

Meeting of South Ayrshire Health and Social Care Partnership	Integration Joint Board	
Held on	14th December 2022	
Agenda Item:	11	
Title:	Statutory Mental Health Officer Team	
Summary:		
The purpose of this report is to give the IJB an overview of the first five month of the new statutory mental health officer (MHO) Team based at Ailsa Hospital in Ayr.		
Author:	Paul Donnelly, MHO Co-Ordinator	
Recommendations:		
It is recommended that the Integration Joint Board		
i. Agree and consider the contents of this report.		
Route to meeting:		
Report for IJB.		
Directions:		Implications:
1. No Directions Required <input type="checkbox"/>		Financial <input type="checkbox"/>
2. Directions to NHS Ayrshire & Arran <input type="checkbox"/>		HR <input type="checkbox"/>
3. Directions to South Ayrshire Council <input type="checkbox"/>		Legal <input type="checkbox"/>
4. Directions to both SAC & NHS <input type="checkbox"/>		Equalities <input type="checkbox"/>
		Sustainability <input type="checkbox"/>
		Policy <input type="checkbox"/>
		ICT <input type="checkbox"/>

STATUTORY MENTAL HEALTH OFFICER TEAM

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to give the IJB an overview of the first five months of the new statutory mental health officer (MHO) Team based at Ailsa Hospital in Ayr.

2. RECOMMENDATION

2.1 It is recommended that the Integration Joint Board

- i. **Note and consider the content of the report in section 4.**

3. BACKGROUND INFORMATION

- 3.1 The Statutory Mental Health Officer team was established in June 2022 following a review of Mental Health Officer services by a consultant Mental Health Officer Paul Jewitt who reported in March 2022 to the SMT about the need for a statutory Mental Health Officer team. The team was quickly established following this report and service management was put in place, with Sandra Rae helping to support the development of the team. Furthermore, Paul Jewitt remained in a consultative role supporting the team and providing continuity for the staff who would subsequently be appointed to the team
- 3.2 There was a significant shortfall in Mental Health Officer services in South Ayrshire and recognition of the need to modernise the Mental Health Officer service from the SMT. A significant investment has been put in place for the past five months which demonstrates the robust commitment to developing consistent and effective Mental Health Officer service in South Ayrshire.

4. REPORT

4.1 The team currently has the following composition:

- One Mental Health Officer Coordinator full time
- One Team Leader full time
- Five Senior Practitioners/Mental Health Officers fulltime
- One Admin support full time

This has resulted in a significant increase in resource and has already led to a range of improvements in services and supports to the existing Mental Health Officer group and the wider social work service. There are an additional 245 hours of operational support offered to the Mental Health Officer service each week with an additional 35-hour administration support.

This large investment will lift the amount of Mental Health Officer hours being dedicated to frontline Mental Health Officer tasks by a very long way from

where is currently sits at 4 hours per 10K of the population. It will be of note to see this change in the figures for 2022/2023 from the SCCC in their annual report on Mental Health Officer services across Scotland.

4.2 A five-part plan was put in place in September 2022 which gave an oversight of the strategy and approach of the team in completing statutory Mental Health Officer work:

- Part 1 - Provides a strategic overview and links Paul Jewitt's review with the ongoing development of the team.
- Part 2 - Service specification outlining the aims and objectives of the team. Including a clear operational procedure.
- Part 3 - Operational procedure for the team. This is an addendum to the service specification. It provides a robust and transparent operational procedure.
- Part 4 - Developing the Senior Practitioner role and the wider support to social work and health staff both in understanding Mental Health Officer services but using Senior Practitioners as central to the requirement to have a career pathway in mental health and grow our own Mental Health Officers.
- Part 5 - Monitoring, evaluation, and review of the statutory Mental Health Officer team. Including regular audit of the team and Mental Health Officer service.

This 5-part plan gives a cohesive and consistent approach to the development of the new service and is clear about the direction of travel for the statutory Mental Health Officer team. The five-part plan is included as a web link at the end of this report alongside a full review of the service so far.

4.3 The first five months of developing the statutory Mental Health Officer team have been about linking local and national strategy with the operational demands of a new service to providing a comprehensive Mental Health Officer team that can respond to statutory demands. A clear strategy is in place for the team which is very much linked to the operational procedure and the Senior Practitioners in the team have begun to make inroads to improving the Mental Health Officer service. Much has been put in place to link the strategy and operation of the team: A five-point plan to implement the team and progress change, new recording systems, improved professional standards, clear signalling of how the team will function, practical benefits, MHO packs and standards, and the promotion of the Mental Health Officer service through training, mentoring and forums. Comprehensive statistics and a solid base for audit, reflection, and change.

5. STRATEGIC CONTEXT

- 5.1 The proposals in this paper are fully aligned with the Strategic Intent of the IJB/HSCP. Delivering services in an integrated manner within the context of localities is a key policy objective of the Strategic Plan.
- 5.2 In particular, the proposals will enable the achievement of the IJBs strategic objectives for mental health as outlined in the adult community mental health strategy 2017/2022.
- Offers flexible, tailored, and coordinated support to those receiving services:
 - Prevents escalation of need and supports people to remain at home
 - Promotes recovery, well-being, and self-management
 - Minimises the potential for social stigma associated with mental health issues
 - Offers choice in the way that services are managed and controlled by those who receive them
 - Is safe, and ensures the safety of vulnerable members of society
 - Addresses Carer's needs

6. IMPLICATIONS

6.1 Financial Implications

6.1.1 There are no financial implications generated by this report.

6.2 Human Resource Implications

6.2.1 There are no staffing implications generated by this report

6.3 Legal Implications

6.3.1 There are no legal implications generated by this report.

6.4 Equalities implications

6.4.1 There are no equality implications arising from the contents of this report.

6.5 Sustainability implications

6.5.1 There are no environmental sustainability implications arising from this report.

6.6 Clinical/professional assessment

6.6.1 The MHO service has been in place for 5 months and is working on a range of areas to improve professional standards in mental health services.

7. CONSULTATION AND PARTNERSHIP WORKING

7.1 There has been a wide range of consultation both in the development and the delivery of the service. In respect of the development of the service a paper was presented to the SMT from a consultant in March 20022 outlining the need

for a statutory MHO team. The SMT acted on this swiftly and the coordinator for the team was appointed in June 2022 taking up post in August 2022.

Since the coordinator has been in post the five-part plan was developed in September 2022 and permission sought from the SMT to take this through a direct consultation process across the HSCP. An MHO leaflet and packs were produced and shared with colleagues in multi-disciplinary meetings, locality teams, management teams, hospital services and community groups. From October onwards. This consultation process is ongoing.

- 7.2 Discussion of the preparation of the report has happened at several governance meetings with the SMT. Permission has been given by senior management to develop the service in line with the five-part plan.

8. RISK ASSESSMENT

- 8.1. The reputation of the IJB will be enhanced significantly by the introduction of this team. South Ayrshire are ahead of other areas in developing a centralised model for MHO services. Many other boards have shown an interest in this approach but there are only two other teams of this nature in Scotland. Interest has come from national organisations such as social work Scotland whose professional officers have expressed positive views about this new service. Wider mental groups and statutory services in other local authorities have visited to see how the team is working and how it was established. There is a low risk of any negative impact and the feedback about the service internally and externally so far has been very positive.
- 8.2. The risk in terms of the IJB Risk Management Strategy is categorised as low.

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BACKGROUND PAPERS

[Abbreviated View of the Five Stages.pdf](#)
[Part One. Development of a Statutory Mental Health Officer Team.pdf](#)
[Part Two. Service Specifications of a Statutory Mental Health Officer Team.pdf](#)
[Part Three. Operational Procedure. Statutory Mental Health Officer.pdf](#)
[Part Four. Senior Practitioner \(Mental Health Officer\) Development Paper.pdf](#)
[Part Five. Evaluation of the Statutory Mental Health Officer Team.pdf](#)
[Statutory MHO Team - Review of the first five months. 28 November 2022.pdf](#)

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