

Gillian Martin MSP Health, Social Care and Sport Committee The Scottish Parliament Edinburgh EH9 ISP

Via email - Gillian.Martin.msp@parliament.scot; hscs.committee@parliament.scot

09 December 2022

Dear Ms Martin,

We wish to highlight our concerns to the Committee regarding the Scottish Government Mental Health Directorate's proposal that all mental health services, bar secure forensic services, move to the National Care Service. We have provided detailed feedback outlining the issues to the Directorate and wish to also bring these to the attention of the Committee members.

The RCPsych in Scotland has substantive concerns about the impact the current proposals will have around patient safety and care, as well as recruitment and retention of the current workforce, and the lack of detail available.

It is critical that mental health is viewed in parity with physical health. Separating these two further by creating a new service in which mental health would sit will only cause further stigma and create greater inequalities between mental and physical health. Research has consistently shown that individuals with severe and enduring mental ill health die 10-20 years earlier than the general population. Moving mental health services to the National Care Service erects a barrier between mental and physical health, to the detriment of patients in both services.

There is risk that using a "Getting It Right for Everyone" (GIRFE) approach overlooks the specialist needs of people with severe mental illness. This group's needs can only be met within specialist services. We would strongly recommend that, from the outset, a clear definition and understanding of what mental health care and treatment is and who provides it is needed prior to any structural change. Psychiatrists are doctors bound by medical confidentiality with both legal and ethical responsibilities to patients. Within any change of structure, medical confidentiality would need to be assured. Along with this, a new structure needs to ensure clear governance for clinicians to ensure those with severe mental illness remain clinically (mentally and physically) safe. Specialist mental health care is complex and requires access to specialist expertise to understand and monitor quality and safety effectively.

Finally, major structural change, coupled with a perceived removal from the National Health Service to an already stigmatised workforce, carries a high risk of negatively impacting recruitment and retention at a critical juncture, with detrimental consequences for patient care and outcomes. Nationally, almost 1 in 4 consultant posts in psychiatry do not have a fully trained, substantive consultant in post. We fear that this will only get worse with a move to the National Care Service.

Meaningful change is needed now, rather than after a complex and complicated transition to new structures. It is counter intuitive and risky to cut investment in mental health services at a time of immense need while diverting funds to a large-scale structural change whose benefits are at best

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uncertain. The proposals for the National Care Service also do not address the fundamental issue of decades of underinvestment in mental health services and diverting much needed and scarce resources towards structural change will only make this situation worse. The disruption that a whole system reorganisation would cause to services that are already at breaking point poses real and tangible risks to the safety of the people who depend on these services.

The mental health workforce is struggling to cope with current demands on services and winter pressures and is therefore unable to commit time in responding to consultations. This means that the good intention to engage in genuine co-design will not actually be achieved. Our members will be unable to contribute essential information which would allow the government to shape new structures effectively.

In conclusion, the RCPsych in Scotland believes that time needs to be given for these discussions and we would encourage the Scotlish Government to allow for this.

Please do not hesitate to contact me should you wish further information on any of these points.

Yours Sincerely,

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Dr Linda Findlay

Chair of the Royal College of Psychiatrists in Scotland