



LOCAL ISSUES IN MENTAL HEALTH ACROSS NHS HIGHLAND

May 2008

Introduction

Every year HUG holds four rounds of meetings across its network involving members from HUG Branches across the Highlands. These meetings are held in Drop in centres, Tag units, peoples' homes and the local hospital. We also hold a joint meeting with Acumen in Argyll.

At these meetings we discuss a topic which our members have selected earlier. This is turned into one of our reports which we use to influence policy and services.

However we also provide an opportunity to discuss any issues our local members feel are important. In some branches there is a wealth of issues to bring up and in others very little.

For the last year, instead of trying to act on every issue, we have compiled them into 'Local issue reports' such as this one. We raise some of these issues at the Mental Health Network Group, the Mental Health Operations group and some at the inpatient forum in New Craigs.

This report is sent to members of the above groups and is also posted on our website.

Some of the issues that our members raise will have been dealt with by the time the report is published and some affect only a small number of people. However we do think that this sort of report provides a valuable snapshot into what is important to our members at any one time.

East Caithness

- What do we do if we do not get on with a worker from the Community Mental Health Team, especially when we find communication difficult?
- We need to be encouraged and helped to feel good about ourselves not constantly told what we are doing is wrong.
- We still need help if we are emotionally distressed but not formally diagnosed as mentally ill.
- We want to be sure of the future funding of TAG.
- We can be very damaged if our children are taken from us because we have mental health problems.
- Young carers need support and may themselves develop mental health problems.
- There is a need for good quality information for young carers.
- We have in the past used the Wick High school swimming pool for a swimming group. This was a great opportunity to get out together and get exercise. We can no longer use the pool. It would be good to be sure of a secure and appropriate alternative.
- If a mistake is made with our benefits we are expected to repay the difference even if we have done everything we should do to report our circumstances. The consequences of having to cope with mistakes

with our benefits can make us feel like giving up on it altogether as it is too stressful to deal with.

- We are very anxious about the changes to Incapacity Benefit. We know of people being classed as 'fit for work' who we all know are not fit to do work at all.

West Caithness

- We do not like the diagnosis "Borderline Personality Disorder" and would like to see another less stigmatising name for this condition.
- We are very worried about Incapacity Benefit changes. This benefit is vital to many of us.

East Sutherland

- We need to be sure that the Gatehouse will be kept in a good state of repair for TAG and drop in clients.
- We cannot smoke outside the Gatehouse. There should be a shelter we can use. Standing on the edge of main road, especially in winter, is not a good idea.
- HUG should try to find some way of advertising local community activities that people can join in with.
- Creative expression is a good activity as well as a valuable therapy.
- Photography is too.
- The craft group run by NSF is also very good.
- It would be good to have information about local activities but we do not always feel comfortable about joining in with mainstream ones and when we hear that people have occasionally felt unwelcome in such places we can feel reluctant to join in. However it would be good if information on such activities is made more widely available.
- It might be good if HUG could provide mental health awareness training for local community groups so that they feel more comfortable about involving us and we feel more comfortable with them.
- There is still a lot of stigma in the local community particularly among older people.

East Ross

- We are worried about the future of HUG. Is it secure?

Mid Ross

- Sometimes emotions are seen as signs of illness, sometimes we are just happy and need this respected.
- We do not always get enough information about our medication.
- Our carers often do not understand why we do what we do.
- Some carers do not have our best interests at heart and may benefit if we are sectioned.

- Some carers decide what we need rather than respecting what we think we need.
- The Phoenix Day Hospital's future is uncertain; we believe it may close but there are a lot of rumours. It would be good to know for certain what is really happening.
- We are sometimes not believed when we are ill.
- Sometime when we are in hospital we worry that some of the staff play 'mind games' with us. We do not like this.
- We need to pick up on physical problems such as our thyroid glands malfunctioning and not being picked up on.
- When we are given medication they should clearly tell us what the dosage is, what it is called and what it will do.
- The food in New Craigs is good despite what other people say
- We should be left alone by nurses in New Craigs if we want this.
- There is not much to do in hospital.
- The Incapacity Benefit changes are very worrying even though a few of us have gained from them.
- We may be tempted to try to live without benefits, but we end up ill so often when we try to work that we need this reality respected by others.
- We are worried about the changes to bus passes.

New Craigs Hospital

- We need to get nurses out of the nursing stations and they need to interact with patients more.
- The fact that we all have single rooms may mean that we need more nurses on the ward than in hospitals that use dormitories.
- We sometimes get mixed signals from nursing staff. Whose advice and guidance should we take?
- The food could be better. Its quality could be improved.
- There is little to do on the weekends.
- There is not enough occupational therapy.
- Discharge plans are not always discussed from the time we are admitted.
- There are not enough one to one sessions offered and some people can wait a long time to get them.
- What training do the people who work in voluntary organisations have? Do they have enough skills to do the jobs they do?
- Some of us could do with help to prepare CV's and list our skills as part of the process of moving on in recovery.
- There is a long wait to get access to psychology.
- There is not enough access to counselling services. Some people can get this via their GP and others cannot, depending on where they live.
- Counsellors may not have an expertise in mental illness but there are psychiatric nurses with an expertise in counselling who could be further encouraged to use these skills.
- There can sometimes be a lack of follow up for those using Braeside and delays in being referred to it.

- When we need to speak to people we may be very wary of doing so. It is important that when we chose to be open with people that the response reassures us that it was ok to speak with them.
- We should review the psychiatric facilities that are available in the community.
- It would be good to have access to writers' groups.
- It would be good to have opportunities for mental recreation.
- Are the services offered by community education accessible to people with a mental illness?
- Doing crafts can be very therapeutic.
- It would be good if there were more self help groups.
- Transport to New Craigs can take a long time to arrange, especially from more distant parts of the Highlands.
- More information could be provided on the wards and some of the information that does exist is out of date.
- It can take a number of referrals before people get to use the gym.
- We worry that the bi polar group at Cairdeas Cottage may have closed.
- We need local beds and places of safety in local communities.
- Not everyone feels comfortable going to Drop-in centres. Some people worry that they will be looked on with suspicion if they are very well dressed and very articulate.
- We should promote access to complementary therapies.
- We need to improve access to email and the internet in New Craigs.

Inverness

- How do people change their psychiatrist if they do not get on with them? How do we let people know of their rights about this?
- How are psychiatrists overseen and supervised. How can we trust a professional body to supervise itself?
- Some of us feel that it is very hard to believe that we are really listened to.
- Sometimes the gossip among fellow patients in hospital about other patients is both widespread and damaging. How do we curb this?
- Some of us would really benefit if we could occasionally have a holiday.
- How can we be sure when we are visited by the Mental Welfare Commission that they really listen to us?
- When we are seen as ill some of us worry that what we see as reasonable complaints are dismissed as illness.

Nairn

- It would be good to have a rights officer based in New Craigs.
- It would be good to have access to quick benefits advice in New Craigs, especially as we approach discharge.
- The Links building which has replaced the Gardeners Cottage is a fantastic place and a great improvement. The only things we would like more work done on is the kitchen and maybe making a hatch between

it and the sitting area. It would also be good if there was some provision made for smokers.

- Some of us live in council accommodation but physical disability makes staying there hard to manage. It would be good to let family members who grew up in our homes to take them over when we move out to more appropriate accommodation.
- When we are forced to take medication because we are on long term sections and yet are subject to very bad physical side effects from the medication we can become disillusioned with our care.

Lochaber

- We are very worried about the changes to Incapacity Benefit. Having our benefits taken away and being expected to get into work with two weeks notice after being unemployed for many years can be devastating. Being seen as potentially fraudulent is insulting. We believe that doctors responsible for medicals, are rewarded if we are taken off of benefit and this is not acceptable if it is true.
- The Community Mental Health Team and its Manager in particular are very good. They need to be reminded of this often.
- What happened to the psychiatric emergency plan? We are not sure we get enough prompt help in crisis.
- It would be good to have access to local beds as an alternative to New Craigs
- It would be good to have access to a safehouse as has been talked about for so many years.
- We need to be sure that there are regular checks on our physical health and activities to promote good physical health.
- We need to be sure that we promote recovery and general well-being.
- We need better access to talking therapies.
- We need to celebrate the small steps we can all make to a better life.
- We need to be sure that general medical staff take the physical health of people with a mental illness seriously.
- In rural areas it can be very hard to access services if you live out of the main population centres.
- We can find it hard to travel to get to services and to other facilities away from our homes if we have to rely on public transport.
- We worry about the changes we are facing over free bus passes.

Argyll

- Participation. In a rural area such as Argyll it can be very hard for users and carers to attend meetings to discuss policy issues. Public transport is not an easy way of travelling to meetings and the cost makes a difference. Equally at actual meetings, people need to feel supported and valued.
- We need to provide more support to Oban Mental Health Forum. It is a small group but with a lot of potential. However the small size of it can make it vulnerable.

- The 'One Step Up Drop in' is still open which is very welcome even though its future is insecure. It is under review and the results of this are looked forward to. The emphasis in this review on recovery ideas is also good.
- Placing leaflets about mental illness in the general hospitals and G.P. surgeries. These venues often seem reluctant to stock such leaflets. This is disappointing though the presence of leaflets about breathing space at a variety of venues is good.
- We worry that some GP's find it hard to deal with the behaviour of people with mental health problems. Especially if they are in crisis.
- We worry that many health related information displays are often untidy and carry out of date leaflets. It would be good if there were people with a specific responsibility to keep such displays up to date.
- A time when we have a special need for information is at the time of diagnosis. At this point we need verbal information backed up with other information that we can take away to help us understand what has been said. We need people to be aware that we can need this information to be repeated.
- The stigma of mental illness is still a big issue
- It would also be good if information could be provided on what the different professionals we deal with do.
- There is very little help for those people with mild to moderate mental health problems. This is wrong. There are also a lot of people who need help who may not even have seen a G.P.
- How can we help people understand what is happening to them and why if they don't have insight to their condition?
- Having diagnoses that change from year to year can be a problem.
- It would be good to have access to information that is more detailed and informative than that provided in information leaflets
- We need to recognise the links between physical illness (such as pain) and mental illness
- We need to promote the value of acceptance of our condition
- Physiotherapy can help our mental health but is rarely available in the community
- We need to promote the beneficial effects of physical activity on mental health
- We need to promote self management techniques.
- It would also be good to help us find the motivation to 'own' our own recovery journey.
- Talking treatments can help but are hard to access
- CBT can be very helpful
- It would be good to promote physical activity for instance in the gym via places such as Christie ward
- Medication can really slow you down and even if it helps can make it hard to do things we know will help us.
- Walking groups can be helpful
- Getting out and about is good and can be even better if it increases our social contacts

- Dealing with the weight changes caused by some medications is very important
- We need more cognitive behavioural therapy practitioners and more awareness among GP's of its value
- We could also train some users in skills such as the 'five steps approach' or recovery ideas such as 'wrap'.
- Some of us would really benefit from more one to ones
- Some of us would flourish if we could just find ways of joining in on simple activities that we enjoy
- It would be good if we had better access to occupational therapy both in hospital and in the community.
- Many of us are dependant on GP's to sign post us to other services. If they have little knowledge about them or they don't see the value in other services we can be stuck
- We need to have more knowledge about the rules from the DVLA about driving when we have a mental illness. Not having a licence, especially in a rural area, can be a great problem.
- We need to know that when we are in crisis we can see people. This means that there should be a crisis team and access to places such as safehouses or places of safety.
- It would be good if we had someone who we know and trust and who will pick up on us going into crisis when we might not notice it early enough ourselves.
- If we need to go into hospital there can be transport issues that cause considerable delay. This is especially true on some of the islands.

Skye and Lochalsh

- We want to publicise the benefit we get from Am Fasgadh and also from HUG
- We need to be sure that we can get access to help in a crisis and wonder what happened to the enthusiasm that there was for a safehouse network some years ago.
- We think that it can be hard to access employment when known to have a mental health problem
- We worry about the future we face around the changes to incapacity benefit.
- We would like a better understanding of the resources allocated to mental illness across Scotland and how this spend is decided on.
- We would like improved access to psychological services including CBT
- We worry about people with mental illness who are homeless on the island.
- We want to be sure that people have access to transport if they need to travel. for some of us the bus is not the solution, we may need other forms of transport.
- We need to find different ways to help people to participate in the sorts of things that HUG does including when people are ill and find it hard to speak, take things in and join in.

- We can find it extremely hard to get motivated.

West Ross

- The community mental health team is very good.
- They also provide good benefits advice which can make a huge difference to us.
- Working is good for us but there are huge problems with this if we are on benefits both in what we charge and on the consequences we may face.
- The benefits rules are very complex and can be hard to deal with
- We resent the implication that those of us who are on incapacity benefit are often frauds.
- The Ullapool service point is very good.