage because they have a communication support need. Work includes a “Practice Guide for Defence Solicitors in Scotland: representing clients with communication support needs” and a short life working group to improve the identification of those with communication support needs in police custody.

In addition, the Scottish Government will commission a study drawing on current literature and the experiences of offenders with a learning disability, those with mental illness and offenders in the general population

Recommendation 45. Low secure and community forensic learning disability services should be managed under the local Health Board/Health & Social Care Partnership generic learning disability services. This arrangement should be reviewed within 3-5 years of the new Forensic Board being established.

Recommendation 46. The new Forensic Board should collaborate with generic learning disability services to develop appropriate standards for forensic learning disability services.

Recommendation 47. In areas without forensic learning disability services, generic learning disability services should be supported to embed professionals with forensic training and expertise within their workforce.

Recommendation 48. The new Forensic Board should establish mechanisms to provide consultation, advice, and professional supervision for all staff involved in the care and treatment of people with learning disabilities who have forensic needs.

The Scottish Government agrees that collaboration between forensic and general services is needed to put the needs of people with learning disability at the forefront. We consider that alignment with the ongoing work to implement the recommendations of the Coming Home report [Coming home: complex care needs and out of area placements 2018 - gov.scot \(www.gov.scot\)](http://www.gov.scot/coming-home-report) is crucial to achieve best outcomes for people with learning disability.

Recommendation 49. Health and Social Care Partnership commissioners must ensure community accommodation can be adapted to meet the sensory and other needs of people with a learning disability.

Recommendation 50. Health and Social Care Partnership commissioners must ensure that people with a learning disability have a choice about whether to move into single person or communal accommodation in the community.

The Scottish Government agrees that community provision is a crucial component of the forensic mental health system and the principle of providing least restrictive care. Accommodation is an important part of community provision, and we agree that it must be fit for purpose and meet the needs of people with learning disability.

People with Neurodevelopmental Disorders

Recommendation 51*. The new Forensic Board should undertake a needs assessment related to neurodevelopmental disorders and forensic mental health services. This should inform future service provision.

The Scottish Government agrees that any planning for future service provision must be based on needs assessment. Patients with neurodevelopmental disorders will be included in the work to define forensic mental health services that will be carried out by the short life working group. As part of this work, the group will also consider models of needs assessment, planning and provision linked to forensic mental health services.

Children and Young People

Recommendation 52. The Review recommends that the National Secure Adolescent Inpatient Service does not fall under the remit of the new Forensic Board. This position should be reviewed within 5 years of the National Secure Adolescent Inpatient Service opening to ensure this continues to provide the best pathway for young people.

The development of the National Secure Adolescent Inpatient Service is underway. Additional to the remit of the short life working group previously outlined, the group will also consider the relationship of forensic mental health care to new services.

Recommendation 53. The National Secure Adolescent Inpatient Service should set up a service to provide access to forensic specialist expertise for local CAMHS teams to support clear pathways into and out of the National Secure Adolescent Inpatient Service.

The National Secure Adolescent Inpatient Service will work closely with regional CAMHS Specialist Pathway Hubs which are being established to ensure access to specialist expertise for CAMHS teams as well as support clear pathways into and out of NSAIS.

Recommendation 54*. A clearly defined pathway should be agreed between the new Forensic Board and the National Adolescent Secure Inpatient Service for young people who do need to transition to adult forensic mental health services.

The Scottish Government considers that work to establish suitable transition arrangements between services will be part of the specification for the new National Adolescent Secure Inpatient Service. We recognise that transitions for children and young people are known to increase risks, particularly for the most vulnerable. The Scottish Government published the Transition Care Planning Guidance in 2018 which describes the standards required in the planning of robust transitions for young people moving from CAMHS to Adult Mental Health Services.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Recommendation 55. Clear interim arrangements need to be put in place for young people in Scotland who require forensic or learning disability inpatient facilities prior to the National Adolescent Secure Inpatient Service facility being opened. This should be actioned by the end of 2021.

The Scottish Government agrees that interim arrangements are needed for young people who need forensic or learning disability inpatient facilities whilst the National Adolescent Secure Inpatient Service is developed. This includes recruitment to build knowledge and expertise in staffing capacity, which will allow phased introduction of specialist services.

Older Adults

Recommendation 56*. The new Forensic Board should make an assessment of age-related needs across all forensic mental health services and, based on current and projected demand, develop an older adults' pathway that reflects the care and risk management needs of this group.

Recommendation 57*. The new Forensic Board should conduct an assessment of staff training gaps around the age-related health needs of older adults, particularly around dementia, and make provisions to improve staff skills and confidence in this area.

The Scottish Government agrees that a needs assessment is required to understand the changing needs of the aging population, pathways and services including within the community, in the context a changing Health and Social Care landscape. This needs assessment will include a consideration of the training needs of existing services. Part of the remit of the short life working group considering an improved governance, planning and collaboration approach for forensic mental health services in Scotland will be to consider models of needs assessment, planning and provision.

Northern Ireland

Recommendation 58. The Review recommends that the State Hospital introduces charges for the care and treatment of people from Northern Ireland. These costs should be benchmarked against the costs incurred by NHS Scotland for the high secure care and treatment currently provided to women from Scotland at Rampton Hospital.

The Scottish Government will work with the State Hospital Board for Scotland both in understanding the historical reasons for the current system and in moving to a system of charging for high secure care provided to patients from Northern Ireland.

Theme Six: Sharing Information and Expertise - Recommendations 59-67

Sharing Information About People Receiving Forensic Mental Health Services

Recommendation 59*. The new Forensic Board should have a single electronic health records system. All staff in forensic mental health services should use the system and the Board should ensure that staff have access to technology of an appropriate quality to support their work.

Recommendation 60*. The new Forensic Board's single electronic health records system should include a facility to clearly record where a person does, and where a person does not, consent to their information being shared with family members and certain partner organisations.

Recommendation 61*. The new Forensic Board should develop a procedure for sharing information with external organisations, to support consistent practices across forensic mental health services that balance the rights of the individual and the protection of the public.

The Scottish Government will make information sharing part of the remit of the short life working group considering an improved governance, planning and collaboration approach for forensic mental health services in Scotland. The group will also consider the feasibility and benefits of one system being used by all forensic mental health services.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Provision of Forensic Mental Health Expertise to External Agencies

Recommendation 62*. The new Forensic Board should develop a consistent way of providing consultation and advice to MAPPAs and other external individuals or organisations (including other NHS services) that may benefit from access to forensic mental health expertise. The Scottish Government should work with the new Forensic Board to ensure that this consultation and advice service is adequately funded.

The Scottish Government will make consultation and advice to partner organisations part of the remit of the short life working group considering an improved governance, planning and collaboration approach for forensic mental health services in Scotland.

Recommendation 63. The Scottish Government should bring together the NHS, the Scottish Courts and Tribunals Service and the Crown Office and Procurator Fiscal Service to agree an appropriately funded national framework to ensure the timely provision of court reports by psychiatrists and psychologists for assessment and sentencing purposes. This should be actioned within one year of the publication of this report.

Recommendation 64*. The Scottish Government, together with the new Forensic Board and the relevant criminal justice agencies, should review the current limitations about which disciplines can complete court reports. They should consider what professional qualifications and training are necessary for the completion of these reports, including whether a change of law is required.

The Scottish Government recognises the issues and difficulties raised by the Independent Review with regard to provision of court reports. We will work with partners in Criminal Justice and in Health and Social Care to consider solutions. An early task will be to consider the steps required and a realistic timescale for change.

Research, Education and Training

Recommendation 65*. The new Forensic Board must support the work of the School of Forensic Mental Health to continue developing and progressing education, training and research activities within Scotland's forensic mental health services.

The Scottish Government continues to support the work of the School of Forensic Mental Health in developing and progressing education, training and research in forensic mental health services in Scotland.

* This recommendation refers to a new Forensic Board having responsibility. See response to recommendation 1

Recommendation 66*. Working with the School for Forensic Mental Health and wider stakeholders, the new Forensic Board should set evidence-based standards for staff skillsets and training, that include best practice in caring for and treating people with a learning disability.

The Scottish Government recognises the value of highly skilled staff working in forensic mental health services and will continue to support the School of Forensic Mental Health in improving the standard of training.

Recommendation 67*. The new Forensic Board should work with community providers and partner agencies to develop skilled staff teams who are confident and empowered to provide support, including positive risk taking, to people from forensic mental health services.

The Scottish Government agrees that sharing skills and knowledge of those working in forensic mental health services will be invaluable to community providers and partner agencies.

Next Steps

The work done by the Independent Review to understand and describe the delivery of forensic mental health services from a range of perspectives make its findings and recommendations invaluable. The Independent Review highlights specific areas for change and identifies where provision can be developed and improved. It provides a strong foundation for working toward a forensic mental health system that delivers for today and for the future as the health and social care landscape changes.

A short life working group to consider the options for a new governance, planning and collaboration approach for Forensic Mental Health Services in Scotland will first meet in November 2021.

The short life working group will not aim to revisit the work done by the Independent Review. Instead they will use the contributions from that broad range of perspectives, including from those with lived experience, contained within the published reports to consider how best to set an approach to achieve the strategic change needed to address and implement the findings and recommendations of the Independent Review.

The work of this group will not seek to unnecessarily delay work to implement other recommendations and operational decisions and service developments need not wait for the outcome of the work of the group. Arrangements for an interim high secure facility for women to be opened at the State Hospital site at Carstairs will be taken forward with a view to providing this service in Scotland from 2022.

The Scottish Government is committed to working in partnership to design and deliver the programme of work and to adopt a collaborative, inclusive approach to develop solutions and to deliver improvement and reform. A programme plan will be developed and shared with detail on timescales, interdependencies and priorities for change.

The Scottish Government will look to bring forensic mental health services together with other partners in a way that delivers improvement for patients, families, carers, clinicians and the public. We recognise the dedication of the people who have contributed their thoughts, insights and experience to the Independent Review and look forward to continuing to work with them to address the findings and recommendations.



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