Mental Health Services Inquiry
Scottish Association for Mental Health

SAMH
SAMH is the leading mental health charity in Scotland and is dedicated to mental health and wellbeing for all. SAMH provides both direct services and an independent voice on all matters of relevance to people with mental health and related problems.

SAMH has over 80 services throughout Scotland which address a range of individual needs including supported housing, home support, crisis support, training, employment and structured day services. Our services support people who have experience of mental health problems and other forms of social exclusion including homelessness and addictions.

The SAMH Centre for Research, Influence and Change promotes the development of legislation, policy and practice that is based on the real life experiences of people with mental health and related problems and respects their human rights. The Centre also provides an information service, offering general mental health information and specialist legal and benefits advice. Both the Centre and the wider organisation are committed to challenging the stigma and discrimination experienced by people who live with mental health problems.

GENERAL COMMENTS
SAMH is pleased that the Scottish Parliament Health Committee intends to undertake an inquiry into mental health services in Scotland. One in four people in Scotland will experience a mental health problem at some point in their lives, and so it is essential that services are there to provide early support. However, we consistently hear that provision of services is patchy: there are examples of excellent practice, but also far too many instances where people are unable to access the services they require.

Given that Audit Scotland is about to embark on a review of mental health services in Scotland, it is important to ensure that these two pieces of work complement rather than duplicate each other.

SAMH believes that the most pressing issue in mental health services at present is the effect of the Scottish Government budget with its removal of ring-fencing from the Mental Health Specific Grant and Supporting People. At a recent SAMH Members’ Forum, SAMH members, who are primarily other voluntary organisations, told us that even at the beginning of April, their budgets were not finalised and they were facing cuts in income. Events in Aberdeen suggest that there is a real danger of mental health services suffering from cuts in their budgets. Some of our members say that for several years, they have been using their own funds and reserves in order to continue to provide services. This is clearly not sustainable and will lead to the eventual loss of services.
Research commissioned by the Scottish Government indicates that only 14% of voluntary organisations practice full cost recovery on all contracts. The research also found there is a significant degree of subsidy of service delivery by the voluntary sector, and went on to say,

“The impact of subsidising the shortfall implies that the financial health of the organisations is suffering as a result of not receiving the full costs of service provision. As this could undermine longer term sustainability, this raises a broader set of questions about the wider impact on vulnerable people and deprived communities, especially given that these are the target clients and areas for many voluntary organisations.”

Additionally, service users at our recent Members’ Forum felt that the increasing focus on value for money above other criteria could lead to a situation where value takes precedence over quality in commissioning services. This is counter-productive and clearly undesirable.

Since the beginning of the Budget process, SAMH has been consulting its members on the likely impact on their services. Their feedback has included the following,

“Everything is uncertain when it comes to resources for mental health services.”

“Local Authorities are unlikely to afford mental health any priority; rather they are more likely to invest in areas which would be more popular with the electorate, such as improving council housing.”

“Whilst the Mental Health Specific Grant was originally intended to pump-prime services, which would eventually be funded by the local authority, the reality has long been that MHSG is an essential long-term funding stream. Without MHSG many services would not be able to function. We fear that that there will be a disproportionate emphasis on funding statutory support for people with severe and enduring illness and away from preventative services and those promoting recovery and social inclusion.”

We do not yet know how the importance of mental health will be reflected in the Single Outcome Agreements which are to be agreed with local authorities. Mental health should be seen as a vital component of general health, and not as secondary to it. However, it is easier to create measurable outcomes for services for people who need a high level of support than for services that make less obvious contributions to mental health. There is therefore the possibility that only high risk groups will be covered by Single Outcome Agreements, leading to a focus on these groups to the detriment of work on prevention and promotion.

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1 Report on costs and impacts of the implementation of the principle of Full Cost Recovery in the public sector contracts with the voluntary sector, February 2007
SAMH believes that the Health Committee’s inquiry should focus on the impact of the move to Single Outcome Agreements and decentralised budgets on the mental health services available across the country. This would be valuable in constructing a national picture to enable the Committee to judge the progress that is being made towards a mentally flourishing Scotland.

SAMH will be pleased to contribute further to the Health Committee’s inquiry once the topic is settled.

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