

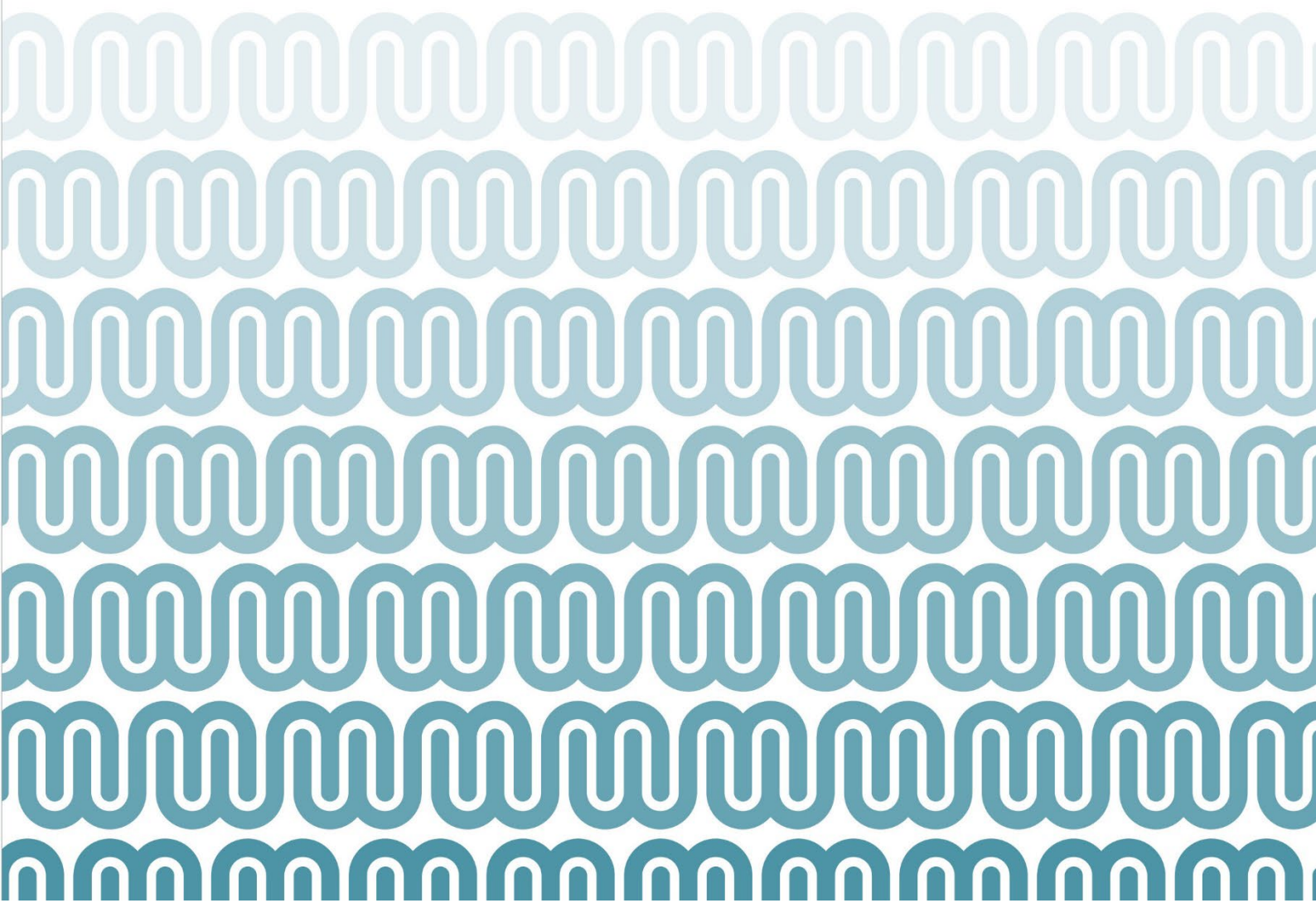


mental welfare
commission for scotland

Business plan 2025-26

Corporate document

April 2025



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 2025 to 2026 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.

There may also be other projects which the Commission may need to deliver on following any additional policy changes, outcomes of investigations, etc. Therefore, agile business planning is important, together with capacity to ensure prompt response and delivery.

The business plan workplan for 1 April 2025 to 31 March 2026 is attached at Appendix 1 detailing the timeline for achieving our commitments, which is submitted quarterly to our Board.

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 six monthly to our Audit, Performance & Risk Committee and annually to our Board.

2. Our strategic priorities

Our 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 original strategic priorities were still relevant:

2.1 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.

2.2 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.

2.3 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 visit hard to reach people to ensure that they can be involved.

2.4 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 was approved in 2023 for the next three years and our commitments for the final year of this plan (2025-26) 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 (now extended to investigation reports), to provide follow up at end of year meetings, to take stock of recommendations, identify where there are themes emerging and escalate where action has not been taken;
- participate in relevant National Care Service (NCS) discussions and work progressing relating to the agreement to have a National Social Work Agency, as an executive agency of Scottish Government;
- commit to working in partnership with the Scottish Government and all relevant stakeholders to deliver on the priorities from the SMHLR. This has included contributing to the two prioritised workstreams (definition of mental disorder and AWI reform) and analysis of the Scottish Government's published delivery plan to date.
- ensure, throughout all of our work, that the rights of those most vulnerable, as a result of diagnosed mental illness, learning disability, personality disorder, dementia and related conditions, are promoted and protected.

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:

- 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 that our local visit reports continue to be more focused on highlighting the views of individuals, their families and carers and the broader range of views.
- 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 for 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 will:

- ensure that our monitoring reports are accessible. This may include:
 - creating accessible versions of the reports. For some monitoring reports we did create infographics that we then published on social media. We will explore this again.
 - doing more focussed work on aspects of monitoring that meets the needs of stakeholders.
 - working with other stakeholders to make our data accessible (with checks) to ensure that the value of the system can be realised beyond the law review.
- consider, with others, what else should be monitored; some of this will flow from the SMHLR recommendations that do not need legislative change but will require additional investment to build the Commission's capacity for monitoring and scrutiny.

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:

- ensure an integrated investigations unit which delivers the same approach and high quality of work irrespective of the basis of investigation if our funding proposals for Deaths in Detention (DIDR)/Mental Health Homicide (MHH) are agreed by Scottish Government.
- continue to prioritise resources to allow for investigation of cases under section 11 of the Mental Health Act where indicated by the Investigations Group and approved by Executive Leadership Team (ELT).
- review recommendations made across investigations/visits/casework and highlight common themes relating to training, learning and workforce and pass to relevant partners, e.g. NHS Education for Scotland (NES), Scottish Social Services Council (SSSC), Care Inspectorate (CI) and Health Improvement Scotland (HIS).

3.5 Information and advice

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:

- further develop links with NHS Education Scotland (NES), and the Scottish Social Services Council (SSSC) to consider a strategic collaborative partnership of training, learning and improvement.
- develop qualitative feedback from those who have used the Commission's telephone advice line.

3.6 Engagement and participation

While there is a positive impact in relation to the Commission's engagement and participation activity and strategic aims, 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:

- deliver on the Commission's agreed engagement and participation strategy 2023-26
- target children and young people and minority groups.
- have an established and embedded engagement and participation team co-ordinating and managing a significant increase in stakeholder groups informing the Commission's priorities and work.
- improve accessibility to all Commission information (*this links to our monitoring commitment in relation to accessibility of information*)
- publish a targeted themed visit approach seeking the views of carers in 2025.

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.
- prioritise ongoing cleansing of IMP data to ensure compliance with GDPR and readiness for data migration to improve effective and efficiency of information management.
- ensure ongoing maintenance of the current IMP (the Commission's information management system) to maintain critical business activity.
- have an IMS project to deliver a new secure information management system.
- consider further extending the use of remote devices for practitioner staff.

3.8 Workforce

We continue to move forward, taking account of the feedback from staff at our event held on 23 February 2024 and with information from our staff suggestion scheme; to date we have had 17 suggestions.

68% of our workforce participated in our *Your Opinion Matters!* Staff Survey in 2024; we have clear feedback evidencing the areas we need to work on and develop.

We will continue to plan our commitments going forward in recognition of the fact that the Commission's greatest asset is its workforce.

We will:

- collectively deliver on our *Your Opinion Matters!* Staff Survey action plan.
- undertake a staff survey annually.
- continue to review and consider all suggestions made via the online/in office staff suggestion box.
- develop an organisational development plan which takes account of our values, our culture, our relationships, our learning needs and our well-being.
- we will continue to create more opportunities for coming together and sharing views (recognising that the hybrid working policy means that all staff are not routinely in the office at the same time). The next staff event will include invitation to Board members too and will take place on 1 April 2025.

Appendix 1: Business Plan 1 April 2025 to 31 March 2026

Objective & detail of action for Activity 1: Influencing and empowering	Person Responsible	Deadline
Board members to attend HSCP and Health Board meetings to present the work of the Mental Welfare Commission: (1) Proposal to Board (2) Ongoing attendance at meeting in years 1,2,3	Chief Executive	Six monthly
To continue to engage and influence any developments on the forensic review (following Barron report)	Executive Director Nursing	Six monthly
To note that the Scottish Government has decided to delay the introduction of a Learning Disability, Autism and Neurodiversity Bill however the Commission will retain an interest and influence in relation to this work.	Chief Executive	Six monthly
To participate in the work of the UK National Preventative Mechanism (NPM) steering group and subgroup.	Chief Executive	Quarterly
To contribute to Board and Regional educational events to engage with Psychiatrists and GPs in training, social workers, MHOs and nurses	All Executive Directors	Quarterly
To contribute to the HSCP Chief Officer Group	Chief Executive	Quarterly
To participate in relevant National Care Service (NCS) discussions and work progressing relating to the agreement to have a National Social Work Agency, as an executive agency of Scottish Government	Executive Director Social Work	Quarterly

To 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.	All Executive Directors	Quarterly
We will commit to working in partnership with the Scottish Government and all relevant stakeholders to deliver on the recommendations of the SMHLR.	Chief Executive	Quarterly
We will ensure, throughout all of our work, that the rights of those most vulnerable, as a result of diagnosed mental illness, learning disability, personality disorder, dementia and related conditions, are promoted and protected.	Chief Executive/ All Executive Directors	Quarterly

Objective & detail of action for Activity 2: Visiting individuals	Person Responsible	Deadline
To publish the local visits recommendations report (from local visits during 2024-25).	Executive Director Nursing	30 August 2025
<i>Out of NHS Scotland provided placement areas</i> - published 07 September 2023 To follow up the recommendations from the themed visit 12 months after publication and publish a closure report at 15 months.	Executive Director Nursing	30 April 2025
To develop an appropriate local visit programme incorporating a mix of virtual and face to face visits, both announced and unannounced.	Executive Director Nursing	Quarterly
We will review our visiting work and maximise the inclusion of a range of views when undertaking local visits, e.g. use of peer support service/independent care provider.	Executive Director Nursing	Quarterly
We will ensure that our local visit reports continue to be more focused on highlighting the views of individuals, their families and carers and the broader range of views.	Executive Director Nursing	Quarterly
To plan and lead on joint visits, with another provider such as Care Inspectorate (CI) (see below), Healthcare Improvement Scotland (HIS) and Scottish Human Rights Commission where there is combined intelligence that supports specific visits.	Executive Director Nursing	Quarterly
Themed visit: To complete a carer themed visit and report to the June 2025 Board.	Executive Director Nursing	30 June 2025

Objective & detail of action for Activity 3: Monitoring the acts	Person Responsible	Deadline
To produce annual report on Adults with Incapacity Act (AWI) monitoring: two parts	Chief Executive/ Executive Directors	31 August 2025
To produce the annual report on MHA monitoring	Chief Executive/ Executive Directors	30 September 2025
To monitor and publish report on young people admitted to adult wards (including working with Public Health Scotland to link data)	Chief Executive/ Executive Directors	31 October 2025
To review and report on advocacy provision across Scotland (full review)	Business Change and Improvement Manager	31 December 2025
<p>Ensure that our all our monitoring reports are accessible. This may require additional investment in:</p> <ul style="list-style-type: none"> - creating accessible versions of the reports. For some monitoring reports we did create infographics that we then published on social media. We could explore this again. - doing more focussed work on aspects of monitoring that meets the needs of stakeholders. - working with other stakeholders to make our data accessible (with checks) to ensure that the value of the system can be realised beyond the law review. 	Head of Culture & Corporate Services	31 December 2025
To consider, with others, what else should be monitored; some of this will flow from the SMHLR recommendations that do not need legislative change but will require additional investment to build the Commission's capacity for monitoring and scrutiny.	Chief Executive All Executive Directors	30 September 2025

To deliver the actions outlined within the implementation plan for the data and information strategy	Business Change & Improvement Manager	Six monthly
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Objective & detail of action for Activity 4: Investigations and casework	Person Responsible	Deadline
To continue to prioritise resources to allow for investigation of cases under section 11 of the Mental Health Act where indicated by the Investigations Group and approved by ELT.	All Executive Directors	Quarterly
To review recommendations made across investigations/casework and highlight common themes relating to training, learning and workforce and pass to relevant partners e.g. NHS Education for Scotland (NES), Scottish Social Services Council (SSSC), Care Inspectorate and Health Improvement Scotland (HIS).	All Executive Directors	Quarterly

Objective & detail of action for Activity 5: Information and advice	Person Responsible	Deadline
To further develop 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	Quarterly
To develop qualitative feedback from those who have used the Commission's telephone advice line.	Executive Director Nursing/ Social Work	30 September 2025
To review and revise four good practice guides (2025-26)	All Executive Directors	31 March 2026
To improve accessibility to all Commission information - linked to the monitoring action above	Head of Culture & Corporate Services	31 December 2025

Objective & detail of action for Engagement and participation	Person Responsible	Deadline
To embed our duties on children's rights through implementation of our corporate parent plan/ UNCRC implementation plan	Executive Director Social Work	Quarterly
To develop a series of webinars on key issues around good practice guides or law, care and treatment, ethics etc and for national reports	ALL Executive Directors	Quarterly
To deliver on the Commission's agreed engagement and participation strategy 2023-26.	Executive Director Nursing	Quarterly
To have an established and embedded engagement and participation team co-ordinating and managing a significant increase in stakeholder groups informing the Commission's priorities and work. - link to above	Executive Director Nursing	Quarterly
<p>Equalities Plan</p> <p>To consider the current equalities outcomes and review these. Publish the new equalities outcomes for the next four years with an associated action plan. Consider actions by business year- report on annual basis to ELT and the Board</p>	Business Change & Improvement Manager	30 June 2026
To target children and young people and minority groups	Executive Director Nursing	Quarterly

Objective & detail of action for Digital & transformation	Person Responsible	Deadline
To implement the project to replace IMP and have an IMP project to deliver a new secure information management system.	Executive Director Social Work	31 December 2025
To prioritise ongoing 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 April 2025
To continue to take action to give assurance regarding IT security.	Head of Culture & Corporate Services	Quarterly
To ensure ongoing maintenance of the current IMP (the Commission's information management system) to maintain critical business activity.	Head of Culture & Corporate Services	Quarterly

Objective & detail of action for Workforce	Person Responsible	Deadline
To work with NHS Education for Scotland (NES) on training modules for Scotland's health, social work and social care staff on AWI	Executive Director Social Work	Quarterly
To repeat and make more explicit our continuing commitment to demonstrate our values: i) Respect - valuing and treating people fairly ii) Challenging for better outcomes iii) Commitment to high quality iv) Teamwork and participation v) Supporting, protecting and nurturing	Chief Executive	Quarterly
To take account of all feedback from staff, take action and build on creating more opportunities for coming together and sharing views.	Chief Executive	Quarterly
To develop an Organisation Development Plan for 2025-27 (set out the culture we are aspiring to, the roadmap for how we bring about any change required to get there, staff survey outcomes, LNA actions, etc)	Head of Culture & Corporate Services	30 April 2025
To undertake an annual staff survey	Business Change & Improvement Manager	30 September 2025
To collectively deliver on our Your Opinion Matters! Staff Survey Action Plan	Chief Executive/ All Executive Directors/ All staff	Quarterly

Objective & Detail of Action for Corporate	Person Responsible	Deadline
To complete the self-assessment of the operation of the Board and Audit Performance and Risk Committee	Chief Executive	30 June 2025
To produce the annual report for laying in Parliament in August	Chief Executive	30 June 2025
To continue to review and embed our Corporate Quality & Performance Framework across the organisation	Chief Executive/ Business Change & Improvement Manager/ All Executive Team	Quarterly
To develop a communications plan to support the business plan	Head of Culture & Corporate Services	30 June 2025
To develop a communications analysis report	Head of Culture & Corporate Services	31 December 2025
To continue to review our ongoing financial sustainability	Chief Executive	Quarterly
To continue to review and implement the strategic risk register	Chief Executive/ Business Change &	Quarterly

	Improvement Manager/ All Executive Team	
To develop our Strategic Plan for 2026-29	Chief Executive / Business Change & Improvement Manager	30 April 2026

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, third sector.
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 inpatient and community settings/services. Some will be unannounced.
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. 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 produced within 12 months of the decision to investigate and published within three months of production.
2. Investigation work will be prioritised by ELT in the context of finite resources 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. Closure reports will be published to evidence action taken in response to recommendations.
5. Collaborative relationships will be built with training partners to train and support workforce learning arising from our work where indicated.

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 that the Commission's work influences education and training.

Engagement & participation

1. 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 'less represented' 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.
4. We will have improved data sets and reporting mechanisms.
5. We will be more efficient and have improved timescales for data input/upload.
6. There will be successful migration to our new system.
7. We will have a fully functioning transformation IMS system secured.

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.



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