Emotional Wellbeing Service 5 Year Strategy 2021-2026 – 01 July 2021.

Background

This strategy is our vision for how the Emotional Wellbeing Service will develop over the five year period between 2021 and 2026. Whilst acknowledging the outstanding work that has been done over the past 20 years in developing a robust, responsive mental health service in the Falkland Islands, this strategy seeks to drive the Emotional Wellbeing Service forward over the next 5 years with a view to building on our existing resources and improving service provision for all residents of the Falkland Islands.

An external review of mental health services was commissioned by Falkland Islands Government, and the subsequent Mental Health Action Plan highlighted the need to develop a new mental health strategy. All recommendations in the Mental Health Action Plan have been cross-referenced into the strategy and organised into the work plan. In addition to recommendations made in the Mental Health Action Plan, the current strategy is based on data gathered in the Health in Mind Survey (2017) and the Mental Health Strategy background work completed by Senior Community Psychiatric Nurse (SCPN), Karen Rimicans (2020). It has been developed in keeping with the spirit of the Islands Plan 2018-2022, and whilst a new Islands Plan will be produced during the period covered by this strategy, it is not anticipated that there would be any significant change to these key aims. Please see Appendix 1 for relevant recommendations that were considered during the development of this strategy, cross referenced with the relevant strategy objectives.

As the population of the Falklands continues to grow, it is important for the Emotional Wellbeing Service to respond proactively to the diverse needs of our resident population. In addition to people who live in the Falkland Islands permanently (both in Stanley and in Camp), we also serve a more transient population of contract workers, residents of Mount Pleasant Complex, passengers and staff on private and commercial vessels. As a lifespan service, we offer services to children, working-age adults and older adults who are experiencing difficulties as a result of mental health, neurodevelopmental and cognitive difficulties. SCPN Karen Rimicans (2020) produced a detailed overview of the services available to permanent residents of the Falkland Islands as well as a snapshot of the mental health of the nation. This work highlighted that in order to meet the emotional wellbeing needs of our population effectively, we need to consider issues of capacity and demand at a strategic level. In order to do this, we are seeking to develop a new model of service provision. As a starting point, we have adapted the World Health Organisation (2003) model of organising mental health services and will continue to review this as appropriate. Our model for service provision can be found in Appendix 2. This model has influenced the aims and direction of this strategy, seeking to offer the whole population of the Falkland Islands an appropriate level of emotional wellbeing support at all times, with a constant focus on proactive prevention and early intervention across the lifespan, island-wide.

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Principles

The following principles underpin this strategy:

1. <u>Patients First</u>; we aim to put the wellbeing and safety of our patients at the centre of all we do, and aim to take their preferences into account wherever possible.

2. <u>Resilient Community</u>; we aim to support our community to enhance and develop its existing resilience.

3. <u>Safe and happy workforce</u>; we understand that a workplace that supports the wellbeing of those working within it is better for the workforce, the organisation and the community as a whole.

4. <u>Progress and Development</u>; we understand the need to engage with research and service development projects in order to help our service understand our service users and to offer the most appropriate treatment options.

5. <u>Sustainability</u>; we aim to run a financially responsible service, which fosters a culture of encouraging a sustainable, local workforce.

The strategy has therefore been built and organised around these principles, and seeks to achieve a number of specific goals in each of these areas.

Strategy Complexities and Risk

Some of the issues that need to be considered during the implementation of this strategy include:

<u>Risk:</u> Staff time pressures and turnover of staff (within the Emotional Wellbeing Service as well as in the wider Falkland Islands Government) could lead to development work being 'lost'.

<u>Mitigation plan</u>: In order to ensure the strategy document and project implementation remains a priority, it should be driven by the senior clinical team (Chief Medical Officer, Chief Nursing Officer and Clinical Psychologist) rather than by individual clinicians, with oversight from the Director of Health and Social Services.

<u>Risk:</u> In order to make space to implement some changes, it may be necessary to allocate staff time differently, meaning the Emotional Wellbeing Service may need to hold a treatment waiting list in the short-term.

<u>Mitigation plan</u>: We will continue to prioritise new assessments, but will hold a small treatment waiting list (if the need arises) by prioritising patients by level of risk. While patients are on a waiting list they will be offered appropriate self-help materials and telephone check-ins to monitor their presentation and level of risk. If a patient's level of risk were to increase, this would be reviewed by a clinician and appropriate action taken.

Summary timeline

A summary timeline of deadlines for tasks to be achieved is included in Appendix 3. Please note, dates shown are targets for completion rather than start dates. Where possible, work will begin immediately in order to implement strategy objectives as soon as is safe and practicable. **Monitoring**

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The Strategy will be monitored by a multi-disciplinary working group. In addition to a member of the Emotional Wellbeing Service, the working group will include a service user, a representative from the ward at KEMH, a representative from Social Services and a medical officer. This Emotional Wellbeing Strategy Working Group will monitor progress and will report back to the HMSC on an annual basis.

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1. Patients First			
1.1. Continue to develop our service to provide a patient-centred, equitable service to all who need it.	1.1.1. Develop model of service provision based on the unique needs and population in the Falkland Islands through reviewing and monitoring referral and caseload data. This model will emphasise the importance of island-wide engagement, support, and intervention.	 As a starting point, we have developed a service delivery model (Appendix 2) based on the World Health Organisation (2003) recommended optimal mix of mental health services, and this should be reviewed and revised annually over the next 5 years according to data collected. Islands Plan 2018 – 2022 aims to: Develop and implement a mental health strategy that recognises the importance of good mental health Maintain and improve our existing resources and services and invest in developments to support the current and future wellbeing of everyone in the Falkland Islands Develop public services and infrastructure to meet the needs of our growing population Ensure that everyone within our community is supported to enjoy a healthy lifestyle Maintain and further develop standards of healthcare across the Falkland Islands 	To be reviewed annually and fully implemented by the end of 2026

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1.1. Continue to develop our service to provide a patient-centred, equitable service to all who need it (cont.)	 1.1.2. Involve patients and their nominated support people and systems in making treatment decisions, including other agencies where appropriate (e.g. Education, RFIP, CST, employers, other teams in HSS, family/friends, etc.) Introduce shared planning documents (for example, Keeping Well Plans) as standard practice to ensure patients and their support systems are actively involved in the active care planning. 1.1.3. Streamline referral process to ensure patients and professionals can easily make 	 Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle Provide high quality treatment and support across all of our health and social care services Mental Health Action Plan: Development of Care Pathway for all mental health admissions to include: 1e – A recognised tool for Carer/Family/Next of Kin engagement Islands Plan 2018-2022 aims to: Ensure that everyone within our community is supported to enjoy a 	Ongoing, with immediate effect Audit and review by end of 2024 Ongoing, with immediate effect Audit and review by end of 2023
	referrals to the service. 1.1.4. Increase accessibility to services and visibility of services agrees all islands by offering Comp	 healthy lifestyle Maintain and further develop standards of healthcare across the Falkland Islands Islands Plan 2018 – 2022 aims to: Ensure that everyone within our account of the enclose the enclos	To be trialled, reviewed and fully implemented by the end of 2024
	across all islands by offering Camp clinics.	 community is supported to enjoy a healthy lifestyle Continue to develop community ser- vices 	

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1.1. Continue to develop our service to provide a patient-centred, equitable service to all who need it (cont.)	1.1.5. Monitor service requirements through ongoing data collection and respond to service need with appropriate levels of staffing, including the development of roles for unregistered staff within the Emotional Wellbeing Service in order to support mental health care and treatment.	Mental Health Action Plan, Target 4: Role of Unregistered staff should be developed to support mental healthcare and treatment Islands Plan 2018 – 2022 aims to: • Develop our workforce, ensuring we have the skills needed to carry our nation forward	Ongoing, with immediate effect Review and revise by the end of 2023
1.2. Deliver safe, evidence-based care and drive quality improvements in order to offer the best care possible	1.2.1. Monitoring caseloads to ensure safe practice through supervision and ongoing team data collection.	Manageable caseloads improve staff morale, reduce the risk of burnout and improve patient outcomes. Mental Health Action Plan, Target 5: Mental health admissions are supported by specialist mental health practitioners 5a – High level review of caseload management and current practice is undertaken 5b – Agree as to how much CPN time is allocated to support in-patients and staff 5c – Access to out of hours or weekend specialist mental health input is required 5d – Agreement as to the level of access to the on-island CPN expertise	Ongoing, with immediate effect
	1.2.2. Encourage culture of reflective practice and shared decision-making through the use of use of regular individual and peer clinical supervision to support team	In line with good practice guidelines and professional registration recommendations (e.g. Nursing and Midwifery Council, British Psychological	Starting with immediate effect. Review annually.

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1.2. Deliver safe, evidence-based care and drive quality improvements in order to offer the best care possible (cont.)	to reflect on best practice, particularly in complex cases.	Society, Health and Care Professions Council). High quality reflective supervision has been shown to reduce the risk of compassion fatigue and burnout (Edwards et al., 2006)	
	1.2.3. Identify or develop standardised general risk assessment tool (to sit alongside existing STORM suicide risk assessment) to ensure all aspects of risk are considered.	 Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions to include: 1a – Evidence based standardised risk assessment Islands Plan 2018 – 2022 aims to: Ensure that everyone within our com- munity is supported to enjoy a healthy lifestyle Progress safeguarding activities for vulnerable people of all ages 	To be completed by the end of 2022
	1.2.4. Continue to develop standardised system for recording care plans to ensure care plans are up-to-date and created collaboratively with patients.	Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions to include: 1b – Care Plan development 1c – Responsibilities of all health professionals 1g – Specific plans for periods off the ward including absconding	To be completed by the end of 2023
	1.2.5. Monitor use of prescription medication via auditing, and reduce unnecessary prescribing in	Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions to include;	Initial auditing and monitoring to be started as soon as possible, and completed by the end of 2024. Action

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1.2. Deliver safe, evidence-based care and drive quality improvements in order to offer the best care possible (cont.)	order to reduce the risk of iatrogenic harm (which is harm that is inadvertently caused by treatment). 1.2.6. Continue to improve connections between Emotional	 1a – Evidence based standardised risk assessment 1c – Responsibilities of all health professionals 1f – Medicine Management Islands Plan 2018 – 2022 aims to: Develop and implement a mental 	plan to reduce unnecessary prescribing to be implemented by the end of 2025 Ongoing, with immediate effect
	Wellbeing Service and the wider Health and Social Services team. In addition to physically moving to the shared primary care area of the hospital and regular attendance at ward rounds, the team will increase presence at wider Health and Social Services meetings.	 health strategy that recognises the importance of good mental health Maintain and improve our existing resources and services Develop public services and infrastructure to meet the needs of our growing population 	
		In line with good practice guidelines and professional registration recommendations (e.g. Nursing and Midwifery Council, British Psychological Society, Health and Care Professions Council).	
		Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions 1d – Structure and frequency of MDT meetings Mental Health Action Plan, Target 4: 4b – Handovers or 'huddles' should include all staff involved to allow input.	

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1.2. Deliver safe, evidence-based care and drive quality improvements in order to offer the best care possible (cont.)	1.2.7. Ensure that robust multi- agency policies and plans are in place to reduce the risks associated with mental health disorders, including suicide and self-harm.	 Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions Mental Health Action Plan, Target 2: A safe, therapeutic space should be available for all mental health admissions to include: 2a – An area within the ward to be as 'safe' and therapeutic to meet the needs of individuals (completed 02/11/2021) 2b – Provision of a timetable of activities and engagement In line with good practice guidelines and professional registration recommendations (e.g. Nursing and Midwifery Council, British Psychological Society, Health and Care Professions Council) 	To be completed by the end of 2024
1.3. Develop clear and consistent care pathways in order to ensure patients receive appropriate, timely care.	1.3.1. Develop robust, useful pathways for mental health assessment and treatment for children, working age adults and older adults.	Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions	To be completed by the end of 2023
	1.3.2. Develop pathway for patients referred for neurodevelopmental and cognitive assessment for children, working age adults and older adults.	In line with good practice guidelines and professional registration recommendations (e.g. Nursing and Midwifery Council, British Psychological Society, Health and Care Professions Council).	To be completed by the end of 2021

Specific objective	Measurable & Attainable	Relevance/rationale	Time frame for implementation
(What ?)	(How?)	(Why?)	(When ?)
1.3. Develop clear and consistent care pathways in order to ensure patients receive appropriate, timely care (cont.)	1.3.3 Develop pathway to support people's emotional wellbeing through the MTO process via liaison with the Overseas Medical Coordinator and the Service User	 Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle Ensure suitable support for people 	To be completed by the end of 2025
	Participation Group.	requiring medical treatment overseas	
1.4. Collect and respond to feedback about our service	1.4.1. Offer patients regular opportunities to give us feedback so that we can respond with a 'you said, we did' approach.	In line with recommendations made by World Health Organization (2010) User empowerment in mental health.	Ongoing, with immediate effect. Formalise approach and embed in standard practice by end of 2026
	1.4.2. Respond to issues identified in the Health In Mind Survey (2017).	Health In Mind Survey (2017)	Ongoing – to be reviewed by the end of 2026
	1.4.3. Develop a service user participation forum in order to foster meaningful engagement with service users and carers. The purpose of this engagement will be to ensure that the views of service users and carers are central to decision making about service delivery and development, as well as at the heart of decision making about their own care.	In line with recommendations made by World Health Organization (2010) User empowerment in mental health. Mental Health Action Plan, Target 6: A strategic, consistent, balanced voice for mental health in the Falkland Islands is required 6a – FIG should reflect as to who at strategic level should champion mental health issues 6b – Development of an overall mental health strategy covering both service delivery and public health Mental Health Action Plan, Target 1: Development of Care Pathway for all mental health admissions	Start developing forum in 2021 Embed service user participation practice between 2022 and 2024 Review and revise between 2024 and 2026

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
1.4. Collect and respond to feedback about our service (cont.)		1h – Develop a Mental Health Improvement Group to develop the local mental health pathway	
2. Resilient Community			
Specific Recommendation	Measurable & Attainable	Relevant/ rationale (Current	Time frame for implementation
(What ?)	(How?)	evidence/ health indicator) (Why?)	(When ?)
2.1. Ensure mental health resources and services are easily accessible to all members of the Falkland Islands community	 2.1.1. Develop local and digital resource banks (e.g. psychoeducation material and self-help material) to ensure residents in Town and Camp have easy access to information and services. 2.1.2. Ensure mental health resources are available in a service in a serv	 Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle Provide high quality treatment and support across all of our health and social care services Support health promotion and disease prevention Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community and the services 	To be completed by the end of 2022 To be reviewed and updated annually To be completed by the end of 2025
	recognised community languages. 2.1.3. Contribute to Public Health data collection (by responding to requests for data) to enable their monitoring of population needs and chronic disease management.	 munity is supported to enjoy a healthy lifestyle Support health promotion and disease prevention Continue to develop community services Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle 	Starting with immediate effect. Review by the end of 2024.

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
2.1. Ensure mental health resources and services are easily accessible to all members of the Falkland Islands community (cont.)		 Develop and implement a mental health strategy that recognises the importance of good mental health Support health promotion and dis- ease prevention Mental Health Action Plan, Target 7: A proactive strategy should be explored to identify how mental health is seen as a public health issue 7a – As part of the mental health strategy, to identify broader work around 	
2.2. Increase the focus on proactive emotional wellbeing strategies including prevention and early intervention in order to nurture resilience in individuals and in the community	2.2.1. Engage with partner services (including Social Services, Royal Falkland Islands Police, Education and other teams within the Health service) to deliver training, workshops and direct access to services designed to increase focus on prevention and early intervention.	 mental health and suicide awareness Islands Plan 2018 – 2022 aims to: Develop and implement a mental health strategy that recognises the importance of good mental health Support health promotion and disease prevention Continue to develop community services Encourage a culture of continued learning and professional development Develop our workforce, ensuring we have the skills needed to carry our nation forward Encourage life-long learning across the Falkland Islands 	Ongoing development with training and workshops being introduced annually

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
2.2. Increase the focus on proactive emotional wellbeing strategies including prevention and early intervention in order to nurture	2.2.2. Improve signposting to self- help resources and community resources through direct patient contact and media presence. 2.2.3. Help to nurture robust	 Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle Maintain and improve our existing resources and services 	To be completed by the end of 2023 To be completed by the end of 2025
resilience in individuals and in the community (cont.)	Occupational Health services for staff within and outside FIG.	High levels of work-related stress suggest targeted occupational health support may reduce emotional wellbeing referrals. The Mental Health Strategy background document (Rimicans, 2020) suggests that up to 15% of referrals to the Community Psychiatric Nurses in 2019 involved work related stress	To be completed by the end of 2025
		Mental Health Action Plan, Target 7: A proactive strategy should be explored to identify how mental health is seen as a public health issue 7a – As part of the mental health strategy, to identify broader work around mental health and suicide awareness	
	2.2.4. Identify and respond to areas of need through ongoing data collection and monitoring, including service-user perspectives.	 Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle Maintain and improve our existing resources and services Develop public services and infrastructure to meet the needs of our growing population 	Start developing data systems in 2021 Embed system of data collection and analysis between 2022 and 2024 Review and revise between 2024 and 2026

Specific objective	Measurable & Attainable	Relevance/rationale	Time frame for implementation
(What ?)	(How?)	(Why?)	(When ?)
2.2. Increase the focus on proactive emotional wellbeing strategies including prevention and early intervention in order to nurture resilience in individuals and in the community (cont.)		 Provide high quality treatment and support across all of our health and social care services Maintain and further develop stand- ards of medical and dental healthcare across the Falkland Is- lands Mental Health Action Plan, Target 4: 4a – All staff involved in the care of mental health patients should be included in the collection, recording and communication of information 	

3. Safe and happy workforce			
Specific Recommendation (What ?)	Measurable & Attainable (How?)	Relevant/ rationale (Current evidence/ health indicator) (Why?)	Time frame for implementation (When ?)
3.1. Develop a resilient, stable multidisciplinary mental health team who understand their roles and responsibilities	3.1.1. Develop robust, useful data collection systems (e.g. team referrals and individual caseload spreadsheets) in order to monitor and respond to service demand and capacity issues, ensuring resources are allocated appropriately in both short and long term planning, with a focus on prevention and early intervention.	In line with good practice guidelines and professional registration recommendations (e.g. Nursing and Midwifery Council, British Psychological Society, Health and Care Professions Council). Mental Health Action Plan, Target 4: 4a – All staff involved in the care of mental health patients should be	To be trialled, reviewed and fully implemented by the end of 2022.

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
		included in the collection, recording and communication of information	
3.1. Develop a resilient, stable multidisciplinary mental health team who understand their roles and responsibilities	3.1.2. Assess and respond to training needs of KEMH staff members as well as partner agencies.	Mental Health Action Plan, Target 3: Training for all care staff – meaningful and appropriate 3a – Training needs analysis to be carried	Initial assessment and response strategy to be designed by end of 2022.
(cont).		out 3b – All staff should receive mental health first aid and STORM/Suicide	Ongoing assessments should be carried out annually.
		Awareness Training	Ongoing training should be offered in response to assessments annually.
	3.1.3. Develop protocols to ensure safe therapeutic workloads in order to safeguard staff and to ensure patients receive the best care. Consider developing a staff survey to inform protocols and assist with workload monitoring.	In line with good practice guidelines and professional registration recommendations (e.g. Nursing and Midwifery Council, British Psychological Society, Health and Care Professions Council).	To be completed by end of 2025 (based on earlier work on Objectives 1.1 – 1.3).
3.2. Develop a trauma informed workforce across FIG (and other relevant businesses)	3.2.1. Offer trauma-informed training to any managers and staff	Trauma-informed practice has been shown to reduce the risk of re-	Assess training needs by the end of 2022 as part of 3.1.2, and develop
who are aware of the impact of their work on	who are exposed to difficult	traumatising individuals and to reduce	rolling programme of training to
their own mental health and are able to access support for their own wellbeing	experiences.	the risk of compassion fatigue and burnout (Sweeney et al., 2018)	relevant staff by end of 2025.
	3.2.2. Develop robust supervision structure for all staff exposed to emotionally demanding work.	High quality reflective supervision has been shown to reduce the risk of compassion fatigue and burnout (Edwards et al., 2006)	Supervision is being offered with immediate effect. Review and revise supervision structure by the end of 2024.
	3.2.3. Work with Occupational Health and Human Resources to help develop systems to recognise	In line with good practice guidelines and professional registration recommendations (e.g. Nursing and	To be completed by the end of 2025

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
3.2. Develop a trauma informed workforce	and respond to compassion fatigue and burnout, including contribution to the development of the Health Safety & Well-being policy. Work with Heads of Service and CMT to implement systems.	Midwifery Council, British Psychological Society, Health and Care Professions Council).	
across FIG (and other relevant businesses) who are aware of the impact of their work on their own mental health and are able to access support for their own wellbeing (cont.)	3.2.4. Ensure clear processes are in place following any significant adverse event for supporting staff, patients and families, including clear timescales for reviews.	Mental Health Action Plan, Target 8: A clear process be put in place following any significant adverse event for supporting staff and patients and families A clear process and timescales for reviews	Process is now in place. Review in 2023.
4. Progress and Development			
Specific Recommendation (What ?)	Measurable & Attainable (How?)	Relevant/ rationale (Current evidence/ health indicator) (Why?)	Time frame for implementation (When ?)
4.1 Seek to develop our service and our evidence-base through research and innovation	4.1.1. Engage in research projects in order to increase the evidence base for our unique population.	Best practice in mental health service provision is to use 'evidence-based practice', but we currently rely on an evidence base that is usually normed on UK or USA populations, so may not work as well for a Falkland Islands population. In order to develop a locally-relevant evidence base we will need to engage in both small- and large-scale research projects.	Explore opportunities to engage with formal research projects and develop scope for internal small-scale research projects starting by the end of 2022.
5. Sustainability			
Specific Recommendation (What ?)	Measurable & Attainable (How?)	Relevant/ rationale (Current evidence/ health indicator) (Why?)	Time frame for implementation (When ?)

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
 5.1. Nurture a mental health and emotional wellbeing team that is rooted in the local context and allows services to be delivered effectively by any member of the team 5.1. Nurture a mental health and emotional wellbeing team that is rooted in the local context and allows services to be delivered effectively by any member of the team (cont.) 	5.1.1. Develop clear operating procedures that allow new and visiting staff to maintain a consistent, excellent level of care.	 Islands Plan 2018 – 2022 aims to: Ensure that everyone within our community is supported to enjoy a healthy lifestyle Maintain and improve our existing resources and services Develop public services and infrastructure to meet the needs of our growing population 	Initial drafts to be completed by end of 2024. Review and revise by end of 2026.
enectively by any member of the team (cont.)	5.1.2. Encourage local recruitment and continuing professional development in order to improve long-term sustainability of the service.	 Mental Health Action Plan, Target 4: Role of Unregistered staff should be developed to support mental healthcare and treatment 4a – All staff involved in the care of mental health patients should be included in the collection, recording and communication of information 4c – Broad consideration should be given to the development of the role and the support for carers Islands Plan 2018 – 2022 aims to: Maintain and improve our existing resources and services and invest in developments to support the current and future wellbeing of everyone in the Falkland Islands Ensure a culture of succession plan- ning to help avoid workforce and skills gaps 	To start immediately and to continue to explore local recruitment options as well as local staff development options through the 5 year period from 2021-2026.

Specific objective (What ?)	Measurable & Attainable (How?)	Relevance/rationale (Why?)	Time frame for implementation (When ?)
5.1. Nurture a mental health and emotional wellbeing team that is rooted in the local context and allows services to be delivered effectively by any member of the team (cont.)	5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running.	 Develop our workforce, ensuring we have the skills needed to carry our nation forward Islands Plan 2018 – 2022 aims to: Maintain and improve our existing resources and services and invest in developments to support the current and future wellbeing of everyone in the Falkland Islands Develop public services and infrastructure to meet the needs of our growing population Provide high quality treatment and support across all of our health and social care services Maintain and further develop standards of medical and dental healthcare across the Falkland Islands 	Ongoing with immediate effect. Review and adjust practice as appropriate annually.
5.2. Ensure we are running a financially sustainable service	5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly.	 Islands Plan 2018 – 2022 aims to: Maintain and improve our existing resources and services and invest in developments to support the current and future wellbeing of everyone in the Falkland Islands 	To be reviewed annually through ongoing monthly budget monitoring meetings, and throughout the budget- setting process.

Specific objective	Measurable & Attainable	Relevance/rationale	Time frame for implementation
(What ?)	(How?)	(Why?)	(When ?)
5.2. Ensure we are running a financially sustainable service (cont.)		 Develop public services and infrastructure to meet the needs of our growing population Provide high quality treatment and support across all of our health and social care services Maintain and further develop standards of medical and dental healthcare across the Falkland Islands 	

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Emotional Wellbeing Service 5 Year Strategy 2021-2026

Appendices

Appendix 1: Relevant recommendations from the mental health action plan and Island Plan, cross-referenced with relevant Strategy objectives and page numbers

Appendix 2: Initial service provision model for the Emotional Wellbeing Service

Appendix 3: Summary timeline of tasks to be completed

APPENDIX 1: RELEVANT RECOMMENDATIONS FROM MENTAL HEALTH ACTION PLAN AND ISLAND PLAN, CROSS-REFERENCED WITH RELEVANT STRATEGY OBJECTIVE AND PAGE NUMBER

Table 1: Mental Health Action Plan recommendations cross-referenced with relevant strategy page numbers and objective numbers.

Mental Health Action Plan Recommendation	Page number and objective number
1. Development of Care Pathway for all mental health admissions to include:	Pg. 4; Objective 1.1.2
	Pg. 6; Objectives 1.2.3 and 1.2.4
	Pg. 6-7; Objective 1.2.5
	Pg. 8: Objectives 1.2.7 and 1.3.1
1a – Evidence based standardised risk assessment	Pg. 6; Objective 1.2.3
	Pg. 6-7; Objective 1.2.5
1b – Care Plan development	Pg. 6; Objective 1.2.4
1c – Responsibilities of all health professionals	Pg. 6; Objective 1.2.4
	Pg. 6-7; Objective 1.2.5
1d – Structure and frequency of MDT meetings	Pg. 7; Objective 1.2.6
1e – A recognised tool for Carer/Family/NoK engagement	Pg. 4; Objective 1.1.2
1f – Medicine Management	Pg. 6-7; Objective 1.2.5
1g – Specific plans for periods off the ward including absconding	Pg. 6; Objective 1.2.4
1h – Develop a Mental Health Improvement Group to develop the local mental health pathway	Pg. 9-10; Objective 1.4.3

2. A safe, therapeutic space should be available for all mental health admissions to include:	Pg. 8; Objective 1.2.7
2a – An area within the ward to be as 'safe' and therapeutic to meet the needs of individuals	
2b – Provision of a timetable of activities and engagement	
3. Training for all care staff – meaningful and appropriate	Pg. 14; Objective 3.1.2
3a – Training needs analysis to be carried out	
3b – All staff should receive mental health first aid and STORM/Suicide Awareness Training	
4. Role of Unregistered staff should be developed to support mental healthcare and treatment	Pg. 5; Objective 1.1.5 Pg. 16; Objective 5.1.2
4a – All staff involved in the care of mental health patients should be included in the collection,	Pg. 12-13; Objective 2.2.4
recording and communication of information	Pg. 13-14; Objective 3.1.1
	Pg. 16; Objective 5.1.2
4b – Handovers or 'huddles should include all staff involved to allow input	Pg. 7; Objective 1.2.6
4c – Broad consideration should be given to the development of the role and the support for carers	Pg. 16; Objective 5.1.2
5. Mental health admissions are supported by specialist mental health practitioners	Pg. 5; Objective 1.2.1
5a – High level review of caseload management and current practice is undertaken	
5b – Agree as to how much CPN time is allocated to support in-patients and staff	
5c – Access to out of hours or weekend specialist mental health input is required	
5d – Agreement as to the level of access to the on-island CPN expertise	
 A strategic, consistent, balanced voice for mental health in the Falkland Islands is required 6a – FIG should reflect as to who at strategic level should champion mental health issues 	Pg. 9-10; Objective 1.4.3
6b – Development of an overall mental health strategy covering both service delivery and public health	Throughout this document
7. A proactive strategy should be explored to identify how mental health is seen as a public health	Pg. 10-11; Objective 2.1.3
issue	Pg. 12; Objective 2.2.3

7a – As part of the mental health strategy, to identify broader work around mental health and suicide awareness	
8. A clear process be put in place following any significant adverse event for supporting staff and patients and Families	Pg. 15; Objective 3.2.4
8 – A clear process and timescales for reviews	

Table 2: Islands Plan aims cross-referenced with relevant strategy page numbers and objective numbers.

Islands Plan Aim	Page number and objective number
Develop and implement a mental health strategy that recognises the importance of good mental	Pg. 3; Objective 1.1.1
health	Pg. 7; Objective 1.2.6
	Pg. 10-11; Objective 2.1.3
Maintain and improve our existing resources and services and invest in developments to support the	Pg. 3; Objective 1.1.1
current and future wellbeing of everyone in the Falkland Islands	Pg. 7; Objective 1.2.6
	Pg. 12; Objective 2.2.2
	Pg. 12-13; Objective 2.2.4
	Pg. 15-16; Objective 5.1.1
	Pg. 16; Objective 5.1.2
	Pg. 17; Objective 5.1.3
	Pg. 17-18; Objective 5.2.1
Develop public services and infrastructure to meet the needs of our growing population	Pg. 3; Objective 1.1.1
	Pg. 7; Objective 1.2.6
	Pg. 17; Objective 5.1.3
	Pg. 17-18; Objective 5.2.1
Ensure that everyone within our community is supported to enjoy a healthy lifestyle	Pg. 3; Objective 1.1.1
	Pg. 4; Objectives 1.1.2, 1.1.3, 1.1.4
	Pg. 6; Objective 1.2.3
	Pg. 9; Objective 1.3.3
	Pg. 10; Objectives 2.1.1 and 2.1.2

	Pg. 10-11; Objective 2.1.3 Pg. 12; Objective 2.2.2 Pg. 12-13; Objective 2.2.4 Pg. 15-16; Objective 5.1.1
Provide high quality treatment and support across all of our health and social care services	Pg. 4; Objective 1.1.2 Pg. 10; Objective 2.1.1 Pg. 12-13; Objective 2.2.4 Pg. 17; Objective 5.1.3 Pg. 17-18; Objective 5.2.1
Support health promotion and disease prevention	Pg. 10; Objectives 2.1.1 and 2.1.2 Pg. 10-11; Objectives 2.1.3 Pg. 11; Objective 2.2.1
Maintain and further develop standards of medical and dental healthcare across the Falkland Islands	Pg. 3; Objective 1.1.1 Pg. 4; Objective 1.1.3 Pg. 12-13; Objective 2.2.4 Pg. 17; Objective 5.1.3 Pg. 17-18; Objective 5.2.1
Continue to develop community services	Pg. 4; Objective 1.1.4
Ensure suitable support for people requiring medical treatment overseas	Pg. 9; Objective 1.3.3
Progress safeguarding activities for vulnerable people of all ages	Pg. 6; Objective 1.2.3
Ensure a culture of succession planning to help avoid workforce and skills gaps	Pg. 16; Objective 5.1.2 Pg. 17; Objective 5.1.3
Encourage a culture of continued learning and professional development	Pg. 11; Objective 2.2.1
Develop our workforce, ensuring we have the skills needed to carry our nation forward	Pg. 5; Objective 1.1.5

	Pg. 11; Objective 2.2.1 Pg. 16; Objective 5.1.2
Encourage life-long learning across the Falkland Islands	Pg. 11; Objective 2.2.1

Appendix 2: Initial service provision model for the Emotional Wellbeing Service Service provision model for the Emotional Wellbeing Service

Who fits in this tier	?	Interventions offered
Actively high risk, e.g. suicidal and ur maintain safety	hable to Tier 4 Intensive Provided by MDT	Inpatient admission
People who require highly specialise assessments and interventions People with severe & enduring psychiatric illness, e.g. personality disorder, chronic addiction, psychotic disorder. Moderate to high risk.	Specialised intervention	Intensive/long-term 1:1 support for more complex/riskier presentation. Highly specialised interventions, e.g. neurodevelopmental assessments
People with mild to moderate mental health difficulties. People at risk of developing significant mental health disorders Low to moderate risk.	Tier 2 Early intervention and targeted support May be provided by non-professionally registered staff under appropriate supervision	Groups (e.g. Thrive, Incredible Years, ACTivate Your Life, Stress Control, Blame it on the Brain), Focused1:1 interventions (e.g. CBT, ACT, Behavioural Activation), targeted consultation (e.g. ward round)
The whole community	Tier 1 Universal May be provided by non-professionally registered stafj under appropriate supervision	Self-help, consultation, psychoeducation/training, open access groups, Mental Health First Aid, Occupational Health support

Appendix 3: Summary timeline of tasks to be completed

Tasks to be completed
1.1.1. Develop model of service provision based on the unique needs and population in the Falkland Islands – IMPLEMENT PROVISIONAL SERVICE PROVISION MODEL
1.1.2. Involve patients and their nominated support people in decision making treatments decisions. Introduce shared planning documents (for example, Keeping Well Plans) as standard practice to ensure patients and their support systems are actively involved in the active care planning – INTRODUCE PROCESSES AND SYSTEMS
1.1.3. Streamline referral process to ensure patients and professionals can easily make referrals to the service – TRIAL NEW PROCESS 1.1.5. Monitor service requirements through ongoing data collection and respond to service need with appropriate levels of staffing, including the development of roles for unregistered staff within the Emotional Wellbeing Service in order to support mental health care and treatment – ASSESS POTENTIAL ROLE OF UNREGISTERED STAFF
1.2.1. Monitoring caseloads to ensure safe practice through supervision and ongoing team data collection – initial data collection system set up 1.2.2. Encourage culture of reflective practice and shared decision-making through the use of use of regular individual and peer clinical supervision to support team to reflect on best practice, particularly in complex cases.
 1.2.6. Improve connections between Emotional Wellbeing Service and the wider Health and Social Services team. 1.3.2. Develop pathway for patients referred for neurodevelopmental assessment. 1.4.1. Offer patients regular opportunities to give us feedback so that we can respond with a 'you said, we did' approach – TRIAL FEEDBACK
STRATEGIES 1.4.3. Develop a service user participation forum in order to foster meaningful engagement with service users and carers – INITIAL PLANNING FOR DEVELOPMENT OF FORUM
2.1.3. Contribute to Public Health data collection (by responding to requests for data) to enable their monitoring of population needs and chronic disease management – liaise with public health regarding what data collection will be required.
 2.2.1. Engage with partner services (including Social Services, Royal Falkland Islands Police, Education and other teams within the Health service) to deliver training, workshops and direct access to services designed to increase focus on prevention and early intervention. 2.2.4. Identify and respond to areas of need through ongoing data collection and monitoring, including service-user perspectives – DEVELOP DATA SYSTEMS

Tasks to be completed
4.2.1. Engage in research projects in order to increase the evidence base for our unique population.
5.1.2. Encourage local recruitment and in order to improve long-term sustainability of the service.
5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running
5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly.
 1.1.3. Streamline referral process to ensure patients and professionals can easily make referrals to the service – EMBED IN PRACTICE 1.1.5. Monitor service requirements through ongoing data collection and respond to service need with appropriate levels of staffing, including the development of roles for unregistered staff within the Emotional Wellbeing Service in order to support mental health care and treatment – IF APPROPRIATE, RECRUIT UNREGISTERED STAFF 1.2.3. Identify or develop standardised general risk assessment tool (to sit alongside existing STORM suicide risk assessment) to ensure all aspects of risk are considered. 1.4.3. Develop a service user participation forum in order to foster meaningful engagement with service users and carers – DEVELOP FORUM AND EMBED AS STANDARD PRACTICE WITHIN THE SERVICE 2.1.1. Develop local resource banks (e.g. psychoeducation material and self-help material) to ensure residents in Town and Camp have easy access to information and services 2.2.1. Engage with partner services (including Social Services, Royal Falkland Islands Police, Education and other teams within the Health service) to deliver training, workshops and direct access to services designed to increase focus on prevention and early intervention - REVIEW 2.2.4. Identify and respond to areas of need through ongoing data collection and monitoring, including service-user perspectives – EMBED DATA SYSTEMS IN TEAM CULTURE 3.1.1. Develop robust, useful data collection systems (e.g. team referrals and individual caseload spreadsheets) in order to monitor and respond to service demand and capacity issues, ensuring resources are allocated appropriately in both short and long term planning. 3.1.2. Assess and respond to training needs of KEMH staff members as well as partner agencies – AUDIT TRAINING NEEDS AND PLAN RESPONSE 4.2.1. Engage in research projects in order to increase the evidence base for our unique population.
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Year	Tasks to be completed
	5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running – REVIEW
	5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly – REVIEW
2023	1.1.3. Streamline referral process to ensure patients and professionals can easily make referrals to the service – AUDIT AND FINALISE
	1.1.5. Monitor service requirements through ongoing data collection and respond to service need with appropriate levels of staffing, including the development of roles for unregistered staff within the Emotional Wellbeing Service in order to support mental health care and treatment – REVIEW AND REVISE
	1.2.1. Monitoring caseloads to ensure safe practice through supervision and ongoing team data collection – REVIEW AND REVISE.
	1.2.4. Continue to develop standardised system for recording care plans to ensure care plans are up-to-date and created collaboratively with patients – AUDIT PLANS AND REVISE IF NEEDED
	1.3.1. Develop robust, useful pathways for mental health assessment and treatment.
	2.1.3. Contribute to Public Health data collection (by responding to requests for data) to enable their monitoring of population needs and chronic disease management – review.
	2.2.1. Engage with partner services (including Social Services, Royal Falkland Islands Police, Education and other teams within the Health service) to deliver training, workshops and direct access to services designed to increase focus on prevention and early intervention - REVIEW 2.2.2. Improve signposting to self-help resources and community resources.
	3.1.2. Assess and respond to training needs of KEMH staff members as well as partner agencies – REVIEW TRAINING NEEDS
	3.2.4. Ensure clear processes are in place following any significant adverse event for supporting staff, patients and families, including clear timescales for reviews – AUDIT PROCESS AND AMEND AS NECESSARY.
	5.1.2. Encourage local recruitment and in order to improve long-term sustainability of the service.
	5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running - REVIEW
	5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly REVIEW

Year	Tasks to be completed
2024	1.1.2. Involve patients and their nominated support people in decision making treatments decisions. Introduce shared planning documents (for
2024	example, Keeping Well Plans) as standard practice to ensure patients and their support systems are actively involved in the active care planning – AUDIT AND AMEND AS NECESSARY
	1.1.4. Increase accessibility to services and visibility of services across all islands by offering Camp clinics.
	1.2.5. Monitor use of prescription medication and reduce unnecessary prescribing in order to reduce the risk of iatrogenic harm (which is harm that is inadvertently caused by treatment) – AUDIT AND MONITOR PRESCRIBING OF PSYCHIATRIC MEDICATION
	1.2.7. Ensure that robust multi-agency policies and plans are in place to reduce the risks associated with mental health disorders, including suicide and self-harm.
	2.2.1. Engage with partner services (including Social Services, Royal Falkland Islands Police, Education and other teams within the Health
	service) to deliver training, workshops and direct access to services designed to increase focus on prevention and early intervention - REVIEW
	2.2.4. Identify and respond to areas of need through ongoing data collection and monitoring, including service-user perspectives – REVIEW AND REVISE
	3.1.2. Assess and respond to training needs of KEMH staff members as well as partner agencies – REVIEW TRAINING NEEDS
	3.2.2. Develop robust supervision structure for all staff exposed to emotionally demanding work – AUDIT AND REVISE SUPERVISION STRUCTURE AS APPROPRIATE
	5.1.1. Develop clear operating procedures that allow new and visiting staff to maintain a consistent, excellent level of care – COMPLETE INITIAL DRAFTS
	5.1.2. Encourage local recruitment and in order to improve long-term sustainability of the service.
	5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running - REVIEW
	5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly – REVIEW
2025	1.2.5. Monitor use of prescription medication and reduce unnecessary prescribing in order to reduce the risk of iatrogenic harm (which is harm that is inadvertently caused by treatment) – ACTION PLAN TO REDUCE UNNECESSARY PRESCRIBING TO BE IMPLEMENTED

Year	Tasks to be completed
	1.3.3 Develop pathway to support people's emotional wellbeing through the MTO process via liaison with the Overseas Medical Coordinator and the Service User Participation Group.
	2.1.2. Ensure mental health resources are available in recognised community languages.
	2.2.1. Engage with partner services (including Social Services, Royal Falkland Islands Police, Education and other teams within the Health
	service) to deliver training, workshops and direct access to services designed to increase focus on prevention and early intervention - REVIEW 2.2.3. Help to nurture robust Occupational Health services for staff within and outside FIG.
	3.1.2. Assess and respond to training needs of KEMH staff members as well as partner agencies – REVIEW TRAINING NEEDS
	3.1.3. Develop protocols to ensure safe therapeutic workloads in order to safeguard staff and to ensure patients receive the best care. Consider developing a staff survey to inform protocols and assist with workload monitoring.
	3.2.1. Offer trauma-informed training to managers and staff.
	3.2.3. Work with Occupational Health and Human Resources to help develop systems to recognise and respond to compassion fatigue and burnout.
	5.1.2. Encourage local recruitment and in order to improve long-term sustainability of the service.
	5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running - REVIEW
	5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly – REVIEW
2026	1.1.1. Develop model of service provision based on the unique needs and population in the Falkland Islands – REVIEW DATA AND EVIDENCE OF PREVIOUS 4 YEARS IN ORDER TO FINALISE A SUITABLE MODEL OF SERVICE PROVISION AND RESOURCE ALLOCATION
	1.2.1. Monitoring caseloads to ensure safe practice through supervision and ongoing team data collection – REVIEW AND REVISE
	1.4.1. Offer patients regular opportunities to give us feedback so that we can respond with a 'you said, we did' approach – REVIEW AND REVISE 1.4.2. Respond to issues identified in the Health In Mind Survey (2017).
	1.4.3. Develop a service user participation forum in order to foster meaningful engagement with service users and carers – REVIEW AND REVISE 2.2.4. Identify and respond to areas of need through ongoing data collection and monitoring, including service-user perspectives – REVIEW AND REVISE

Tasks to be completed
3.1.2. Assess and respond to training needs of KEMH staff members as well as partner agencies – REVIEW TRAINING NEEDS
5.1.1. Develop clear operating procedures that allow new and visiting staff to maintain a consistent, excellent level of care – REVIEW AND FINALISE DRAFT PROCEDURES
5.1.2. Encourage local recruitment and in order to improve long-term sustainability of the service.
5.1.3. Work to embed the services we offer (e.g. training, consultation, supervision and therapy) within the systems at FIG so they do not rely on specific individuals to keep running - REVIEW
5.2.1. Working closely with the Finance Department, Treasury and senior management team to plan budgets and review spending accordingly – REVIEW