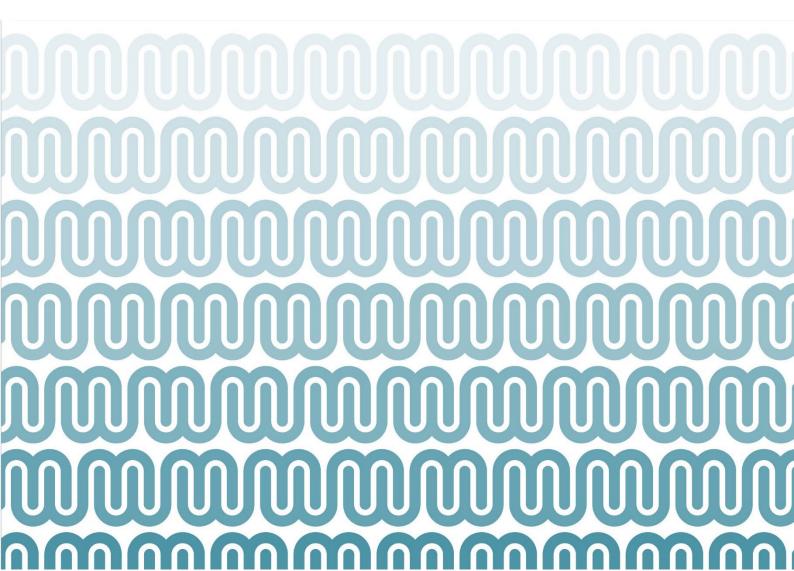


# **Business plan**

2023-24

# Corporate document

May 2023



# Our mission and purpose

# Our Mission

To be a leading and independent voice in promoting a society where people with mental illness, learning disabilities, dementia and related conditions are treated fairly, have their rights respected, and have appropriate support to live the life of their choice.

# Our Purpose

We protect and promote the human rights of people with mental illness, learning disabilities, dementia and related conditions.

# Our Priorities

To achieve our mission and purpose over the next three years we have identified four strategic priorities.

- To challenge and to promote change
- Focus on the most vulnerable
- Increase our impact (in the work that we do)
- Improve our efficiency and effectiveness

# Our Activity

- Influencing and empowering
- Visiting individuals
- Monitoring the law
- Investigations and casework
- Information and advice

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#### 1. Introduction

The Business Plan for 2023 to 2024 should be read in conjunction with the Commission's Strategic Plan for 2023 to 2026.

The business plan outlines how we will take forward the implementation of our commitments this year and how we will measure our success.

Over the next year consideration will require to be given to the implications of the Scottish Mental Health Law Review (SMHLR) whose final report was published in September 2022. The Commission has been reviewing the report and the recommendations to understand the full implications for the Commission but also how we can contribute to the implementation of the recommendations, should they be approved by the Scottish Government. The Scottish Government do not intend to respond to the recommendations until summer 2023; our current business plan may need to change to accommodate.

There may also be other projects which the Commission may need to deliver on following any additional policy changes, outcomes of investigations, etc.

The business plan workplan for 1 April 2023 to 31 March 2024 is attached at Appendix 1 detailing the timeline for achieving our commitments.

Our performance measures in relation to the business plan are attached at Appendix 2. These measures will also form part of the Quality & Performance Monitoring Report, which is submitted quarterly to our Audit, Performance & Risk Committee and annually to our Board.

# 2. Our Strategic Priorities

Our new Strategic Plan for 2023 to 2026 strengthens our commitment to deliver our mission to be a leading and independent voice in promoting a society where people with mental illness, learning disabilities, dementia and related conditions are treated fairly, have their rights respected and have the appropriate support to live the life of their choice.

Following the feedback received in the development of our Strategic Plan for 2023 to 2026 our four strategic priorities are still relevant:

#### To challenge and promote change

- Individuals know their rights, are empowered to participate in decision making about their mental health care and treatment if and when they wish to and/or feel able to and are supported to choose the lives they want to live.
- The Commission is recognised as a trusted voice on mental health and incapacity legislation and human rights.
- Scotland's legislation relating to non-consensual care and treatment fully reflects international human rights best practice or standards, in its wording and implementation.

#### Focus on the most vulnerable

 Across services for mental health, learning disability, dementia, and related conditions, there are robust plans to identify and respond to the needs of people who are less likely to have their voice heard and where their human rights are not being upheld.

#### Increase our impact (in the work that we do)

- Services respect our recommendations and implement them.
- We are the go to place for advice on areas where care and treatment, ethics and the law intersect.
- Our monitoring of mental health and incapacity legislation informs legislative and policy changes.
- We will visit hard to reach people to ensure that they can be involved.

#### Improve our efficiency and effectiveness

- Staff are engaged, trained and developed to have the right skills to deliver the Commission's priorities in a changing environment.
- We will continue to deliver our statutory duties within our allocated resources.

#### 3. Our Commitments

Our strategic plan has been approved for the next three years and our commitments for the coming year are detailed below.

#### 3.1 Influencing and empowering

The Commission's activities in the context of influencing and empowering e.g. visits, good practice guidance, statistical monitoring, investigations, and telephone advice line provides a clear human rights focus, both within its own work, and in helping to ensure that human rights are respected by service providers.

#### We will continue to:

- 'close the loop' of influence e.g. measure recommendation responses according to criteria and ensure robust standard of response and follow up, to complete closure reports, to provide follow up at end of year meetings, to take stock of recommendations and where there are themes emerging and escalate where action has not been taken;
- work in partnership with our stakeholders to analyse recommendations made in the Scottish Mental Health Law Review (SMHLR) and position the Commission in terms of short/medium/long term actions and evidence capability to deliver with additional resources should these recommendations be agreed by the Scottish Government;
- participate in relevant National Care Service (NCS) work streams and influence;
- explore collaborative relationships with new partners.

# 3.2 Visiting individuals

Our visiting role provides an opportunity for Commission staff to speak to individuals and their families about their care and treatment but staff from the various organisations also welcome the open and honest dialogue and preparation pre and post visits in strengthening relationships between both organisations.

#### We will continue to:

- review our visiting work and maximise the inclusion of a range of views when undertaking local visits e.g. peer support service/independent care provider;
- ensure our local visit reports are more focused on highlighting the views of individuals, their families and carers and the broader range of views.

We will also develop our visiting role to:

- undertake Community Mental Health Team (CMHT)/ Community Learning Disability Team (CLDT) visits as part of the local visit process each year, developing a greater understanding of the primary-secondary care interface; and
- plan and lead on joint visits, with another provider such as Care Inspectorate (CI), Healthcare Improvement Scotland (HIS) and Scottish Human Rights Commission where there is combined intelligence that supports specific visits.

## 3.3 Monitoring of the Acts

The Commission has a statutory duty to monitor the use of the Mental Health (Care and Treatment) (Scotland) Act 2003 and the welfare parts of the Adults with Incapacity (Scotland) Act 2000. We do this by collating and analysing data compiled from the relevant paperwork sent to us and by publishing monitoring reports with comment and analysis of trends in the use of the Act.

The Commission's monitoring reports are well regarded, helpful, and provide a comprehensive source of information for services, they influence legal reform and identify areas where work is required.

However, there is a clear sense that the reports do not meet the needs of all. The reports are described as overly long, and too difficult by some whilst others suggest the reports are easy to understand and jargon free. This demonstrates that the reports are working well for some but not all and perhaps reflects that the reports have different uses. The Commission has work to do to reflect on ensuring that the monitoring reports are understandable and useful to all key stakeholders.

We generate and receive a huge amount of information, as such, information is one of our key assets and we therefore intend to develop a data/information strategy to manage the creation, storage and sharing of information which supports our decision making, both within the Commission and with our stakeholders.

#### We will:

- ensure that our monitoring reports are accessible and useful to all key stakeholders;
- develop a data/information strategy.

# 3.4 Investigations

Section 11 of the Mental Health (Care and Treatment) Act 2003 gives the Commission the authority to carry out investigations and make recommendations, as it considers appropriate, including where an individual with mental illness, learning disability, dementia or related condition may be, or may have been, subject to ill treatment, neglect or some other deficiency in care and treatment.

The intention of Commission investigations is to share learning, to support improvement and therefore outcomes for individuals irrespective of whether the investigation was carried out in their specific health board or local authority area.

An important part of this work is the need to complete investigations in a timely manner.

#### We will:

- reflect on ensuring our reports target a broader audience and remain readable, learning focussed and high quality as reported by our stakeholders;
- publish reports within 12 months of the decision to investigate;
- ensure the learning from our investigations will be relevant across sectors across Scotland and robust action plans will be sought to address recommendations giving assurance on delivery;
- build relationships with training partners to train and support workforce learning arising from our work.

#### 3.5 Information and advice

The information and advice is an area, which stakeholders see as a critically important function of the Commission. It is seen as approachable and easy to make contact with however there were also concerns that there are populations who may not know about the Commission, we need to highlight the roles and responsibilities of the Commission (in a non-jargon accessible way) and embed the work of the Commission's engagement and participation officers further to achieve this, in part.

#### We will:

- plan an event in 2023 to share the Commission's annual report and, in doing so, have an opportunity to engage with a wide range of stakeholders and increase knowledge of our work;
- develop a work plan involving engagement and participation officers to ensure further planned profile and integration across Commission activity;
- address issues of accessibility both in terms of access to the Commission and in terms of written documents.

# 3.6 Engagement and participation

While it is clear that there is a positive impact in relation to the Commission's engagement and participation activity and strategic aims, it is equally clear that further work is required, particularly around carers and families, wider stakeholder involvement, improving understanding about what the Commission's remit is and improvement around feedback mechanisms. Of note is the further work required around minority groups and children and young people with a targeted approach and improved accessible information, which involves

not only the engagement and participation team, but the whole Commission, Board members and the Advisory Committee.

#### We will:

- produce an evidence based engagement and participation strategy 2023-26, aligned with the strategic plan for Board approval in Quarter 1 of 2023-24;
- undertake initial scoping to address reported gaps in accessible information;
- develop a plan to increase engagement with children and young people in particular;
- publish a carer specific report based on collation of feedback 2016–22;
- improve governance structures between the Advisory Committee and the Commission's Board;
- target children and young people and minority groups.

## 3.7 Digital and transformation

The Commission is committed to improving and developing digital capabilities as evidenced through the current Information Management System project (IMS), which is in progress to ensure the current system is replaced with a transformational IMS system offering enhanced capabilities through improved recording, monitoring and reporting to inform both internal and external activities.

#### We will:

- · continue to take action to give assurance regarding IT security;
- ensure ongoing maintenance of the current IMP (the Commission's information management system) to maintain critical business activity;
- prioritise ongoing cleansing of IMP data to ensure compliance with GDPR and readiness for data migration to improve effective and efficiency of information management.

#### 3.8 Workforce

The Covid-19 pandemic has placed significant pressure on all workforces and the Commission is no exception.

As we continue to move forward, the Commission is mindful of feedback received about organisations seeing significant changes and turnover as employees have reviewed and adapted to different ways of working and are seeking more work life balance.

Feedback from Commission staff at a development session provided detailed information about what matters to staff and this information was extremely helpful in planning our commitments going forward and in recognition of the fact that the Commission's greatest asset is its workforce.

#### We will:

- repeat and make more explicit our continuing commitment to demonstrate our values;
- take account of all feedback from staff, take action and build on creating more opportunities for coming together and sharing views;
- undertake a learning needs analysis to support staff to feel confident and competent;
- finalise the Commission's hybrid working policy;
- develop a staff survey tool for regular feedback.

# Appendix 1: business plan 1 April 2023 to 31 March 2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Activity 1: influencing and empowering		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
Board members to attend HSCP and Health Board meetings to present the work of the Mental Welfare Commission.  Agreed by Board Members on 25 April 2023.  (including ongoing attendance at meetings in years 1,2,3)	Chief Executive		30/09/2023		
To analyse recommendations made in the SMHLR and position ourselves in terms of short/medium/long term actions evidencing capability to deliver with additional resources e.g. CCTO themed visit. (*SG have yet to agree recommendations made)	Chief Executive	30/06/2023			
To explore collaborative relationships with new partners.	Chief Executive	30/06/2023			
To participate in relevant National Care Standard (NCS) work streams.	Executive Director Social Work	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To continue to engage and influence any developments on the forensic review (following Barron report)	Executive Director Nursing	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To participate and seek to influence the Scottish Government Quality and Safety Board	Chief Executive	30/06/2023	30/09/2023	31/12/2023	31/03/2024

To continue to engage and influence the Scottish Government scoping work on the remit and powers of a Learning Disability, Autism and Neurodiversity Bill	Executive Director Medical	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To participate in the work of the UK National Preventive Mechanism (NPM)	Chief Executive	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To contribute to Board and Regional educational events to engage with Psychiatrists and GPs in training, social workers, MHOs and nurses	All Executive Directors	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To contribute to the H&SCP Chief Officer Group	Chief Executive	30/06/2023	30/09/2023	31/12/2023	31/03/2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Activity 2: visiting individuals		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
To follow up the recommendations from the themed visit and closure report to Prisons; to incorporate CPT report too.	Executive Director Social Work/Executive Director Nursing	28/04/2023			
To publish the local visits recommendations report (from local visits during 22/23)	Executive Director Nursing	30/06/2023			
To publish report on themed visit to individuals in specialist services out of NHS Scotland provided placement areas (including people with learning disability subject to delayed discharge and a follow up of our No Through Road Report).	Executive Director Nursing		30/09/2023		
To publish report on themed visit and publish closure report to individuals on Community Compulsory Treatment Orders (CCTOs)	Chief Executive		30/09/2023		
To follow up the recommendations and publish closure report from the Ending the exclusion report	Executive Director Medical		29/09/2023		
To publish a report on the outcomes of our guardianship visits	Executive Director Nursing		30/09/2023		
To undertake a mapping exercise of ARBD specialist services across Scotland with HSCPs	Chief Executive		30/09/2023		
To undertake Community Mental Health Team (CMHT)/Community Learning Disability Team (CLDT) visits as	Executive Director Nursing				31/03/2024

part of the local visit process each year; developing a greater understanding of the primary-secondary care interface.					
To plan and lead on joint visits, with another provider such as Care Inspectorate (CI), Healthcare Improvement Scotland (HIS) and Scottish Human Rights Commission(SHRC) where there is combined intelligence that supports specific visits.	Executive Director Nursing				31/03/2024
To undertake mapping exercise to follow up on the Commission's previous monitoring report in relation to parents who are detained.	Executive Director Social Work				31/03/2024
To develop a programme of local visits incorporating a mix of virtual (where required if pandemic restrictions are in place) and face to face visits/unannounced - to extend to community settings where there are individuals who are under MHA/AWI legislation.	Executive Director Nursing	30/06/2023	30/09/2023	31/12/2023	31/03/2024
We will aim to visit the 50 individuals subject to guardianship orders we met as part of the ARBD themed visit to review and seek feedback on how things are going for them and their families.	Executive Director Nursing	30/06/2023	30/09/2023	31/12/2023	31/03/2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Activity 3: monitoring the acts		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
To monitor and report on the use of recorded matters	Executive Director Medical	30/06/2023			
To develop a data/information strategy to manage the creation, storage and sharing of information which supports our decision making, both within the Commission and with our stakeholders.	Business Change and Improvement Manager		30/09/2023		
To produce the annual report on MHA monitoring	Executive Director Medical		30/09/2023		
To produce the annual report on Adults with Incapacity Act (AWIA) monitoring	Executive Director Social Work		30/09/2023		
To monitor and produce a report on young people admitted to adult wards (including working with Public Health Scotland to link data)	Executive Director Social Work			30/11/2023	
To produce the children's rights report	Executive Director Social Work			31/12/2023	

Objective & Detail of Action	Person Responsible	2023 to 2024			
Activity 4: investigations and casework		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
We will also be publishing four Death in Detention (DIDR)/Mental Health Homicide (MHH) reports in 2023 and will review learning from this pilot proposal work irrespective of whether funding is continued.	Chief Executive	30/06/2023			
To publish lesson learned and investigations report	Executive Director Social Work	30/06/2023			
To implement new review systems for deaths in detention and homicides – subject to funding	Chief Executive	30/06/2023			
We will be publishing at least two major investigation reports in 2023 and will continue to prioritise resources towards investigations work.	Chief Executive				31/03/2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Activity 5: information and advice		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
To make links with NHS Education Scotland (NES) and the Scottish Social Services Council (SSSC) to consider a strategic collaborative partnership of training, learning and improvement.	Chief Executive	30/06/2023			
To plan an event in 2023 to share the Commission's annual work and, in doing so, have an opportunity to engage with a wide range of stakeholders and increase knowledge of our work.	Business Change and Improvement Manager		30/09/2023		
To develop a work plan involving engagement and participation officers to ensure further planned profile and integration across Commission activity.	Executive Director Social Work		30/09/2023		
To address issues of accessibility both in terms of access to the Commission and in terms of written documents. One suggestion provided as part of the consultation was, "Patients and their families should have a welcome pack from MWC given to them when admitted to hospital or attend outpatients with this information".	Executive Director Nursing / Social Work		30/09/2023		
To develop qualitative feedback from those who have used the Commission's telephone advice line.	Executive Director Nursing / Social Work		30/09/2023		
To review and revise 10 good practice guides	ALL Executive Directors	30/06/2023	30/09/2023	31/12/2023	31/03/2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Engagement and participation		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
To produce an evidence based engagement and participation strategy 2023-2026, aligned with the strategic plan for Board approval in Quarter 1 of 2023-2024.	Executive Director Social Work	30/06/2023			
Initial scoping to be undertaken to address reported gaps in accessible information.	Executive Director Social Work	30/06/2023			
To publish a carer specific report based on collation of feedback 2016–2022.	Executive Director Social Work	30/06/2023			
To improve governance structures between the Advisory Committee and the Commission's Board.	Executive Director Medical	30/06/2023			
To develop a plan to increase engagement with children and young people in particular.	Executive Director Social Work via Engagement & Participation and Children & Young People Group			31/12/2023	
To deliver on the Commission's agreed engagement and participation strategy 2023-2026.	All Executive Directors	30/06/2023	30/09/2023	31/12/2023	31/03/2024

To implement the recommendations from our equality outcomes report and review, consult and publish an updated report	Executive Director Medical	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To implement the recommendations from our stakeholder survey	Executive Director Social Work	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To embed our duties on children's rights through implementation of our corporate parent plan	Executive Director Social Work	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To develop a series of webinars on key issues around good practice guides or law, care and treatment, ethics etc and for all national reports	All Executive Directors	30/06/2023	30/09/2023	31/12/2023	31/03/2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Digital and transformation		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
Cleansing of IMP data to ensure compliance with GDPR and readiness for data migration to improve effective and efficiency of information management;	Executive Director Social Work	30/06/2023	30/09/2023	31/12/2023	31/03/2024
To implement the project to replace IMP	Executive Director Social Work	30/06/2023	30/09/2023	31/12/2023	31/03/2024

Objective & Detail of Action	Person Responsible	2023 to 2024			
Workforce		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4
To finalise the Commission's hybrid working policy	Chief Executive	30/06/2023			
To develop a staff survey tool for regular feedback	Chief Executive/ Business Change & Improvement Manager	30/06/2023			
To undertake a learning needs analysis to support staff to feel confident and competent.	Chief Executive		30/09/2023		

Objective & Detail of Action	Person Responsible	2023 to 2024				
Corporate		2023 to 2024 Quarter 1	2023 to 2024 Quarter 2	2023 to 2024 Quarter 3	2023 to 2024 Quarter 4	
To produce the annual report for laying in Parliament in August	Chief Executive	30/06/2023				
To develop and implement the quality and performance framework/policy	Business Change and Improvement Manager	30/06/2023				
Complete the self-assessment of the operation of the Board, Audit Committee and Executive Leadership Team	Chief Executive	30/06/2023				
To review and implement the risk management framework/policy	Business Change and Improvement Manager		30/09/2023			
To embed our Corporate Quality & Performance Framework across the organisation	Chief Executive/ Business Change and Improvement Manager/All Executive Team	30/06/2023	30/09/2023	31/12/2023	31/03/2024	
To develop a communications plan to support the business plan	Chief Executive	30/06/2023	30/09/2023	31/12/2023	31/03/2024	
To continue to review our ongoing financial sustainability	Chief Executive	30/06/2023	30/09/2023	31/12/2023	31/03/2024	

To review and implement the strategic risk register	Business Change and Improvement Manager	30/06/2023	30/09/2023	31/12/2023	31/03/2024
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# **Appendix 2: performance measures**

To ensure the Commission is achieving its commitments within the Strategic Plan and Business Plan we have developed a number of 'measures of success' these will be reported through our business plan progress reports but will also form part of our quality & performance reporting.

## Influencing and empowering

- 1. Recommendations made by the Commission will be listened to and addressed with evidence to support this.
- 2. Commission visibility and influence will be evidenced in national review work streams.
- 3. There will be new collaborative approaches e.g. psychological services, Allied Health Professionals (AHPs), NES, advocacy.
- 4. The Commission will have a clear integrated engagement and participation work plan which extends beyond the work of engagement and participation officers and which measures impact and influence.

## **Visiting**

- 1. Our visits will take place across a range of in patient and community settings/services.
- 2. Our reports will be informed and meaningful ensuring focus on both good practice and areas which could be improved, taking full account of what is important to those receiving services.

# Monitoring of the acts

- 1. We will produce monitoring reports and receive feedback that they are both accessible and meaningful.
- 2. Progress will be made on externalised (outward facing) data-sets Application Programming Interface (API).
- 3. We will have our own data/information strategy.
- 4. We will have developed an approach to monitoring and scrutiny in line with emerging priorities from the Scottish Mental Health Law Review.

## **Investigations**

- 1. Investigation reports will be published within 12 months of the decision to investigate.
- 2. Investigation work will be prioritised and feature regularly.
- 3. The learning from our investigations will be relevant across sectors across Scotland and robust action plans will be sought to address recommendations giving assurance on delivery.
- 4. Collaborative relationships will be built with training partners to train and support workforce learning arising from our work.

#### Information & advice

- 1. There will be a broader reach of the Commission's information and advice activity because of focus on accessibility.
- 2. Improvements in the Commission's information and advice function will be informed by direct feedback from those using the service.
- 3. The information and advice service will be valued by carers and those with experience as much as those staff working in the professional fields.
- 4. Strategic links with partners, such as NES and SSSC, will ensure the Commission's work influences education and training.

## **Engagement & participation**

- There will be clearly evidenced feedback mechanisms reflecting a 'you said we did' approach
- 2. There will be accessible information available in multiple formats.
- 3. There will be Increased visibility of traditionally 'hard to reach' groups evidenced through the wider work of the Commission (i.e., visits, investigations, advice line enquiries, for example).
- 4. There will be evidence of Advisory Committee influence on the Commission's work and for which the Commission has 'due regard' in addition to evidence of Board Directions to the Advisory Committee, with outcomes reported.

# **Digital & transformation**

- 1. Our data will be as safe as possible from cyber-attack.
- 2. We will prepare our data ready for migration to the new system
- 3. We will progress through a formal procurement process to identify an information and case management system fit for our purpose

# Workforce

- 1. Commission staff will feel confident and competent in their roles and responsibilities.
- 2. Commission staff will feel valued.
- 3. Commission staff will feel listened to and supported.



If you have any comments or feedback on this publication, please contact us:

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