

Thrive Edinburgh is a city where every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to her or his community¹. Our ability to thrive as human beings and as a city is closely



thrive

**A Progress Update on Thrive Pillars
and Workstreams**

EDINBURGH

February 2024

This year we said a fond farewell to long standing “Thrivester” Prappy Campbell as she retired from NHS Lothian following a long and successful career. Prappy was renowned for her kindness, patience, organisational skills and keeping us all on track. She will be greatly missed by the team and many of our partners. We wish Prappy well with this next exciting phase of her life.



The Legend – Prappy at our 2022 Corrie in for Christmas event with Lothian Buses!

1.0 Introduction

- 1.1 In our 2022 report we highlighted the enormous impact that the pandemic had on people from across communities and ages. This year we have seen further uncertainty with the cost-of-living and housing crisis, concern over our planet with global warming, and countries at war, just to mention a few. We know that these uncertainties can bring fear, anxiety, and elements of distrust into people's lives. This is exacerbated if you are already living with a mental health illness. Our services and supports need to be designed and delivered in a way to be able respond to the needs of people when people encounter these uncertainties.
- 1.2 At Thrive Edinburgh we are proud to have built strong relationships with our partners, colleagues, and communities, and ensure that the voice, needs, and aspirations of people with lived and living experience, and carers are at the centre of what we do. We could not deliver what we do without you all so thank you.
- 1.3 This document sets out the aspirations of Thrive Edinburgh and what we have delivered against our Thrive Pillars and our Adult Health and Social Care Workstreams and Change Programmes in 2023.
- 1.4 We hope that this document provides a helpful overview and supplements our Thrive #4 Conference **Curious! An Opportunity ...** report where 120 participants gathered on 24 November 2024 to explore the different programmes and activities we deliver. You can access the report here: <https://bit.ly/3wpp3FB>

2. Thrive Edinburgh - A mental health and wellbeing road map for all 2019-2029

- 2.1 Thrive Edinburgh is a city where every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to her or his community.¹ Our ability to thrive as human beings and as a city is closely tied to our mental health.
- 2.2 We need to think big and think differently. We should have big ambitions and long-term strategic aims when it comes to mental health. We have made it our goal to promote mental health and protect our citizens resiliency, self-esteem, family strength and joy and reduce the toll of mental illness on individuals, our communities, and our city.
- 2.3 The Thrive Collaboration offers a fresh and exciting public health approach to urban mental health, built on explicit principles for action that guide, anchor, and align work along the wide breadth of its vision. Thrive Edinburgh offers an opportunity for the Capital City to not only reduce the toll of mental illness, but also promote and protect the citizens of Edinburgh's mental health, resilience, self-esteem, family strength, and joy.
- 2.4 In June 2019, the Edinburgh Community Partnership supported Thrive Edinburgh and the opportunities for national and international collaboration and knowledge building. They

¹ Adapted from the World Health Organisation

agreed to accelerate progress with our shared priorities through synergistic and collaborative working.

- 2.5 The establishment of the Thrive Edinburgh Assembly, comprising a group of thought leaders gathered in one place for a common purpose, serves as a key vehicle for identifying mental health initiatives, policy enactment and collaborative working. It also ensures that the city is effectively implementing these initiatives, especially those that involve multiple agencies, by tracking their progress and engaging in collaborative problem solving with multiple stakeholders driving the transformational change required to produce inclusive, equitable, community solutions to urban challenges.
- 2.6 The Thrive Edinburgh Assembly is a system leadership partnership, with clarity of purpose and an overview of the mental health and wellbeing landscape in Edinburgh. The Assembly focuses on prevention and place, exerting leadership across the council, place, and the health and care system, including member's individual organisations; provides challenge, support and inspiration to partnership boards across the city that have a direct influence on the social determinants of care; develops and promotes a city voice for mental health and wellbeing which is able to influence beyond organisational and city boundaries, including national and international government bodies and policy.
- 2.7 We are pleased the city's Lord Provost Robert Aldridge continues to chair Thrive Edinburgh and provides some great advice on how we can maximise our impact.
- 2.8 The City's commitment to the Community Plan, Regional City Deal, the Poverty Commission, and the pioneering work of the 2050 City Vision have clearly recognised the value of citywide planning with citizens, academia, the public sector, the third sector, arts and culture and the business community.
- 2.9 **Thrive Values** - All services and support commissioned to deliver on behalf of Thrive are underpinned by shared values and should embrace these during all interactions with people, other staff and colleagues, and organisations:
- We make shared decisions and value people's skills and experiences.
 - We always work collaboratively with a flattened hierarchy.
 - We always build trust and foster empathetic and honest relationships.
 - We are always person centered.
 - We show kindness and compassion and treat people with respect and dignity.
 - We always start with people's strengths and build on these.
 - We always engage people as citizens in their community and embrace the whole person.
 - We give permission to try new things, adapt, and learn.
 - We deeply believe our people are our greatest assets.
 - We always treat people as equal partners.
- 2.10 **Thrive Outcomes** - As part of Thrive we have developed an outcomes evaluation framework which reflects both person centred outcomes and system/financial outcomes.

Outcomes for citizens and people using mental health services and support:

- People have choice and control.
- People are recovering, staying well and can live the life they want to lead.
- People feel connected and have positive relationships.
- People are living in settled accommodation of their choice where they feel safe and secure.
- People have opportunities to learn, work and volunteer.
- People receive good quality, person-centered help, care, and support.

System and financial outcomes:

- Timely access to high-quality person-centered help and support when and where it is needed.
- Reduced levels of mental and emotional distress
- Reduction in unplanned and crisis health and social care utilization, including emergency response as well as institutional placements.

Thrive on a Page



- 2.11 Our 4th Thrive Edinburgh Conference took place on 24 November 2023. It was an in-person event attended by over 120 people and focussed **Curious! An Opportunity....** You can access the report here: <https://bit.ly/3wpp3FB>

3. Practice and Policy Drivers

3.1 Scottish Government's Mental Health and Wellbeing Strategy

On 29 June 2023 the Scottish Government published the Mental Health and Wellbeing Strategy 2023 – 2025 which describes the approach the Scottish Government will undertake to improve mental health for everyone in Scotland.

- 3.2 This Strategy lays out our long-term vision and approach to improving the mental health and wellbeing of everyone in Scotland. Acknowledging that there is a long way to go, the strategy describes what a highly effective and well-functioning mental health system should look like – with the right support available, in the right place, at the right time, whenever anyone asks for help

- 3.3 The Strategy sets out nine objectives:

- Improved overall mental wellbeing and reduced inequalities.
- Improved quality of life for people with mental health conditions, free from stigma and discrimination.
- Improved knowledge and understanding of mental health and wellbeing and how to access appropriate support.
- Better equipped communities to support people's mental health and wellbeing and provide opportunities to connect with others.
- More effective cross-policy action to address the wide-ranging factors that impact people's mental health and wellbeing.
- Increased availability of timely, effective support, care and treatment that promote and support people's mental health and wellbeing, meeting individual needs.
- Better informed policy, support, care and treatment, shaped by people with lived experience and practitioners, with a focus on quality and recovery.
- Better access to and use of evidence and data in policy and practice.
- A diverse, skilled, supported and sustainable workforce across all sectors

3.4 Audit Scotland Report on Adult Mental Health

On 13 September 2023, Audit Scotland published their report on Adult Mental Health Services. The report contains a number of recommendations for the Scottish Government, local authorities and partners, many of which reflect the themes set out in The Scottish Government Strategy.

Table One: Audi Scotland Recommendations

The Scottish Government should:

- implement the recommendations of the independent evaluation of the Distress Brief Intervention (DBI) programme as part of rolling out the DBI programme across Scotland by March 2024
- before the end of 2023, publish its guidance on measuring and evaluating outcomes from mental health and wellbeing services in primary care, which was expected to be published in April 2022

- publish a costed delivery plan, as soon as possible, setting out the funding and workforce needed to establish and accommodate primary care mental health and wellbeing services across Scotland by 2026, including how these services will work with other sectors to provide holistic, person-centred support.
- in the next 12 months, work with Public Health Scotland to start routinely publishing, at least quarterly, how the Scottish Government's psychological therapies specification and quality standards for secondary mental health services are improving the experiences and outcomes for people who use these services.
- in the next 12 months, work with Public Health Scotland to start routinely publishing psychological therapies performance at Health and Social Care Partnership (HSCP) level as well as NHS board level to improve transparency and accountability for psychological therapies services (paragraph 55).

The Scottish Government and Integration Joint Boards (IJBs) should

- urgently progress work to improve the availability, quality, and use of financial, operational and workforce data so that:
 - service and workforce planning, particularly in primary, community, and social care, is based on accurate measures of existing provision and demand (paragraphs 14, 90 and 97)
 - information can be shared between health and social care partners more easily (paragraphs 56–58)
 - they can routinely measure, monitor and report on the quality of mental health services and patient outcomes.
 - the difference that investment is making to patients' outcomes; and how much is being invested in preventative programmes of work and their impact.

IJBs, HSCPs and NHS boards should:

- Should provide people with a choice about whether they access mental health services remotely or face-to-face, in line with the commitment in the Digital Health and Care Strategy

IJBs and councils should:

- urgently improve how mental health, primary care, housing, employability, and welfare support services work together to address and prevent the causes of poor mental health, by developing shared goals and targets, sharing data and jointly funding services.

3.5 HM Inspectorate of Constabulary in Scotland Thematic Review of Policing Mental Health in Scotland

The aim of this thematic review published on 18 October 2023 was to assess the state, efficiency and effectiveness of Police Scotland's provision of mental health-related policing services. Published its thematic review of policing Mental Health in Scotland. The aim of this review was to assess the state, efficiency, and effectiveness of Police Scotland's provision of mental health-related policing services and considered five objectives:

- How well-prepared Police Scotland is to meet the needs of people experiencing poor mental health.

- Whether the police response to mental health-related demand affects the efficiency and effectiveness of the organisation in delivering other policing services
- Whether the organisation understands the demand associated with the provision of mental health-related policing services
- The effectiveness of the force's collaborative working arrangements on the provision of mental health-related policing services
- The impact that the involvement of the police has on the person who is experiencing poor mental health.

3.6 The report made 14 recommendations which will be considered and by the Thrive Get Help When Needed Commissioning and Review Group.

Table Two: Recommendations from the Policing Mental Health Review

Scottish Government should commission a strategic review of the whole system relating to mental health, involving a range of scrutiny bodies.

With the support and engagement of the advisory panel, Police Scotland should develop and publish a mental health strategy (and delivery plan) that clearly articulates its purpose and vision in dealing with mental health-related incidents and allows the recommendations and areas for development highlighted in this review to be progressed.

Police Scotland should establish and implement internal governance arrangements to achieve its mental health strategy and delivery plan, once published.

Police Scotland and the SPA should develop, and report on, a performance management framework setting out how it will police mental health in Scotland.

Police Scotland should provide clear guidance and effective training for officers and staff, in line with its mental health strategy, to help address the culture of risk aversion evident in the policing of mental health-related incidents and to improve outcomes for people experiencing poor mental health.

Police Scotland should engage with partner agencies to re-establish collaborative leadership training to help develop leaders across the whole system, in line with the Scottish Government mental health and wellbeing strategy.

Police Scotland should conduct a full training needs analysis for policing mental health, reflecting its published strategy, to include (but not necessarily limited to) all public-facing roles across the service.

Police Scotland should monitor and report on the impact of the use of its powers, under the Mental Health (Care and Treatment) (Scotland) Act 2003, on under-represented groups.

Police Scotland should review the use and recording of place of safety orders across the organisation to achieve consistency of approach and ensure that reporting of this is included in performance reports to the SPA.

Police Scotland and the SPA should take steps to establish a clear demand picture for

policing mental health.

Police Scotland should, in conjunction with relevant partner organisations, review all Psychiatric Emergency Plans across Scotland and ensure that the police role in dealing with mental health is appropriate, supportive, patient-centred and aligned to Police Scotland's mental health strategy, once established

Police Scotland should ensure consistency of approach across all local policing divisional senior management teams on the oversight of local Psychiatric Emergency Plans.

Police Scotland should take steps to provide ready access to, and encourage the use of, its interim Vulnerable Persons Database by British Transport Police colleagues in Scotland.

Police Scotland and the SPA should put in place measures to monitor progress on the development and implementation of the mental health strategy and the recommendations and areas for development outlined in this review, including recommendations from the VOX lived experience report.

3.7 Mental Health and Wellbeing Delivery Plan 2023-2035

On 7 November 2023 the Scottish Government published the Mental Health and Wellbeing Delivery Plan 2023-2035. The delivery plan incorporated several of the Audit Scotland recommendations within its strategic actions:

Table Three: Strategic Priority Actions

We will work across government and with key stakeholders to develop a shared responsibility and coordinated action for tackling mental health stigma and discrimination, recognising its cross-cutting nature.

Recognising that people need to access mental health and wellbeing advice, resources and support in a range of formats, we will continue to expand the range of information and advice available online, in addition to digital therapies for those requiring further help. This will complement the range of holistic support provided across sectors, in person and by phone, to promote mental health and wellbeing

We will expand the range of digital therapies and resources available, providing free access to trustworthy mental health support at any time.

Recognising the important role that people with lived experience can play as part of the mental health workforce, to improve mental health, we will champion the value of peer support across a range of settings.

Beyond clinical mental health services, a range of services have a role in promoting good mental health and in supporting those with poor mental health. We will work collectively across government and with delivery partners across a range of sectors to ensure the right support is in place at all levels, linking to actions in the Workforce Plan to ensure that frontline workers have a good understanding of mental health and trauma to help reduce

mental health inequalities and barriers to accessing support.

We will work across Government and with a range of national delivery partners to ensure employers and employability support services understand their role in reducing mental health stigma and to help them to actively promote and support the mental health and wellbeing of workers and those seeking employment.

We will work with partners to enhance mental health and wellbeing support in educational settings.

Through our lived experience led Learning Disability and Autism Leadership work, we will continue to develop and disseminate materials and best practice supporting communication around mental health and wellbeing for these communities.

We will continue to provide and improve Community Mental Health and Wellbeing Supports and Services for children, young people and their families, which focus on prevention and early intervention and provide support for emotional distress in a community setting.

We will continue to build capacity in local services and third sector community groups, in order to ensure everyone in Scotland, particularly people most at risk, are able to access mental health and wellbeing support within their local communities

We will drive a shift in the balance of care across mental health to ensure a focus on prevention and early intervention in the community, including a focus on providing high quality mental health care in General Practice.

Implement the Year 1 priorities of our initial three-year action plan which will take us measurably closer to realising the ambitions set out in Creating Hope Together Strategy (2022-2032).

By the end of 2023, Scotland's first dedicated Self-Harm Strategy and Action Plan will be jointly published by Scottish Government and COSLA. Recognising prevalence amongst young people and some marginalised groups, it will adopt an inclusive and tailored approach to deepen understanding and build effective responses for specific groups, communities and within key settings. The Strategy will create improved responses for people who self-harm across the life course

We will achieve full national coverage of the Distress Brief Intervention (DBI) programme

We will prioritise, build and test delivery of compassionate, trauma-informed support for people experiencing distress or crisis (or at risk of) in specific contexts and settings

We will build on work already underway to improve unplanned and urgent mental health care, including for those in mental distress, utilising a multi-agency response. In doing so, we will take into account the findings from our Equalities Impact Assessment, in order to better understand and support different population and equalities groups, and will continue to ensure alignment with the national rollout of the DBI programme

We will take a cross-government, cross-sectoral approach to understanding and addressing

the social determinants of mental health and the bi-directional relationship between mental health and factors such as poverty, employment, discrimination and trauma, housing and education, building this into decision-making, governance and planning processes at national and local level.

Scottish Government will continue to prioritise actions on mental health and wellbeing as part of the Best Start, Bright Futures Tackling Child Poverty Delivery Plan, the Promise, Whole Family Wellbeing Funding and national approaches to Fair Work, as well as ensuring there is a focus on these in our wider mental health and wellbeing policies.

Scottish Government will support Boards to meet the 90% waiting times standard for CAMHS and Psychological Therapies (PT), and to clear waiting list backlogs.

Taking a quality improvement approach, Scottish Government will support the implementation of Mental Health Core Standards for Mental Health Services and consider subsequent service specifications to ensure high quality specialist care for all patients.

We will continue to work with delivery partners to develop integrated care pathways in line with GIRFEC and GIRFE national practice models ensuring a holistic approach to wellbeing for people with complex care needs.

Scottish Government will support NHS Boards to move towards a self-improving system using benchmarking data

We will work together to expand the gathering, reporting and use of information on patient journeys, protected characteristics, outcomes and experiences of people seeking care and support from NHS mental health services.

We will progress with reform of Adults with Incapacity (AWI) Legislation to ensure stronger rights, protections and safeguards

Answering Audit Scotland's Adult Mental Health Report and taking account the wider policy landscape and arrangements underway for the National Care Service, Scottish Government, NHS Scotland and COSLA will work with NHS Boards, IJBs, local authorities, and other delivery partners to ensure ongoing improvement of the oversight and governance, planning and delivery of mental health services at local, regional, and national levels. Our approach will reflect the principles of GIRFE and GIRFEC on joined-up preventative care and partnership work so that future service delivery is informed by knowledge of existing provision, unmet demand, and the requirements of remote, rural and Island communities and minority and at-risk groups.

Scottish Government will work with NHS Boards to ensure the mental health-built estate enables the delivery of high quality, person centred and safe care. In doing so, we will take into account the findings from Equalities Impact Assessments and other relevant assessments.

We will take the opportunity to support and progress positive change in forensic mental health services, including progressing issues identified by the Independent Review into the

Delivery of Forensic Mental Health Services in Scotland (Barron Review).

We will work with education, NHS boards, the third sector and other delivery partners to strengthen support, care and treatment pathways across the lifespan for neurodiverse children, young people and adults.

We will take action to improve the mental health and wellbeing of people with learning/intellectual disabilities and that they are empowered to live their lives, just like anyone else.

Scottish Government will consult on and advance proposals to enshrine a human rights-based approach to providing support for neurodevelopmental needs in legislation

Through the GIRFEC approach, we will help parents and families to develop positive relationships with their children before birth and at every stage of their development, supporting their mental health and wellbeing through the ups and downs of life

We will continue to invest in and embed perinatal and infant mental health services at all levels of need so that women and families across all areas of Scotland have access to these services

We will continue to work with delivery partners and survivors to provide services to those who have experienced childhood abuse, which promote sustained recovery through person-centred, trauma-informed support and treatment and enable survivors to lead more independent lives

We will develop and launch our initial 2-year delivery plan for our new Dementia Strategy for Scotland, which recognises and addresses the mental health and wellbeing challenges facing our dementia communities

- 3.8 We are currently mapping Thrive Edinburgh's position and progress against each of these propriety actions.
- 3.9 On the 30 November 2023 the Scottish Government published **The Way Ahead: Recommendations to the Scottish Government from the Rapid Review of Co-Occurring Substance Use and Mental Health Conditions in Scotland**.
- 3.10 The report welcomed the current focus on co-occurring mental health conditions and substance use disorders in Scotland as it is a problematic area of practice that requires urgent attention. The concern as to how to best help people with such co-occurring problems has been around now for several decades. The report highlights that there are strong indications that it has worsened as a day-to-day clinical issue in the last ten years, with data showing an increase in drug-related admissions to general hospitals with "mental and behavioural disorders" (Public Health Scotland, 2021). In part this is due to many new mind-altering drugs becoming available. Such drugs are also highly relevant to psychiatric and emergency medicine practice (e.g., see recent research on the relevance to psychiatric admissions of Novel Psychoactive Substances at the Royal Edinburgh Hospital. (Mogford et al, 2019)).

- 3.11 The report sets out 7 recommendations which will be addressed in the Spring of 2023 by a multi- agency and multi professional group informed by people with lived / living experience.

Table Four: Recommendations from the Rapid Review of Co-Occurring Substance Use and Mental Health Conditions in Scotland.

Recommendation One - The Scottish Government should ensure that each area has an agreed protocol in relation to the operational interfaces between mental health services and substance use services. Further, this protocol should be owned and monitored by a responsible individual at a senior management level, with clear oversight of both service areas.

Recommendation Two - The Scottish Government should work with local boards and Integrated Joint Boards to improve data collection on care for people with co-occurring mental health and substance use disorders. This should include key indicators, such as the number of rejected referrals for people with co-occurring mental health and substance use conditions by either mental health services or substance use services.

Recommendation Three - The Scottish Government should ensure that Health Boards, Health and Social Care Partnerships, Alcohol and Drug Partnerships and all practitioners are considering their work, in relation to co-occurring disorders, within the framework of the four quadrants model. This was shown in Closing the Gaps (2007) and is replicated in our literature review (Page 8). This should be part of the locally produced protocol.

Recommendation Four - The Scottish Government should ensure an annual population needs assessment in relation to substance use treatment capacity which will in turn help with the treatment of mental health problems. We know that certain forms of substance use treatment improve the mental health of those with alcohol and other drug use disorders. The Scottish Government should ensure these needs assessments are happening and informing service provision at a local level.

Recommendation Five - The Scottish Government should commission a specific rapid review for alcohol treatment services given its health implications for Scotland and evidence that treatment in Scotland has been diminishing despite high levels of alcohol use disorders.

Recommendation Six - The Scottish Government should ensure all mental health and substance use staff are trained on how best to assess and manage co-occurring mental health conditions and substance use disorders in a trauma-informed approach. This training should also be open to other professional groups.

Recommendation Seven - The Scottish Government should ensure that further research is carried out to explore several troubling findings which we could not address in this rapid review. These include the finding by Public Health Scotland of a significant increase in anxiety and depressive episodes prior to a drug-related death between 2008 and 2018, and the increase in Drug-Related Admissions to General Hospitals. On a larger scale, a replication of the Co-Morbidity of Substance Misuse and Mental Illness Collaborative (COSMIC) Study in a Scottish city would be particularly relevant

4. National and International Collaboration

- 4.1 Thrive Edinburgh is part of an international network of cities committed to improving the mental health and wellbeing of cities. This network includes Edinburgh, New York, London, Ireland and Amsterdam. In Edinburgh we have focused on culture change, acting early, partnering with communities, and using evidence to drive change, in effect creating a social movement across the city encouraging talk and actions to promote good mental health and wellbeing for all our citizens.
- 4.2 We have continued to foster our relationships with Thrive sister cities. In August 2022 relationships were made with the Steinhardt School of Culture, Education, and Human Development at New York University where we hope to develop an international learning collaborative. This is likely to focus on veterans and the arts.
- 4.3 We strengthened our long-standing links with the Silver School of Social Work at NYU ensuring our co-funded Thrive PhD students at Strathclyde University maximise opportunities for international learning and collaboration.
- 4.4 Presentations to Thrive Ireland, Flourish Glasgow and to the international i-circle network on cities all received extremely positive feedback and opportunities to further grow our international collaborative efforts.
- 4.5 We were delighted to help shape the development of the Scottish Armed Forces and Military Research Network led by Edinburgh Napier University which had its inaugural meeting in January 2023.
- 4.6 Emma Gall, Assistant Strategic Programme Manager for Thrive Edinburgh commenced her PhD with Edinburgh Napier University, Centre for Military Research, Education & Public Engagement in May 2023. She is exploring how military partners construct their identities and the impact that organisational processes, social validation and transitions have on their definitions. Emma will be leading the PhD day at the first Scottish International Armed Forces Conference at the Craiglockhart Campus in August 2024.

Thrive Pillars

5.1 Thrive Pillar: Change the Conversation, Change the Culture

Mental health is everybody's business. We want our citizens of Edinburgh to be engaged in an open conversation about mental health; that mental health and wellbeing are infused into our society's core functions including housing, education, culture, health, and justice; and when people need help or support there is recognition of the importance of relationships between people receiving health and social care services and the staff delivering them. We are taking a whole system approach to maximise independence and choice and provide people with networks of compassionate support that provide easy access rather than crisis having to happen to access support.

- 5.2 There are a number of programmes which are helping to develop the Thrive Social Movement across the city.

5.3 Oor Mad History and Mad People's History led by CAPS and Queen Margaret University

This is a community history, educational and arts advocacy project based at CAPS. Set up in 2008, it aims to reclaim and promote the history of activism and collective advocacy by people with mental health issues and for people to have a stronger voice about mental health and the mental health system, build learning and knowledge, challenge assumptions about people who use mental health services and tackle discrimination.

5.4 Thrive on Thursday Dialogue Sessions

In 2023 we continued to host our Thrive on Thursday sessions. In 2023 our sessions mainly focused on contributing to national consultations with Scottish Government colleagues.

5.5. In March we welcomed colleagues from the Scottish Government to discuss consultations for the development of quality standards for adult secondary mental health services, and the development of national specifications for psychological therapies. Both were well received by the participants and ideas shared about what else could help. Rachel Tatler, Care Rosie-Cameron, and Gillian Paton from Mental Health Care, Quality and Standards Unit at the Scottish Government were delighted to have the opportunity to present to the group and take comments back as part of the consultation.

5.6 In June we were joined by Scott Murphy, Team Leader at Advocard who presented findings from their Edinburgh survey and from the report Housing and Mental Health in Edinburgh – Report and the practitioner forum report from Shelter's Homeless Rights Advocacy Project. Advocard carried out a Survey between August 2022 to October 2022 with a total of 18 Edinburgh residents with mental health issues and lived in a mixture of housing including social, temporary, private rent, mid-market and homeowners. Scott summarized the key findings from the survey which included long waiting times for social homes; the difficulties with the application process for getting a social home; people with mental health issues being housed in social homes which don't meet their needs and not being given priority status for moving to homes which would meet their needs; rent going up; issues with housing conditions; the impact of damp and mould on physical health; repairs not being carried out for long periods of time or properly; concerns about accountability of housing associations. Scott provided a background on Shelter Scotland published report highlighting systemic failures in temporary homeless accommodation. This report has been coproduced by Advocard, Carr Gom, Cyrenians, Four Square, Simon Community Scotland and Turning Point Scotland. View full report [here](#).

5.7 In August we welcomed Amy McLuskie, and Leanne McSharry, from the Distress Intervention and Suicide Prevention Unit, at The Scottish Government to present on the engagement to date on National draft Self Harm Strategy and Action Plan. Amy gave a summary of the self-harm strategy and action plan development which were supported by a wide range of representations/groups. She explained that this first self-harm strategy and action plan had been developed in a careful and sensitive way and in recognition that self-harm is a difficult and complex issue. Many people who have self-harmed often do so to try to cope with distress which is often affected by social, cultural and economic factors. She highlighted that the strategy and action plan connects into wider Scottish Government strategies and policies such as Mental Health Strategy 2017-2027. The Self harm strategy and action plan was published in November 2023 and is available [here](#).

- 5.8 In September Thrive on Thursday welcomed Joseph McKeown from the Human Rights Bill Team at The Scottish Government. He gave a summary background on the Human Rights Bill which incorporate a range of economic, social and cultural rights into Scots law for the first time, as far as possible within the limits of devolved competence. This Human Rights Bill will bring four United Nations international human rights treaties into law in Scotland within the limits of the Scottish Parliament's devolved powers.
- 5.9 Joseph described how the Human Rights Bill's proposal covers economic, social and culture rights including a right to adequate standard of living; rights to food and housing; a right to health; a right to social security; a right to participate in cultural life; a right to a healthy environment; and rights expressed for protection of women, disabled people, and people and groups who experience racism. The Bill's aspirations are to give a domestic effect to internationally recognised human rights standards by incorporating them into Scots law for the very first time; making these rights enforceable in Scots law for the very first time; creating duties on those delivering public functions to deliver the rights; and improving access to justice for people where rights are not upheld.
- 5.10 Thrive Website and social media**
The development of the Thrive website² and social media page began in early 2020 and launched shortly after. This contains information around Thrive and the guiding principles, our newsletters, and updates. The Thrive core team are set to develop the website further through 2024. Since 2020, the Edinburgh Thrive twitter³ has reached 960 followers and had over 5,000 profile views. Visit our Edinburgh Thrive website [here](#).
- 5.11 ithrive and ithrive staff space led by Health in Mind**
We commissioned the development of **ithrive** back in October 2020. This is our online 'space for mental health and wellbeing information in Edinburgh. Health in Mind developed this through a robust coproduction process commencing in January 2020. This collaboration continues with frequent meetings of the steering group which has representation from across voluntary and statutory sector, people with lived experience, and carers. It is exemplary in the way it has been developed and continues to be maintained. Visit the ithrive site here: <https://ithriveedinburgh.org.uk/>
- 5.12 ithrive** provides information about local mental health and wellbeing services and support; a platform to promote positive mental health and wellbeing through connecting citizens to local activities, spaces, and places; resources to support self-help and self-management and is a resource to support the new Edinburgh Thrive Welcome Teams, Thrive Collective, Thrive Network and the wider Thrive community across Edinburgh. It is fully accessible using the recite tool which translates in to 90 community languages.
- 5.13 The ithrive staff area continues to be utilised by staff and has received positive feedback. The referral form appears to be working well and there have been no issues with setting up NHS email addresses. At the end of September 2023 there were 185 users on the system, 49 3rd sector Service providers, 69 Welcome team workers, 26 Link Workers, 27 Primary Mental Health Nurses 51 reserved services are listed on the staff area, which the Thrive

² [Thrive Edinburgh \(edinburghthrive.com\)](https://edinburghthrive.com)

³ [@EdinburghThrive](https://twitter.com/EdinburghThrive) / Twitter

delivery partners have been updating regularly. 455 referrals were made to the system in the first six months of operation.

- 5.14 Website monitoring: The website has been monitored to ensure consistent content and to ensure the community board meets with community guidelines. Teams continue to have the opportunity to feedback on the system via online survey, email, telephone, via their steering group representatives, and through their line management.

5.15 Thrive Newsletters

Over 2023 we decided to reduce the number of Newsletters focusing instead on times when we had big news to share, particularly around our Thrive Arts programme activity such as Thrivefest#4 and SMHAF. Our distribution now reaches over 1,000 individuals and organisations – we will continue to grow this.

5.16 Stigma and Discrimination

We have supported See Me social movement which has called on the people of Scotland to come together and join the movement to end mental health stigma and discrimination. The campaign is encouraging people across Scotland to make a difference by boosting their understanding of mental health and the impact of stigma. We have shared the campaign across our network, encouraged people to organise their own local events and download the See Me activity pack and encouraged its use in school, youth, and work settings.

5.17 Thrive Pillar: Using and creating evidence and data to drive change

This involves listening and working with all stakeholders, including our academic institutions, to identify and address gaps, improve programmes, and create a truly equitable and responsive mental health system, by drawing on a wide range of evidence and creating an inquiring culture which builds evidence from practice. Data collection and analysis are a key part of any evidence-based decision-making process. When providers routinely use real-time data on individual care outcomes, it can markedly improve their ability to ensure that the patient is receiving the right care in the right order.

5.18 Service User led research – led by CAPS

There are four well established and two newer active user led research programmes which help to ensure that service users' voices are at the heart of redesigning and informing our services and support for people experiencing first episode psychosis, people who have experienced trauma people who have attracted a diagnosis of personality disorders and people with eating disorders. The two newer groups are funded through our Thrive Collective and have focus on LGBTQIA+ and ethnic minorities. CAPS are constantly looking at intersectionality in terms of all these themes.

- 5.19 In 2022 CAPS developed an audit tool in partnership with LGBT Health and Wellbeing. The tools helps service audit their delivery of service to LGBTQIA+ people. CAPS are happy to share this tool and if anybody would be interested in knowing more could invite them in to do a workshop. It's important our services and supports are responding to people's needs and so would highly recommend.

5.20 Experiences of Eating Disorders - “Seen but not heard”

‘Seen But Not Heard’ is a collective advocacy project for people with experience of all kinds of eating disorders, who live in Lothian. In September 2019, the group hosted their own lived experience conference in Edinburgh to identify potential topics in the community needing addressed. In 2023 they decided to focus on the little known or understood area of “Men and Eating Disorders.”. They have also been involved with the rewrite of a book called ‘Overcoming Bulimia’. They are now getting involved in writing a new book about overcoming binge eating disorders.

5.21 Members of the eating disorder group are attending University Health and Social Care courses and speaking to students to raise awareness of what it’s like to live with an eating disorder. The group use their own film, produced a few years ago – ‘Spilling the Beans’. They use storytelling techniques and question and answer sessions to engage and inspire the audience.

5.22 There is a public training workshop also delivered by the group – “Understanding Eating Disorders”. This highlights the impacts of eating disorders, what services are available, or in many cases, what services and treatment are not available. It contains personal stories and that those with lived experience would like others to know.

5.23 Experiences of trauma

The aim of the project is for people who have experienced trauma to come together and have a collective voice and create change. The group are actively working with the City of Edinburgh Council and Edinburgh Health and Social Care Trauma Champions to ensure living experience continue to inform the development and implementation of trauma informed care and practice across the city.

5.24 Experiences of psychosis

The aim of the project is for people who have experienced psychosis to come together, have a collective voice and create change. The group decides what it wants to do (it is experience-led) and has a CAPS staff member to enable/facilitate its decisions. The group have collected the views of people with lived experience of psychosis, used people’s views and experiences to create resources and training and explored different ways to get information about people’s experiences across. This group have delivered four sessions of ‘Experiences of Psychosis’ training to medical students and clinical psychology students at the University of Edinburgh and to art therapy students, music therapy students and occupational therapy students at Queen Margaret University.

5.25 Experiences of personality disorder – “Much More than a label”

The aim of the project is for people who have been given a diagnosis of a personality disorder or had experiences that they feel fit with a personality disorder diagnosis to come together, have a collective voice and create change. The group decides what it wants to do (it is experience-led) and has a CAPS staff member to enable/facilitate its decisions. This long-standing group have produced a wealth of material over the years including a comprehensive toolbox and short film. They have been a key part in developing the recently launched national network for personality disorder and the group are contributing to the creation of films about personality disorder to share with nationally.

- 5.26 The group recently produced a book called BPD Voices. The book shares the voices of people with experience of borderline personality disorder. They have also produced a toolkit full of information about the diagnosis of personality disorder.
- 5.27 In 2022 CAPS established two new Collective Advocacy groups in Edinburgh for people with lived experience of mental health issues from ethnic minority backgrounds and for people who identify as LGBTQI+.
- 5.28 Service user led research by Media Education**
 Kate Deacon, Media Education and Briege Nugent, freelance researcher lead on this research project that combines research and creative participatory video practice. They have collaborated with people with lived experience of mental health issues from focused communities, who formed a Lived Experience Advisory Group. At our 2023 Thrive conference they shared two thought-provoking films.
- 5.29 **Wudu:** Lina Bakhit alongside Media Education has created a film to highlight that Muslims pray five times a day and this is the most important aspect of being a Muslim. Supporting this practice allows Muslims to have a positive religious identity. To pray quiet space is needed. Before Muslims pray, they carry out 'Wudu', a purification process, requiring access to water to wash the face, arms, and feet. Lina has created a film to raise awareness of 'Wudu' and to call for appropriate spaces to be developed and accessible for ablution and prayer. Here is the link to the film:
<https://vimeo.com/883270060/6ebcab9b32?share=cop>
- 5.30 **The Positive Impact of the Family Nurse Partnership:** Citadel, Young Mum's Group wanted to create a film about their views of the Family Nurse Partnership. This is a programme that has been running in Edinburgh for ten years. It is offered to young first-time parents aged 19 or under, and eligible to 20- to 24-year-olds and their children and delivered in their homes. It provides support from early pregnancy until the child reaches the age of 2 years old. Those who had taken up support from the FNP felt they were and had coped better with becoming a parent, and the nurse was 'like a best friend. Here is a link to the film: <https://vimeo.com/696457252>
- 5.31 In February 2024 they will be screening their new films focusing on issues of concern to young parents and experiences of people from Global Majority backgrounds and people with experience of migration.
- 5.32 The Thrive Exchange**
 The Thrive Exchange was launched in the summer of 2020 with 55 people joining this Community of Practice. The Thrive Exchange is a group of people with an interest in research who are committed to changing practice through evidence; harnessing the expertise we have in Edinburgh; building a sustainable research culture; promoting the role of research and development in securing mental health and wellbeing improvements across Edinburgh.
- Six Exchanges have now been held focusing on
- Mad Studies research led by Dr Elaine Ballantyne,
 - Empathy Anomalies in Borderline Personality Disorder led by Dr David Hayward

- The experience of patients at the Royal Edinburgh Hospital led by Mark Sommerville
- Embodies project (reintegrating with the body and getting back to a sense of being present in the moment and noticing sensation in the body led by Lorraine Close and Merrick Pope
- Conceptualising and measuring citizenship led by Dr Kirsten MacLean
- Exploration of Intersectoral Partnerships for people with multiple and complex needs led by Dr Linda Irvine Fitzpatrick

These exchanges have provided a space to discuss different approaches to research and have led to interesting and though provoking discussions

5.33 Lothian Education and Recovery Network (LEARN)

This well-established network provides learning opportunities about mental health and wellbeing. These workshops are one of many ways people with lived experience of mental health issues can speak up about what matters to them, which is why LEARN is described as Education as Advocacy. Members of CAPS' Collective Advocacy groups develop and deliver the workshops and anyone who works, lives or studies in the NHS Lothian area. People with lived experiences, carers, students, workers are all welcome to take part in a workshop.

5.34 Since April there have been changes in staff in several projects however CAPS have still delivered workshops across almost all of the projects.

- Experience of Psychosis trainings carried out for staff at Cyrenians.
- EOP carried presented an open workshop at Norton Park with 21 people attending. Delegates from Thrive peer workers, family members caring for people with experience of Psychosis, Drug and alcohol workers, lived experience, homeless support workers, prison advocacy workers and several more.
- LGBTQIA+ Intersectionality open workshop at Norton Park
- Joint workshop at the Cullen Centre highlighting the intersectionality of eating disorders and the LGBTQIA+ community.

5.35 A real concentration within Education as Advocacy this year has been to highlight the intersectionality of lived experience groups that concentrate on the particular condition of label and trying to bring groups together to look at how this work together and where services should be cognisant of this and adapt appropriately and in a trauma informed way.

5.36 The overwhelming majority of feedback has been positive, and trends include comments about appreciating the fact that groups are giving opportunities to consider intersectionality, feeling more prepared to interact with people who have a particular diagnosis, grateful for the opportunity to hear directly from people who have experience of their own, and interested in how this can form reflective ways of interacting in their lives and work.

5.37 Partnership PhD Programmes with Strathclyde University

Over the years we have established jointly funded PhD partnerships with Queen Margaret and Strathclyde Universities. The latter having an international dimension with our New

York City Thrive partner. These have been focused on establishing robust research and evidence for practice-based developments. We will continue to grow this unique programme. Two new students focusing on poverty and mental health and urban mental health commenced in September 2022 and their studies are commencing well.

- 5.38 In 2023 we finalised our new narrative change programme - **Ellipsis...the lives people lead, the stories we tell**. Ellipsis will be led by Dr Linda Irvine Fitzpatrick and is an innovative collaboration with Media Education and Queen Margaret University focussing on story telling as a system change mechanism. Compelling stories of positive systems often sit in communities, but they are often not being shared or celebrated and they are certainly not drawn together in a concerted and coordinated way. This is because there are not the systems in place to support that. We will present a unique opportunity to do this and unlike data, which is often defined, harvested and interpreted with very little community involvement, our narrative change programme offers an opportunity for much greater agency and control by the story holders.

5.39 Thrive Pillar - Partnering with Communities

Mental health is a deeply personal issue, and when people are ready to seek help, they often turn to the people with whom they are closest, both emotionally and geographically. This could include family members, friends, faith leaders, neighbourhood elders, or a friendly staff member at a local civic organisation. These are the same people who are often our most important sources of support, well-being, and mental health.

- 5.40 If we want to improve the mental health of the citizens of Edinburgh, then we must help both community organisations and individual community members connect with each other. We must provide them with the options and information they need to be of service when one of their neighbours is dealing with a mental illness and recognize that strengthening social ties and creating vibrant communities is the foundation for mental health. We must speak their language, in every sense. And we must respect and enhance the central — and often driving — role they can play when it comes to designing, targeting, prioritizing, testing, and implementing mental health solutions.
- 5.41 We have a long tradition in Edinburgh of partnering with community stakeholders and organisations to provide the resources, training, and planning methods they need to both help individuals and also engage entire communities. This work recognizes that the stigma of mental health is real, and if we want to expand the range of treatment and promotion options, then we must also broaden the range of people who are able to act. Our success in this work will be judged according to two factors:
- 5.42 **Community resilience** characterizes the extent to which a community as a whole can respond to the emotional challenges, traumas, or burdens it faces. A community's resilience is linked to its schools, organisations, economic fabric, social places, and physical space.

Collective efficacy is the mutual support and social cohesion that exists among people living in a community.

- 5.43 Both factors shape, but can also be shaped by, the presence of social supports, securely bonded families, and the value placed on emotional self-care in communities — all of which can be purposefully supported and nurtured. In this interaction community resilience and collective efficacy protect community members from threats to mental health and are themselves bolstered by efforts that improve and promote the mental health of individuals. Mental health specialists can therefore play a crucial role in supporting this virtuous cycle by helping communities promote mental health activities and government can also support policies that address income inequality and insecurity, discrimination, and social instability. We will continue with and develop more develop initiatives across the city to build community resilience and collective efficacy.
- 5.44 Thrive Line**
The Thrive Line is a network of spaces and places across our city that can promote positive mental wellbeing. This has included providing training to partners (101 to date) across settings for places and spaces awareness training which has been developed using attachment theory as a basis. The team are currently developing a plan to deliver the Thrive Line training to key target areas including greenspace, arts and health spaces.
- 5.45 Thrive Arts Programme**
Edinburgh is a city associated and renowned with the Arts across the world, and so it seems fitting and right that we have a Thrive Arts Programme that promotes and encourages people to participate and use the arts to stay well, create new connections, strengthen relationships, build resilient communities, and generate opportunities for people to Thrive. The Thrive Arts Programme hosts a calendar of events through out the year, some which coincide with national days, or months, and some which target specific communities of interest or identity.
- 5.46 ThriveFest #4**
In May 2023 Thrive Arts Programme aligned ThriveFest #4 with The Mental Health Foundation's Mental Health Awareness Week (15th - 21st May). The theme for Mental Health Awareness Week 2023 was anxiety. ThriveFest provided the opportunity for people with mental health conditions, advocates, governments, employers, employees, and other stakeholders to come together to share experience, dialogue, and thoughts all through the medium of the arts. Year on year we have seen reach into new communities which, without using the arts as a medium, may never have happened.
- 5.47 Strange Town Touring Company**
Thrive Arts continues to support Strange Town Touring Company (STTC) **The Future is Unwritten programme** which commissions new plays exploring issues affecting young people. The plays are then performed throughout Edinburgh Secondary Schools.
- 5.48 The first touring production since the pandemic took place from Sept/Oct. This was a production of a new play, Storm Lantern by Duncan Kidd. It toured Edinburgh schools and had one sold out public performance at the Scottish Storytelling Centre in October. The response from pupils, teachers and the public audience was very positive, and we are in the early planning stages of reviving this production for a second schools tour in 2024.

- 5.49 2023 also included 'Her', focusing on the impact of sharing sexualised images. This was delivered to young people in 4th, 5th, and 6th school years. Feedback suggested the play should be shared with much younger kids, as low as primary school to allow them to learn of the negative impacts.
- 5.50 In November Strange Town performed at our Thrive Conference an amazing new play by Isla Cowan And...And...And.... This is an urgent new play about the impacts of climate anxiety and the mounting pressures on young people today. Exploring the double-edged power of social media and collective action, this play asks, how do we come together when we feel so much like falling apart?
- 5.51 Saltire Sky Theatre Company**
Thrive Arts supported the performance from the award-winning Saltire Sky Theatre company on Thursday 9 November at the Edinburgh Art College's Wee Red Bar. Saltire Sky Theatre Company developed this play in collaboration with support workers within NHS Scotland and local harm reduction and drug information organisation, Crew 2000. This challenging dark comedy authentically represents society attitudes towards recreational drugs and the culture that surrounds them. It explores the dangers of drug stigma, the menace of media misinformation and the perils they hold for mental health. In this assault on the senses, with temptation and terror, tunes and trauma from every angle, Bits 'n' Pieces reveals what it's like to come of age in the midst of Scotland's drug-death crisis.
- 5.52 Scottish Mental Health Arts Festival**
We were pleased to continue to support and participate in the annual Scottish Mental Health Arts Festival (SMHAF) hosted nationally by the Mental Health Foundation. This year's festival took place between 4th October to 22nd October 2023 with a quite edgy theme of 'Revolution'. The theme was brought to life in many guises and genres exploring freedom of expression, inspiring debate and curiosity. The festival creates a space to explore the relationship between creativity and the mind, promoting positive mental health and wellbeing with an overarching aim to build resilience in our communities.
- 5.53 One highlight from SMHAF was Inside-Outsider by in2gr8mentalhealth CIC who presented a group exhibition showcasing artworks by mental health professionals and trainees who have lived experience of mental health issues. The exhibition aimed to address societal and systemic stigma to create revolutionary change, bridging the gap between providers and users of mental health services, challenging the false 'them and us' dichotomy, and encouraging consideration of trauma-informed approaches. The artworks encouraged reflection and reflexivity, inspired compassionate conversations, and explored the idea that some people are immune to experiencing mental health issues.
- 5.54 Pride Youth Space**
Thrive Edinburgh are proud to be able to support this amazing piece of work designed and delivered by young people contributing to the larger Pride events held in June. LGBT Youth Scotland Pride Youth Space is made up of a strong partnership between LGBT Youth Scotland, City of Edinburgh Council Wider Achievement & Lifelong Learning, Canongate Youth, Totally Sound and Reel Youth Media (and lots of young people!). The purpose of providing the dedicated youth space distinct from the general Pride celebration space is to

offer young people an appropriate and dedicated space that is designed and co-created with young people and for young people to celebrate Pride and celebrate their LGBTQ+.

5.55 Out of Sight, Out of Mind

The 11th Out of Sight Out of Mind took place in October 2023 at Summerhall. It displayed curated artworks made by 213 people who have experience of mental health issues, in different media, over three floors of the galleries. The exhibition is also directed by people who have experience of mental health issues and is a collective advocacy project at CAPS Independent Advocacy. 'Many of this year's exhibitors responded to the Scottish Mental Health Arts Festival theme: 'Revolution'. Some artworks were about personal revolutions whilst others offered visions for revolutions on a societal or global scale. The Planning Group shared a 'manifesto for a revolution' which hundreds of people added to throughout the exhibitions run.

5.56 Thrive Film Club

Following the sad closure of Edinburgh Filmhouse, a long-standing creative hub and potential partners in our Thrive Film Club we want to work with our partners Media Education to begin programming for 2024.

5.57 Easy Sundays at the Scottish Story Telling Centre

The successful partnership with the Scottish Storytelling Centre bringing a monthly session of stories, music, community and friendship, continues to welcome families offering a wide variety of activities for all to enjoy and connect over.

5.58 Dance Base

In 2023 we created a new partnership with Dancebase to design, develop, and deliver projects in partnership with community, health and social care organisations and charities – that use dance and dance activities to support people's mental and physical health.

5.59 Healing Arts Scotland

Healing Arts Scotland 2024 is a country-wide week-long activation celebrating and advocating for improved physical, mental and social health through the arts. Spearheaded by Scottish Ballet as part of the Jameel Arts & Health Lab's global 'Healing Arts' campaign in collaboration with the World Health Organisation, the one-week activation event will be produced in partnership with a national coalition of organisations across culture, science, health, education and government. The initiative will launch on 19th August 2024 as part of the Edinburgh International Festival and will include celebratory performances, exhibitions, public art programmes, workshops, dialogues, media partnerships and a high-profile policy conference. Thrive Arts will promote participation in this unique event.

5.60 Thrive public information stalls

We have continued to work in partnership with our community partners and Police Scotland to raise awareness of public health concerns such as suicide awareness and hate crime. These opportunities are key to reaching people and communities who may or may not require help but who would benefit from information. Throughout the calendar year we have many national weeks and awareness days such as mental health week, eating disorders week, and we will coordinate our stalls around these working with relevant partners and stakeholders from across the city.

5.61 City (e) Scaping – community of practice

In 2023 we continued to grow our City (E) Scaping Community of Practice, creating a space to create and foster opportunities for collaboration and share practice to develop greener and bluer and public art sites across the city which promote good mental health and wellbeing. This relates to the concept of restorative urbanisation (Roe and McCay, 2021) which places mental health, wellness and quality of life at forefront of city planning and urban design. The opportunity to create a well-connected city and effective wayfinding with dynamic, multi-functioning 20-minute neighbourhoods with nature in the city and the importance of maximising episodic moments of city life within green spaces which enable people to connect and relate to one another.

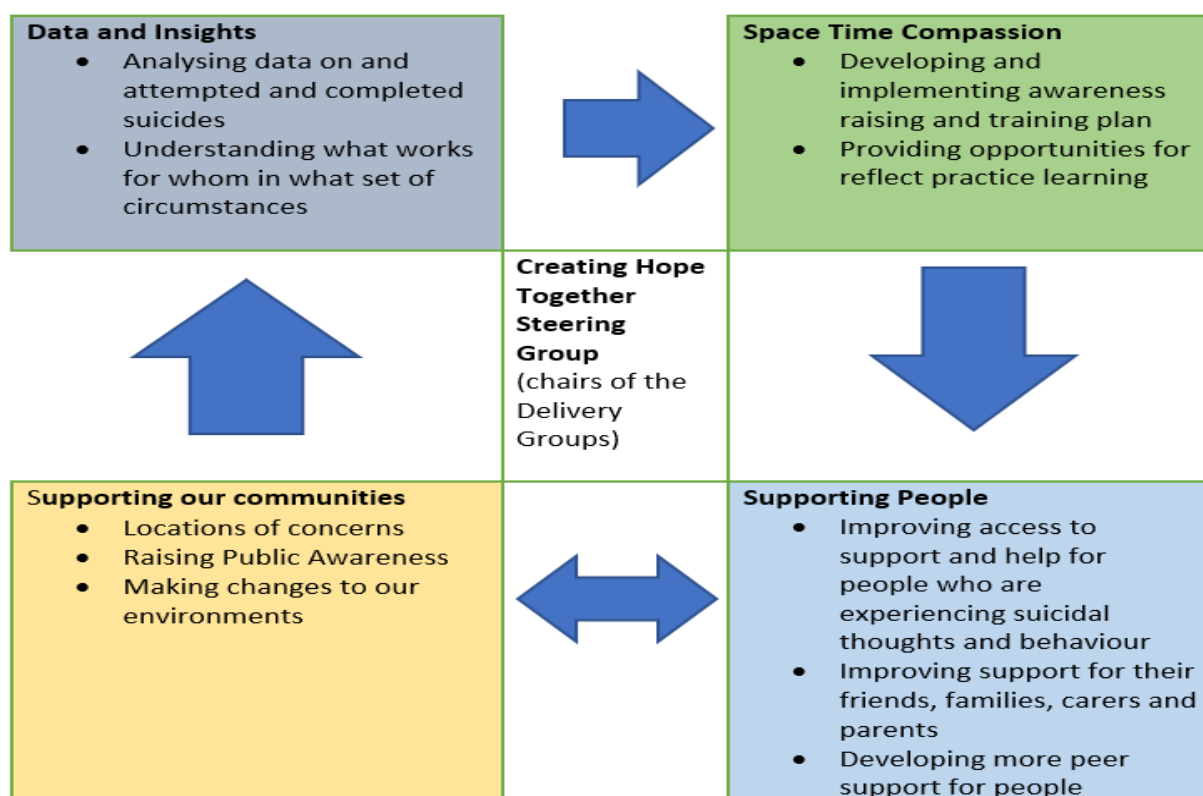
5.62 In 2023 we recognised the strong connection between our arts and greenspace groups and so into 2024 will create more opportunities for partners to collaborate.

5.63 **Outlook: Adult learning, information and guidance for people who use mental health services and live in Edinburgh.** Outlook provides learners with a responsive and meaningful guidance process alongside supportive learning experiences, that aid with building skills and confidence. Learners can access two courses in each of the three terms in their first year and second year. In the second year, learners will also be offered tailored guidance and a range of activities to support them with progression in taking up wider opportunities. - Participation is not a linear process for all learners, and this is accounted for to ensure equity of provision for all students. In 2023 there were 182 places with 85% participation. Outlook have forged strong relationships with a number of partners Farmhouse, The National Galleries, Summer Hall Arts Centre, Edinburgh Museums

5.64 New suicide prevention strategy and action plan

The national Creating Hope Together: suicide prevention strategy and action plan 2022 to 2025 were published in September 2021. The action plan details actions for over the next 3 years which implements the first stage of the Scottish Government and COSLA's 10-year suicide prevention strategy, and the four long term outcomes it sets out. The strategy's vision highlights that we must deliver across these long-term outcomes which, together, will affect change across our society, services, communities, and individual experiences.

5.65 Last January we hosted an event in Edinburgh to explore how we can deliver on the national strategy for Edinburgh. We invited colleagues from across voluntary, statutory, advocacy, and lived experience to take part. The event was very successful and provided us with lots of food for thought. From the day we agreed our delivery model:



5.66 It was agreed that to facilitate the delivery four sub-groups will be convened which will feed in to the Creating Hope Together Steering Group. Through 2024 we will accelerate this programme of work to ensure we are addressing suicide prevention in Edinburgh. We also know we need to spread our wings further into local communities, especially where loss has happened.

5.67 Corrie in for Winter

Working with Health in Mind we produced our fourth edition of “Coorie in for Winter” with useful tips for keeping well during the winter period, including craft, winter warming recipes and support which is available. 3000 booklets have been distributed across the city. In recognition of the cost-of-living crisis and the impact of poverty on people’s ability to connect socially, we supported 49 initiatives from 3rd sector agencies to promote social connection and support during the winter months. The initiatives included art events, physical activity, and opportunities to eat together. Thank you to all our partners who took part.

5.68 Thrive Pillar - Act Early

Prevention and promotion must be at the core of any public health campaign and strategy. Broadly speaking, promotion efforts focus on helping people develop resilience, strong attachments and protective factors, and mindfulness. Prevention efforts are designed to help people avoid illness before they get sick, or to treat problems early. Acting early is about helping our citizens to promote their emotional fitness and resilience — which means that more of us will develop positive coping skills, fewer of us will develop mental illness, and those who do will recover more quickly and completely. We are focusing on two key areas early childhood support and early diagnosis and linkages to care for vulnerable populations.

5.69 **Beyond Summer – plans for building on the collaborative efforts to date**

Thrive Edinburgh, the Mental Health Foundation and the delivery organisations came together in June 2022 to receive updates on the 3 programmes developed with Cyrenians, Scran Academy and Strange Town which continue to support young people's mental health and wellbeing following the funding in 2021. The group agreed to meet to further explore the development of peer ambassadors, **StressLess** initiatives and research opportunities. We are delighted that organisations such as Scran Academy have continued this collaboration with the Mental Health Foundation.

5.70 **Scran Academy** - Scransitions is an innovative skills and employability programme specifically for young people experiencing exclusion and wider life barriers in Edinburgh. As an experienced youth skills provider, Scran are seeing a growing need for services that support young people to be successful in learning and work. Scransitions is Scran Academy's first dedicated employability offer to young people. The need for this work has never been greater and their unique partnership position alongside the NHS, through the Scran Café and more widely, offers immediate and exciting opportunities to ensure youth skills and employability support can be central to this work.

5.71 In 2023 Scransitions delivered upwards of eighty-one to one sessions where young people mapped out their short, medium, and long-term development goals whether it be personal or to further their education or employment opportunities. In addition, they ran a weekly group session for all participants with regular attendance above 60% that focused on employment with partners from Link Living. They also delivered 6-week young person's Leadership Academy which focuses on core values with a new partner in Columba 1400.

5.72 Feedback from the young people is that they felt more confident and optimistic about their futures. A number of participants engage in internal work placements where one is now a full-time member of the Scran Café team.

5.73 **Something to eat, someone to eat with- Cyrenians**

There is very strong evidence that suggests that family mealtimes play an important part in building young people's social skills; aid development of resilience and improve mental well-being. Thrive has partnered with Cyrenians to develop Something to Eat, Someone to Eat which aims to develop greater levels of social cohesion by promoting the links between food and physical/mental wellbeing. This partnership focuses on young people learning new skills and abilities developing a sense of belonging and self-worth, enjoying the 'here and now', creating new friendships and relationships, and improve awareness of the world around us.

5.74 Cyrenians run a variety of opportunities for young people including Wednesday evening cook club for young people with mental health problems. They work closely with the Citadel Youth Club to promote it to young people. They have found after a couple of months young people started inviting their friends and the club gained new members.

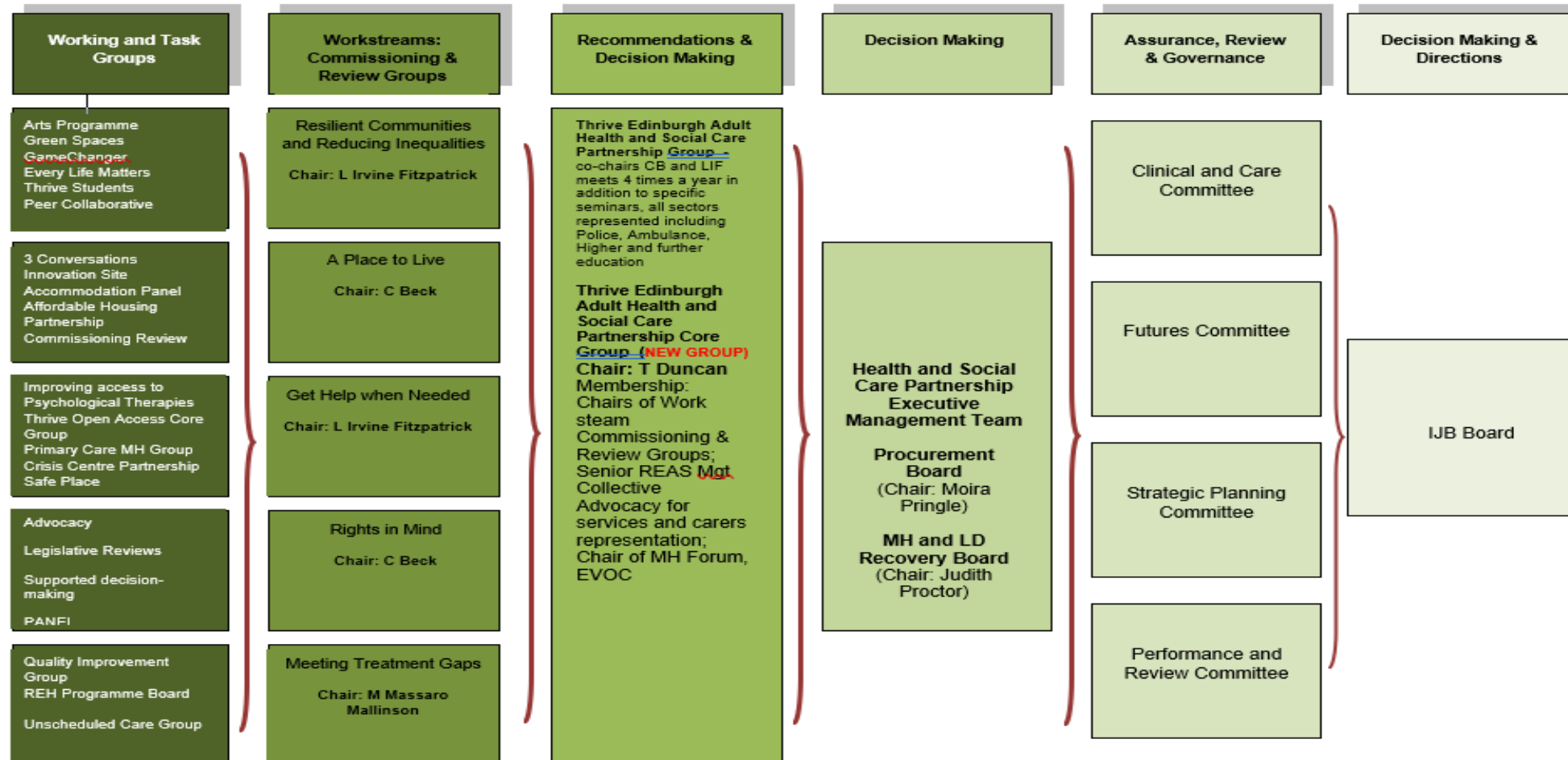
5.75 The monthly cook club for young women at Saheliya- club is where young Muslim girls meet up and cook together. Club has grown a lot and is a great place for the girls to meet other minority ethnic Muslim girls from all over the world who have now migrated to

Edinburgh. It is a great space to make friends, share their stories of everyday life and promote wellbeing via food.

- 5.76 The Summer Cook Club for young people from Edinburgh is organised in the school break and ran for a month. During 8 cooking sessions young people had a chance to meet and cook with 6 different chefs/cooks from Edinburgh. Young people cooked with chefs from Syria, Pakistan, Poland, Spain and Scotland. Both chefs and the young people learnt a lot and were able to experience the variety of teaching/learning styles, different types of foods and able to meet each other.
- 5.77 A 6-week cooking course for Deaf Action was set up for deaf young people. Over the 6 weeks the young people had an opportunity to learn how to cook and clean and Cyrenians had a chance to learn how to work with deaf people and with the translators.
- 5.78 In addition to the regular groups, the Cyrenians have run a number of workshops for young people at the Muslim Women's Association -a specific request for workshops at the beginning of Ramadan about the link between food and mental health. 15 young people engaged in making preserved lemons and energy balls and learnt how to eat well and support their mental health and wellbeing during the fasting month. Similar sessions were run with Shakti Women's Aid for young Muslim women to introduce them to Scottish staple foods.
- 5.79 In all the clubs, using food as the focus and after the long process of building trusted relationships, discussions take place about mental health difficulties and ways to support wellbeing and where to access additional help. To date, sessions with lower numbers of participants have been the most supportive for them. Feedback suggests the young people really value the fact that the Cyrenians are consistent in delivering the service and no matter what they will always be there waiting for them.

Thrive Adult Health and Social Care Commissioning Plan 2019- 2022

We have six workstreams covering 35 change programmes. There are five Commissioning, Delivery and Review Groups who oversee the six workstreams who report progress to the Thrive Partnership (Adult Health and Social Care) Board. In early 2023 we will be setting our priorities and reviewing delivery structure as part of the coproduction process of our updated Commissioning Plan.



Thrive Adult Health and Social Care Planning and Governance Structure

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6. Workstream 1: Building resilient communities

- 6.1 Health is influenced by how our surroundings make us feel and the opportunities they provide. Good places, spaces and buildings create opportunities to be more physically active; feel safe and secure, socialise and play; connect with people. We want to use the knowledge and skills of our communities, whether they are communities of interest or geographical communities, to mobilise Change Programmes which will promote mental health and wellbeing, address issues such as discrimination, stigma, loneliness, and isolation and make sure that Edinburgh's rich cultural assets are accessible to all. We have an increasingly diverse population in terms of gender, age, race, sexuality who have come to the city to study, work and live who all add to the social capital of the city.
- 6.2 **Change Programme 1 Choose Life - education and training programme and community capacity building to increase awareness of the risk factors for suicide, encourage people to talk about suicidal feelings and provide more tailored responses for people in crisis.**
- 6.3 This has been superseded by the new Creating Hope Together workstreams, please see sections 5.73 to 5.75.
- 6.4 **Change Programme 2 - Improve the pathway for students across colleges and universities to access care and support statutory services.**
- 6.5 We continue to host Thrive Students which has representation from across college and university settings in Edinburgh, as well as statutory and voluntary sector colleagues. The main aim is to promote positive mental health and wellbeing through our student populations.
- 6.6 We have been developing and creating ways to build better pathways for students and now have data sharing agreement in place to allow for easier referral and transfer of information between universities and NHS Lothian and vice versa. This means that a student's journey into services should be more streamlined and hopefully will mean they won't have to repeat their story.
- 6.7 An information sheet for GPs detailing the offer of support each university has and therefore ensuring signposting is more effective has been produced. ithrive is now fully up to date with information on support for students and we have created a link between refhelp and ithrive to help GPs refer more easily.

- 6.8 Each year we see more students engage and participate in our Thrive Arts programme and through Out of Sight, Out of Mind. There are some great opportunities we hope to nurture with students taking a more active role in city life.
- 6.9 We continue to refer to the report the Mental Health Foundation published in 2022 one of the largest and most significant studies of student mental health that has ever taken place in the UK and are committed to addressing the recommendations made in the report.
- 6.10 In 2023 we began exploring how we might introduce Distress Brief Interventions within to students at Edinburgh College. We hope this can be developed in 2024.
- 6.11 Change Programme 3 - Establish a network of “Thrive” green places across the city which provide sites for a wide range of intergenerational activities which promote health and wellbeing.**
- 6.12 Thrive Collective Thriving Green and Active Spaces partnership between Edinburgh Leisure, Edinburgh Lothian Greenspace Trust, Cyrenians, and SAMH continue to work in partnership to use our green spaces across the city for people. They are committed to ensuring that everyone can get active and connect with their natural environment to protect their physical and mental health. The types of activities they are delivering include:
- knowledge of greenspace and locations
 - Supporting people to physically connect with their environment.
 - Walking and Jogging; Conservation activities
 - Community Gardens. (See also section xx on City (E) Scaping)
- 6.13 From our data we can see that the most people seeking support or help from our Thriving Green and Active Spaces are between 26 – 55 years with the majority being women.
- 6.14 In 2024 The Mental Health Foundation theme for Mental Health Awareness week will be activity and we will be planning a week of activities and events for this.
- 6.15 In 2023 we began a new service level agreement (SLA) with Cyrenians, Forestry, outdoor learning awards (FOLA), which aims to provide o provide nature-based outdoor learning experiences for young people, predominately care-experienced, which promote positive mental health and wellbeing. The Forest and Outdoor Learning Awards are a recent development in outdoor education offering an exciting way to promote wellbeing and an introduction to being, knowing, working, making and playing in the outdoors. They are unique because they can result in a qualification at SCQF levels yet require no written element from participants and combine learning and ‘play’ in a non-formal outdoor setting.
- 6.16 With this in mind, ‘successes’ and ‘milestones’ come in many different forms and just turning up regularly and being consistent is a real achievement for lots of young people. In particular those who may not have experienced this kind of learning environment before and/or felt unable to access other forms of wellbeing support. Cyrenians have seen lots of incredible progress in the young people who’ve been attending the sessions with most of

those attending gaining a nationally recognised certificate (SCQF Level 3 FOLA) and leaving with their confidence high and having learned new skills – both practical and social.

- 6.17 We continue to hold a service level agreement with Edinburgh Lothian Greenspace Trust (ELGT). ELGT work with staff at the Access Place to design and deliver a Branching Out programme: 12 weeks of woodland-based activities to encourage better mental and physical health and wellbeing. The Access Place works with the homeless community who may also experience multiple and complex health and social care needs. Over the course of the programme they engaged with 9 service users, 3 of which became regular participants.
- 6.18 The programme was based in the Hermitage of Braid, Edinburgh. Activities during the programme included group activities such as shelter building, cooking on a fire, and trust-and-team-building games. They also created woodland-based art such as mandalas, cyanotype prints and green men. They did conservation work including Citizen Science wildflower surveys and bird box making and encouraged a sense of responsibility to the site.
- 6.19 The programme is designed to foster a positive relationship with the natural world and build on people's lived experience and knowledge. It included activities to highlight seasonal change, orientation, mapping, mindfulness and species identification.
- 6.20 The programme focussed on creating a space that was an alternative to participants' usual 'places that was safe, welcoming, supportive and equal and which provided opportunities to explore, learn and connect. The programme encouraged participants to discover more about the natural world and consider their place within it. As part of the programme, some participants gained their John Muir Discovery Award.

7 Workstream 2: A Place to Live

- 7.1 We want to ensure that people with mental health problems have a safe place to call home in which they feel safe, receive the support they need and can connect to and be part of their local community.

7.2 Change Programme 4 Provide a framework agreement

An extensive co-production and commissioning process took place over 2020/21 with the setting up of a dedicated co-production group to inform and develop the specification. The group included social care providers, independent advocacy services which represented the interests of carers and people with mental health needs with lived experience. Upon approval by the Finance & Resource Committee in December 2021, contracts were awarded to 12 service providers under the new Framework Agreement many of whom were existing providers.

- 7.1 A pilot project was established within the North-East Locality, led by the Mental Health and Substance Misuse manager to test provision assumptions and changes outlined in the service specification. The pilot has been evaluated (report available) and is described as overwhelmingly positive with both service providers and locality staff.

- 7.2 They found the trust-based collaborative approach effective in ensuring provision was local, responsive, efficient, and agreed in a timely manner. Thus, reducing the need for admission and preventing delayed discharge. In practical terms the regular and close collaboration has resulted in clear operational improvements e.g., quick identification of outstanding updates to packages of care which in turn improved data quality on the Swift system and ensured payment anomalies were resolved.
- 7.3 In addition, unmet needs were more proactively tackled on a locality basis and delays in response reduced. Provider-led reviews of less complex packages evidenced good data collection and increased timely reviews allowing providers to be more responsive to changing needs of individuals. The pilot was used as a blueprint for the current roll out of the framework agreement across each of the other localities. However Covid 19 did impact on these endeavours and during the second half of 2023 and into 2024 we will be revitalising these relationships, which are structured around s trust-based and outcomes-based commissioning.
- 7.4 Change Programme 5 -Technology enabled care service has a major role to play across the Wayfinder model. We need to accelerate our Change Programmes around this, making maximum use of the opportunities afforded by Digital Health Scotland.**
- 7.5 Living Digitally – An Evaluation of the CleverCogs™ Digital Care and support System’ commissioned by the Carnegie UK Trust and conducted by Just Economics, funded by the Scottish Government. The report includes key findings which have been shared with “A Place to Live” commissioning and review group for future developments.
- 7.6 As the services become established in their localities there will be further exploration around use of technology based assisted care/digital platforms where it is considered appropriate to a person’s needs and where a person considers this to be a less intrusive/preferred support option.
- 7.7 Change Programme 6 - Provide additional Wayfinder Grade 5 intensive rehabilitation in community settings for women with multiple and complex needs.**
- 7.8 Change Programme 7 - Provide Wayfinder Grade 5 facility for people who require a high level of support and treatment on a long-term basis in an environment which provides and support for meaningful days and person-centered choice.**
- 7.9 Change Programme 8 - Commission an additional one bed roomed and two bed roomed tenancies with support in each locality (55 additional places) to allow a move towards core and cluster developments which will offer people a tenancy for life with support that can be flexible to meet changing needs.**
- 7.10 The Place to Live Framework agreement allows for a more proactive rather than reactive approach to commissioning of bespoke provision within the framework which will help shape the market to current need rather than fit to what is available as noted above we need to progress this proactive approach.

- 7.11 There is work ongoing to assess the future needs of people currently accommodated in the 60 Rehabilitation beds at REAS and to plan for the reduction to 36 beds. Initial planning and budgetary discussions have taken place with Finance and Clinical leads and will link the requirements of long-term hospital-based patients and associated budgets to community bed-based commissioning and design.
- 7.12 Change Programme 9 - There is a wide body of evidence demonstrating impacts on people's mental health and wellbeing, self-esteem and connectivity with their community. We need to apply the learning from this research to our current and future accommodation. This will involve partnering with academia and housing providers.**
- 7.13 The Place to Live framework agreement places strong emphasis on linking people into their local communities, building up a local network of support and accessing community activities. Providers will support people to develop and build up these community links including accessing potential work and volunteering opportunities. Moving the centre of gravity from hospital-based supports to community supports will reduce admissions, length of stay and delays at the point of discharge.

8. Workstream 3 - Get help when needed

- 8.1 When people need help it's important that they can access the support they need in a timely manner, for both planned and unplanned care. We need to reduce barriers to access and ensure that there is clear assessment and formulation which in turn leads to care, support and treatment being matched to the individual's needs. We also need to recognise and respond to the needs that friends, partners, families, and carers have in terms of supporting their loved ones.
- 8.2 Change Programme 10 - Introduction of open access "Thrive" centres across the city with multi agency and multi professional team input offering brief assessment and formulation leading to a jointly agreed plan with the client regarding next steps. Next steps may include support with social problems; distress brief intervention; psychoeducation; community connecting; employment and meaningful activities; arts; green activities; group psychological therapy; individual psychological therapy; medication review. This will build on the work of our Edinburgh Wellbeing Public Social Partnership programmes⁴.**
- 8.3 Thrive Welcome Teams were developed as part of Lottery funded Living Well UK programme alongside Innovation Unit back in 2019. The model was co-designed to meet the needs of Edinburgh's citizens. Thrive Welcome Teams were prototyped in 2020 and have now moved to full delivery. Due to the pandemic there were challenges but now as the world has opened up the teams are realising their potential.
- 8.4 In February 2022 Scottish Government suggested further funding would be made available to develop Primary Care mental health services. This provided an opportunity for us to work with primary care to develop a hybrid model for delivery of services, bringing with it capacity to be more responsive to GPs. This was our Thrive Welcome Team: Phase Two.

⁴ [Living Well UK | Edinburgh Model \(livingwellsystems.uk\)](https://livingwellsystems.uk)

8.5 Thrive phase 2 offered new opportunities to:

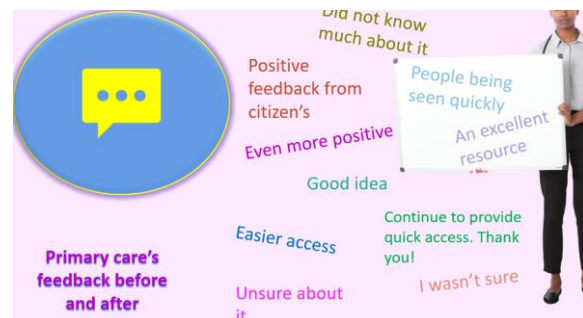
- Build capacity to be more responsive to the needs of GPs
- Build relationships, trust, and understanding between Thrive Welcome teams and primary care
- Build on the successes and respond to the recommendations described in the independent evaluation by Cordis Bright
- Make a difference by working collaboratively in new ways and as part of a multi-agency and multi-professional team
- Better meet needs of local populations in Edinburgh

8.6 Phase two was supported once again by the Innovation Unit. This new design phase took place between November 2022 till March 2023. Four design groups were created with representation from across primary care (GP, MH Practice Nurses, Link Workers, Thrive Welcome Team Members, and strategy). Each locality prototype group explored the opportunities in their localities and created prototype designs which could be tested. Each one came up with its own local idea for drop-ins as well as other opportunities, especially around communications and improving this for GPs.

8.7 As well as coming up with tangible designs which could be tested, it highlighted the importance for creating time and space for design, and the added value that comes with it, in particular bringing people together to share, discuss, agree, disagree, but understand each other a bit more. This helps build connections and relationships. Despite new funding not being allocated due to Scottish Government budget restrictions, this has not stopped the design groups moving forward with the prototyping.

8.8 Since May 2023 Thrive Welcome Teams have been prototyping open across the city. Initial data suggests the new open access approach is reducing some pressure on Primary Care Services. In addition, staff from across both the Thrive Welcome Teams and Primary Care are delighted with the new ways of working and the feedback from people seeking help has been positive.

8.9 Through 2024 teams are looking to test further developments such as locations and new times to access the teams.



8.10 The Thrive Collective

In December 2020 we completed our commissioning process and awarded contracts for five (plus three years) to our now providers. Our Thrive Collective offer:

- Thrive Locality Teams - a range of flexible, person centered emotional, psychological, and social support.
- Places and Spaces - Providing safe places for people to connect that are inclusive but not exclusive; maximizing use of the city's assets; include a focus on evening and weekend opening.
- Physical Activity and Green Spaces - Maximizing city's green and community assets to improve peoples' physical and mental health.
- Peer community of Practice
- Creative arts and participation
- Carers engagement

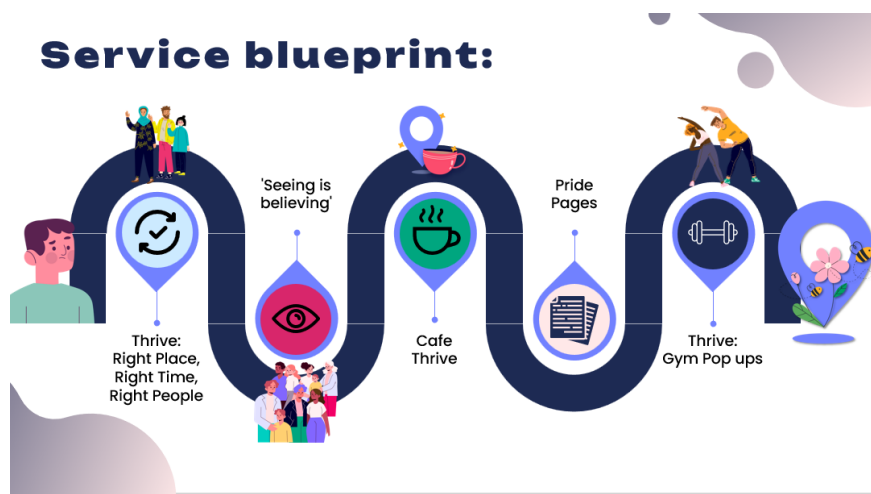
8.11 Through our ithrive staff space direct referrals to these services can be made by the Primary Care Mental Improvement Funded Mental Health Practice Nurses and Link Workers; referrals are not required to be routed through the Thrive Welcome Team.

8.12 Update reports are collated reviewing activity and outcomes on a quarterly basis for 3 of the collective areas including: The Connect Partnership, Thriving Spaces and Physical and Green Spaces. Over the last year the Connect Partnership have engaged with 1,693 people across Edinburgh with a range of emotional, psychological and social interventions. There is a primarily white female population accessing these services with a mean age of 44. In terms of Thriving Spaces, this partnership worked with 8,481 individuals, delivering social support, creative opportunities and horticultural activities. These were access by mainly white men with an average age of 54. Finally, the Physical and Green Space group engaged with 2,657 people, typically over the age of 35, female and white. Most of the activities being delivered within this partnership focused on getting people active (e.g. walking groups) and gardening – the latest Thrive Collective Report will be available in February 2024.

8.2.11 Thrive Pop Ups

As part of our commissioning process in 2020 partners included ideas for holding Thrive Pop Ups to reach and engage people in communities that may not otherwise get the help they need. Due to the pandemic this was delayed

8.13 In 2023, Cat Young, Assistant Programme Manager with Thrive Edinburgh, took on a formal design process to find a way forward for Thrive Pop-Ups. Using the double diamond methodology to service design and collaborative approach Cat completed and shared ideas on what these could be.



- **Thrive: Right Place, Right Time, Right People:** Inclusive Pop in space with array of people with experience, compassion, and empathy.
- **Seeing is Believing:** It should be somewhere people can connect. It should be in a safe and welcoming environment where people want to relax. It should be a space where people can say what they want within their community, doesn't have to be about mental health. There should be food and music playing.
- **Café Thrive:** Idea for how to make Thrive Welcome Teams Phase Two drop-in's work.
- **Pride Pages:** An exciting new opportunity to meet new friends from the LGBTQIA+ community.
- **Thrive: Gym Pop Ups:** Targeting young men

8.14 In 2024 we will explore testing these ideas in collaboration with our partners at Edinburgh Leisure and city libraries.

8.15 Change Programme 11 - Refreshed DCAQ Improvement and investment plans to improve access to psychological therapies, this links to the development of Thrive Centres.

8.16 We are working closely with our psychology colleagues to ensure that there is a clear pathway between Thrive Welcome Teams and Psychology Services for people who require a formal psychological therapy. There will be active participation in delivery of the national standards and specification for psychological therapies.

8.17 Change Programme 12 - Build on the model established by Street Assist with our partners in Police Scotland, NHS Unscheduled Care Services, the Scottish Ambulance Service, NHS 24, Social Care Direct, Community Safety Partnership and the Chamber of Commerce to create a safe out of hours place where people who are intoxicated or vulnerable can be kept safe and if appropriate linked into support and services. This will include identification of a physical place and operating hours based on current need and demand.

8.18 In 2023 we progressed with the redesign of urgent care plan for Edinburgh led by Dr Robby Steele. In 2023 we have:

- Secured additional funding to increase capacity in the Mental Health Assessment Services by 3.00 WTE Mental Health Nurses

- Introduced senior clinical decision makers who are responsible for picking up flow and triage through NHS 24 telephone lines and responsible for ensuring people receive the correct level of support.
- Employed crisis navigators through Penumbra enabling direct access to MHAS staff for wider community support and community connecting.
- Progressed work with the TRAK team to develop more effective mental health triaging and referral system.

8.19 Connected to this is the future direction of the Crisis Centre, currently it continues to provide 24/7 support. We have extended the contract and are keen to explore how we use it as part of the whole system approach to urgent unscheduled care.

8.20 In 2023 Street Assist Edinburgh attended their 5,000th call to assist people identified as vulnerable. At Hogmanay 2022/23 they equalled their busiest ever night out with 38 calls in one night to assist people identified as vulnerable. They received 43 new volunteer applications and delivered 750 hours of Training to volunteers - congratulations to volunteers who took part in the Edinburgh Kilt walk and raised a whopping £14,000.00.

8.21 Change Programme 13 - In line with the Scottish Government's National Mental Health Strategy, increase the workforce who can respond to distress in A & E departments, police custody and prison settings

8.22 Action 15 funding was allocated to a range of settings across the city including Custody Services. A&E Edinburgh Prison and localities to ensure that teams working in these settings could respond better to people in distress it.

8.23 Fiona Crichton was employed to lead on developing and delivering sustainable training and delivery of Decider skills across Mental Health and Substance misuse services in Edinburgh Health and Social Care Partnership (EHSCP) including our third sector colleagues. To establish teams of trainers five Train the trainer courses took place in all resulting in 18 trainers for the city. A robust network Lothian Decider skills Network which meets quarterly was established. This means the trainers meet every 6 weeks to look at progress, share top tips, and shared reflective practice. Its purpose is to increase resilience of the training programs and to ensure governance. 124 people have been trained in Decider Skills and supported to deliver

8.24 Change Programme 14 - Introduce Prospect test of concept in primary care settings which may have the potential to transform the primary care workforce.

8.25 The test of concept which involved embedding a clinical psychologist within a GP practice, was completed and a full evaluation report was compiled. It was found that the psychologists allowed rapid and easier access to psychology appointments which addressed health inequalities and often prevented the need for secondary care. This integrated approach reduced concerns around waiting times, provided the ability to deal with more complex mental and physical health presentations across the lifespan, and added benefit of on-site psychological expertise in terms of advice and consultancy around the psychological aspects of complex and hard to help patients who needed to be managed in general practice.

8.26 Unfortunately, we were unable to secure funding to scale this up. We have shared the report with the national group who are developing primary care mental health models. The test of concept evaluation and recommendations on embedding psychologists in primary care are currently being considered by Primary Care leads.

8.27 Change Programme 15 - Support the continuation of Rivers PSP implementing the revised service model building on lessons learnt from the test of concept which include the continuation of open access clinics and the delivery of a rolling group-based programmes for people with complex Post Traumatic disorder (C-PTSD).

8.28 The Psychological Therapies Governance Board reviewed the Rivers model in 2023. We need to consider the role of this services in our trauma informed practice model and training and skills programme.

8.29 Change Programme 16 - Continue to support V1P Lothian and ensure that data is continuing to be collected which demonstrates impact and improved outcomes and cost benefits for veterans and their families.

8.30 The Scottish Veterans Care Network (SVCN) developed and published a Mental Health Action Plan in December 2021 to ensure that all veterans in Scotland can lead a healthy, positive life and reach their full potential through access to high quality mental health and wellbeing services that are tailored to meet their bespoke needs. This group was chaired by Dr Linda Irvine Fitzpatrick. The SVCN worked extensively with veterans, the health and wellbeing working group, NHS and 3rd sector partners, Integration Joint boards, and the Ministry of Defence nationally to develop the action plan. They understand that there is a need for access to veteran specific mental health and wellbeing services, peer support, a central resource hub and support for those supporting veterans. The principles of the plan were approved by the Scottish Government in March 2022. The implementation of the action plan will now be progressed in 2023 by a new advisory board.

8.31 Dr Irvine Fitzpatrick led a national consortium bid and secured further funding from the Places, Pathways and People Armed Forces Covenant Fund to develop the Scottish Veterans Wellbeing Alliance. The Alliance has been funded until end of March 2024 and is based on the central tenant of collaboration across organisations supporting veterans in Scotland. This partnership works across the whole of Scotland and bring together the 19 funded partners, who will provide spaces and places across Scotland where veterans and families can connect, receive, and provide support, learn new skills and benefit from activities delivered by a compassionate workforce striving to nurture relationships with all who have an interest in veterans' health and wellbeing. We have been invited to submit a proposal to continue this successful partnership for a further three years.

9. Workstream 4: Closing the Inequalities Gap

We want to ensure there are specific programme and projects which address the structural determinants of poor health at an individual and family, community, and city-wide level. This is in addition to the responsibility of all elements of this plan being designed and delivered in such a way as to contribute to tackling inequalities.

- 9.1 Many of the city's wellbeing services assist people with confidence and skills which enable people to at one level develop an interest or at another level build skills which would lead to paid work. Thrive Edinburgh will continue to promote lifelong learning, education and employment opportunities for people and provide timely and effective support to help people stay in employment through building on the current Outlook Programme, Edinburgh Capital City Partnership, Fit for Work and The Works Activate Programme
- 9.2 Change Programme 17 - Increase opportunities of supporting, sustaining, and achieving paid employment, volunteering, and education by increasing the deployment of Individual Placement Support through the Activate Programme (The Works). This will include a number of different settings including prisons and young adult programmes.**
- 9.3 The planned review of support available for people with mental health problems in relation to education, employment and volunteering did not take place in 2023. We plan to take this forward with our colleagues in the Capital City Partnership and the City's Regional Deal on this review.
- 9.4 Change Programme 18 - Introduce a range of initiatives which will improve the physical health of people with mental illness. This will include improving access to screening programmes**
- 9.5 We are beginning to work closer with colleagues in long term conditions and are exploring how we can strengthen our approach to people with long term physical conditions and mental health problems.
- 9.10 A service level agreement with EARS to provide independent advocacy support and representation to those people in Edinburgh, West Lothian, East Lothian and Midlothian who have survived a Stroke.
- 9.11 Our longstanding partnership with MECOPP continues to deliver good outcomes for the Gypsy/Traveller community, improving quality of life of informal carers and cared for people with a specific focus on mental health and broader health literacy.
- 9.12 A service level agreement with the Polish Family Support Centre to provide mental health and wellbeing support to Polish people is in place.
- 9.13 Change Programme 19 - Following the initial two-year period there will be a requirement for the Council and its partners to mainstream the Housing First initiative to ensure continuation of the scheme.**
- 9.14 New arrangements have been put in place for Housing First delivery in Edinburgh. In 2024 we will be working with our colleagues in Housing to strengthen health and social care constitution to the emergency housing crisis in the city.
- 9.15 Change Programme 20 - Continue to support the creative solutions and innovations of the Re:D Community of Practice which has a specific focus on embedding trauma informed practice, peer support and arts as a vehicle for change.**

- 9.16 The Re:D Community of Practice has not been active in a while however the work led to several innovative service development across substance misuses, community justice and mental health services which have now been mainstreamed. This includes clinical psychology within the Willow Service, psychology within prison settings and peer workers at Cyrenians.
- 9.17 The Government's welcomed focus on ensuring the whole of the Scottish workforce is trauma informed and how we are taking forward this in Edinburgh should build on the work that Re:D did. We have been considering this as part of our trauma informed practice and 2024 will see greater connectivity between and across our mental health, substance misuse, homelessness and community justice services.

10. Workstream 5 - Rights in Mind

- 10.1 We are committed to ensuring that people understand their overarching human and legal rights and that staff working in mental health statutory and voluntary sector services to ensure that their clients along with their families, friends and carers are afforded their rights. The PANEL principles - Participation, Accountability, Non-discrimination and equality, Empowerment, and Legality need to be embedded in all our Thrive Edinburgh commitments
- 10.2 Change Programme 22 - A Rights Based Care programme hosted by Advocard, and the Royal Edinburgh Hospital Patients Council will be established. This will be a user-led, collective advocacy project which will aim to promote rights-based care to train and raise awareness of rights-based care practice across professionals who work with people using mental health services in the City. This will encompass and further develop the A&E | All and Equal" and focus on embedding measures compliant with the United Nations Convention on the Rights of People with Disabilities (CRPD.)**
- 10.3 We set an initial SLA in place with the Patients Council: Edinburgh Carers Council and CAPS Mind Our Rights to build an experience led education programme led. The MORE-P team have made tremendous progress, educating a wide range of staff. We are now progressing discussions to develop a longer term and enhanced programme.
- 10.4 The MORE-P team are raising awareness of the practical implications of human rights amongst health and social care staff across Edinburgh's community and hospital settings. Bottom-up approaches to human rights education, which begin with the experiences of users and carers and then connect these up to the key principles and concepts of modern human rights will provide the basis for accessible and effective training of frontline staff and raising awareness of their duties. This should lead to a fairer and more compassionate local mental health system. The promotion of rights-based care and what this means in practice can most effectively be delivered by people with lived experience of using services or caring for someone who does.
- 10.5 The MORE-P programme builds on earlier innovative approaches such as the Lothian Recovery Network, the LEARN experience led education programme, the development of Oor Mad History social history project and accredited under-graduate and Masters

programme, and the Changing Lives narrative research. This innovative project will meet the PANEL principle requirements by ensuring that users and carers are fully participating in human rights training, are helping hold professionals to account, promoting non-discrimination and equality approaches, are actively engaged in their own empowerment, and are promoting better understanding of legality and rights.

- 10.6 A human rights-based approach is about empowering people to know and claim their rights and increasing the ability and accountability of individuals and institutions who are responsible for respecting, protecting and fulfilling rights. This means giving people greater opportunities to participate in shaping the decisions that impact on their human rights. It is also about increasing the ability of those with responsibility for fulfilling rights to recognise and know how to respect those rights, and make sure they can be held to account.
- 10.7 Between April and September 2023, the Patients Council ran at least monthly MORE-P human rights awareness-raising sessions successfully, providing sessions to 106 attendees. This included special sessions at the City Chambers to members of the EIJ, which were very well-received, and we have had discussions to run these again. The feedback from these sessions has consistently been overwhelmingly positive, with the main criticisms being around the length of the sessions (too short) or around the facilities for delivering the training.
- 10.8 Change Programme 23 - The current provision for carers will be reviewed to reflect new service developments changes to crisis support, the introduction of a matched care model for women with multiple and complex needs; low secure provision and to ensure that we are meeting our statutory obligations to carers under the Mental Health (Scotland) Act 2015**
- 10.9 A Service Level agreement with Edinburgh Carers Council is in place to provide individual and collective advocacy and information to carers who support someone who uses mental health services or who has mental health difficulties and is experiencing a period of transition. For example, people they support may be moving from hospital rehabilitation wards to community living or from children's (CAMHS) to adult mental health services. The service is also for carers of people in mental health settings who will be returning to Lothian from 'out of area' placements or for those moving from Lothian to 'out of area' placements.
- 10.10 Change Programme 24 - From 1st April 2018 there are new requirements from Carers Scotland Act 2016 and as their application to Health and Social Care services which will need to be taken account of and planned for. These duties include giving local authorities a duty to prepare a carers strategy for their area; requiring local authorities to establish and maintain advice and information services for carers, placing a duty on local authorities to prepare an adult carer support plan or young carer statement for anyone they identify as a carer, or for any carer who requests one and a requirement for health boards to ensure that, before a cared for person is discharged from hospital, it involves the carer in the discharge planning process.**

- 10.11 Through the Corers Strategy and commissioning process there has been new investment in a range of support for carers.
- 10.12 VOCAL have been funded through our Thrive Collective procurement for 5 years (plus 3). The focus of the project is to encourage carers and mental health professionals to work in co-production, to develop a Carer Engagement Service - an independent service which will support mental health services to develop or improve the involvement of carers in shaping Edinburgh's mental health services for the future.
- 10.13 Change Programme 25 - Strengthen and improve access to independent individual and collective advocacy in a range of settings including prison.**
- 10.14 A service level agreement with Advocard to provide Individual advocacy services for any prisoners in HMP Edinburgh is in place.
- 10.15 A service level agreement with Advocard to provide an individual advocacy service for those who are affected by welfare reform or changes to benefits is in place. Referrals for this service have remained steady, there has been an increase in referrals related to Adult Disability Payment and Universal credit. In the last 6 months they have received 138 referrals, 49 of which related to the Personal Independence Payment (PIP). Advocard are continuing to be involved with the Scottish Campaign on Rights to Social Security and the Disability Benefits Campaign. They have contributed to 5 lived experienced panels.
- 10.16 MECOPP who support advocacy and hold casework services for gipsy / travellers has concentrated on income maximisation for residents. This has responded to the ongoing financial pressures felt due to the decant process associated with North Cairntow and the subsequent move back to the redeveloped site. They have also seen an increase in the number of requests for additional help to assist with the increase in utility bills. From a mental health perspective, there have been increasing levels of stress and anxiety amongst community members as a result of the decant process and tensions with members of the settled community; the substantial rise in the cost of living; isolation due to the decant process and dispersal of existing family/community networks; and, uncertainty about the completion of works at North Cairntow. Additional support has been provided through their mental health and wellbeing worker and referrals to MECOPP mental health support line service.
- 10.17 Change Programme 26 - Build the capacity across the city for more peer led self-help groups this will include building on established groups such as these provided by Bipolar Scotland to trialling groups for different conditions.**
- 10.18 Thrive Edinburgh is committed to building the capacity of peer support across the city. On the 30th October 2023, and as part of The Edinburgh Pact, Thrive Edinburgh supported an event for peers across the city. This event welcomed guest speakers from across different sectors including the Edinburgh peer community of practice, The Scottish Recovery Network, Lothian and Edinburgh Abstinence Programme (LEAP) and self-management programmes for people experiencing long term conditions.

- 10.19 The Peer Community of Practice presented the film Side by Side which highlights the importance of peer work in Edinburgh. It features Peer Workers based across the city sharing their experience of a peer approach to mental health and how this could be innovative in recovery.
- 10.20 The Peer Community are continuing to focus on
- Building awareness and understanding of peer practice
 - challenging stigma, promoting accessibility
 - Providing opportunities for sharing and exploring ideas together

11.0 Workstream 6 - Meeting the Treatments Gaps

- 11.1 Thrive Edinburgh will work effectively to integrate service provision in localities and across the city to further develop and enhance person, carer, and family support to maximise the life opportunities for people with mental health problems and mental illness and to reduce the requirement for acute and long-term care.
- 11.2 A clear need has been identified to improve responses for people (and their informal carers, friends, and families) when experiencing crisis, or those who are unable to maximise the potential of intensive home treatment due to their home circumstances. There are comprehensive plans being developed to support people experiencing substance misuse problems. There are well established multi-professional Community Mental Health Teams, Social Work Teams, Mental Health Officer Service, Substance Misuse services and a wide range of third sector agencies, providing a range of biopsychosocial interventions. Over the last few years these services have experienced increasing demand set against a reduced workforce.
- 11.3 The Mental Health Assessment Service is available 24 hours a day, seven days a week and provides an emergency nurse led mental health assessment service based at the Royal Edinburgh. The team also provides a service at the Royal Infirmary from 5pm – 8am Monday to Thursday and from 5pm Friday to 8am Monday.
- 11.4 Positive Steps provide social support for people in crisis or ready to leave hospital. The Intensive Home Treatment Team provides 24/7 care and support for people both to help avoid admission and to shorten admission stays. Inpatient facilities are provided at the Royal Edinburgh Hospital. We have a significant number of people who are treated out with Edinburgh due to local services not being able to meet those people's needs.
- 11.5 Change Programme 27 - Explore the potential to introduce the Open Dialogue which is both a philosophical and theoretical approach to people experiencing a mental health crisis and their families/networks, and a system of care in Edinburgh.**
- 11.6 We have not really explored this further but are keen to check in with stakeholders and see if this is still an approach that people want to explore. This would tie in well with the recommendations of the Scott Law review.

11.7 Change Programme 28 - The Seek, Keep, Treat comprehensive plan builds on long established Edinburgh recovery orientated services and support for people with substance misuse problems. The plan has 8 domains: Local needs assessment ensuring we are responding to issues that are specific for Edinburgh's population: Increased involvement of those with lived experience of addiction and recovery in the evaluation, design and delivery of services: Reduced waiting times for treatment and support services., particularly waits for opioid substitution therapy (OST): Improved retention in treatment particularly for those detoxed from alcohol and those accessing OST; Development of advocacy services; Improved access to drug/alcohol treatment services amongst those accessing inpatient hospital services; Whole family approaches to supporting those affected by problem drug/alcohol use; and continued development of recovery communities.

11.8 This work is led by the Edinburgh Alcohol and Drug Partnership. There is an opportunity to work with Health Improvement Scotland as a pathway site to support mental health and drug and alcohol services - including both public and third sector organisations - to develop more person-centred approaches. The aim of this work is to support local areas to develop a model that suits local needs, is developed through partnership, and ensures people are put at the heart of design and delivery. It is important that people with lived and living experience can input and contribute to the design of services, ensuring no door is the wrong door particularly for those at most risk. This is being actively explored.

11.9 Change Programme 29 - Integrated Care and Support Pathways
Review our current pathways (Bipolar, Schizophrenia, Neuro-developmental disorders; Eating disorders, Personality Disorder, Perinatal Mental Health, and Depression) to ensure that our services are rights based, provide evidenced based clinical treatment as defined by SIGN and NICE⁵, and there is a comprehensive focus on meaningful days and community connecting. This review is likely to identify a number of gaps without current provision including community mental health team staff and Mental Health officers to enable us to meet our legal requirements.

11.10 The Scottish Government's strategy has moved away from focusing on ICPs and instead sets out commitments for people experiencing different conditions. There have been positive developments in the establishment of 3rd sector services supporting people experiencing eating disorders. We have committed to join the Royal College of Psychiatrist's Accreditation scheme for Community Mental health Teams – this includes self-assessment and peer review and will commence in April 2024.

11.11 Eating Disorders

CAPS Advocacy continue to provide collective advocacy for people experiencing eating disorders through their group 'Seen but not heard'. The groups focus for 2023 have been:

- The difficulties faced by men trying to access eating disorder services.
- People from the LGBT community facing eating disorder issues.

⁵ [SIGN: Scottish Intercollegiate Guidelines Network: NICE – National Institute for Health and Care Excellence](#)

- Transitioning from young people's services to adult services. The two services have very different ethos and cultures which lead to a sudden change in people's experience.

11.12 In 2021/22 The Scottish Government allocated £5 million of funding to respond to the recommendations from the National Review of Eating Disorder Services, which recognised the 30/40% increase in demand on services. NHS Lothian's share of this funding was £666,226 and this was used to set up new SLAs with partners to support people with eating disorders. These are Lothian wide and are for both adults, and Children and & young people:

Penumbra; Peer Support

- Recruitment of two peer support workers to work in adult services for eating disorders.
- Create spaces where people feel safe to talk and create ways for people to share safely.
- Work with clients develop self-action plans and recovery plans.
- Ensure service is visible and known about by staff with drop ins, promotion leaflets, attending reviews and other operational meetings.

CAPS Individual Advocacy

- Recruitment to posts including specialist eating disorder Individual advocacy worker and full induction of staff.
- working closely with clinical teams and across setting to ensure joined up approach.
- Taking part in 4-weekly reviews to ensure persons needs are being met and joined up to community resources and needs.
- Developed information booklet.

Edinburgh Carers Council: Supporting carers

- Promoting the needs of carers through building relationships across the services and supports
- Being accessible and promoting their services and supports to carers and staff.
- Supporting carers who are caring for people with eating disorders.
- Listening to the need of carers through advocacy and being open to taking action when required

'Someone I am supporting has had anorexia her whole adult life and she is in her 40s. Since her discharge from REDU, she has not managed to eat a snack in a café. Recently she was able to pick a café and have a snack there with me. This was a huge challenge and a big step in her recovery from anorexia.'

(Peer support worker)

11.13 Personality Disorder

In February 2022 we convened a group to consider how we improve our responses to people who attracted a diagnosis of personality disorders. Members include colleagues from across statutory and voluntary sector as well as Advocacy. Since February 2022 the group have developed a work plan and some significant pieces of work developed.

- 11.14 In May 2023, Kate Pestel, Lead Art Therapist developed a proposal to introduce a mentalization based arts psychotherapies group program. This will be a 24-month test of concept. A recent Cochrane review shows mentalization based therapies bring positive outcomes for those with moderate to severe personality disorder symptoms, especially long-term reduction in suicidality, self-harm and interpersonal problems. This test of concept will continue through 2024.
- 11.15 Thrive Edinburgh try to ensure the voice of lived experience is at the centre of what we do and therefore we work closely with the collective advocacy group 'More than a label' hosted by CAPS Advocacy to ensure what we are trying to achieve in terms of improvements are the correct way forward and to get ideas of better ways. This alliance will continue into 2024.

11.16 Perinatal Mental Health

The Scottish Government published the Perinatal mental health services needs assessment and recommendations in March 2019. The report makes recommendations across all tiers of service delivery, with the aim of ensuring that Scotland has the best services for women with, or at risk of, mental ill health in pregnancy or the postnatal period, their infants, partners, and families. It places particular emphasis on the development of expertise by all professionals involved in maternal and infant mental health care and the importance of close working links between different services that women encounter. It aims to ensure that women receive the right level of clinical expertise and seamless care, wherever they live in Scotland. It recognises the need not only to care for the woman experiencing ill health, but also to promote best outcomes for her infant and support for fathers, and others who are parents. A pan-Lothian action plan has been developed to take forward the recommendations and new investments in the mother and baby unit, community services and infant mental health are underway.

11.17 Bipolar Disorder

We were delighted to support Bipolar Edinburgh through 2023. This year Bipolar Edinburgh recruited a peer support worker to work in the community. This has always been an aspiration of the organization and feedback suggests this is very positive.

'The safety, consistency, compassion, advice and lived experience shared has been so helpful. I really appreciate all the work that Harry and Bipolar Edinburgh do and to have a network of support is so valuable to safely get through the harder times. I also find the kindness, flexibility and understanding if you're having a bad time so supportive. The locations of meetings are based around your needs and the communication is strong which can compensate during lows when life and communicating feels overwhelming. I especially enjoyed going to a comedy show at the Edinburgh fringe. Allowing myself to enjoy the festival with a safe person helped me view it differently and increase confidence going into the centre of the city at its busiest. I even attended other shows later in the month.' (Service user feedback)

- 11.18 Bipolar Scotland have also produced a booklet for people newly diagnosed with Bipolar which they are hoping to have available where people might be when this happens.

Bipolar Edinburgh continue to host monthly young person's groups and over 25s peer support groups. This includes days out, and beach walks followed by some social time.

11.19 Neurodevelopmental disorders

The Scottish Government recently published the development of principles and standards of Care for Children and Young People which sets out seven standards for services to support children and young people who have neurodevelopmental profiles with support needs and require more support than currently available. The National Autism Implementation Team (NAIT)

- 11.20 The priority is to redesign the pathway for adults, and we recently agreed to focus on a test of concept in the south east of the city. This will be progressed in Spring 2024

11.21 Schizophrenia

We are committed to reviewing our provision for people experiencing first episode psychosis and this will be informed by our review of Community Mental Health Teams.

11.22 Change Programme 30 - Integrate Positive Steps and Edinburgh IHTT to increase capacity to respond to people, enabling earlier discharge and reducing the number of unplanned admissions and length of stay in acute settings.

- 11.23 We have not progressed this action due in part of the impact of Covid 19 on our mental health services. We were committed prior to Covid-19 to undertaking an audit of community mental health teams using the Royal College of Psychiatrist standards.

11.24 Change Programme 31 - Open in Spring 2020, a Grade 5 step up / step down resource for people who require short term stay to avoid admission to hospital setting or to facilitate earlier discharge from acute care.

- 11.25 We have not developed a specific resource but are reviewing this as part of the work described in section X.

11.26 Change Programme 32 - Commission and implement the matched care model for women with multiple and complex needs, building on the successful Willow informed model, increasing day place, residential places and training and support and case management across community and inpatient settings

- 11.27 We now have developed a model for a women's unit and are seeking premises to deliver this from.

11.28 Change Programme 33 - Edinburgh will require 15 inpatient beds for people requiring low secure provision and 18 inpatient beds for people requiring rehabilitation to be re-provided in fit for purpose accommodation as part of the Business Case for Royal Edinburgh Hospital Redesign Phase 2. Hospital beds are essential for people for whom the process of assessment, treatment or risk management cannot be safely or effectively be delivered in any other setting.

11.29 The Integrated Joint Board agreed these bed numbers for Phase Two and the Initial Agreement for Phase Two was being progressed through the appropriate governance channels. However due to the lack of capital we will be working with colleagues at the Royal Edinburgh Hospital to review the current and future bed configuration based on the current campus provision.

11.30 Change Programme 34 -Continue to commission 64 acute admission and 7 intensive psychiatric care beds at the Royal Edinburgh Hospital.

11.31 An additional 15 acute beds were opened at the Royal Edinburgh to manage increased demand. Occupancy levels continue to be high, and we need to review the “front door” processes and better understand factors leading to and determining admission. As part of our pathway site work with Health Improvement Scotland Reducing Reliance of Inpatient Care programme, we have been allocated HIS staff to conduct semi structured interviews with decision makers to gain a deeper understanding of the reasons and decision-making process of why people are admitted to acute psychiatric hospital and how these reasons then inform the delivery of care and treatment within the inpatient setting. This findings for this study were published by Health Improvement Scotland in Autumn 2023.

11.32 Change Programme 35- Ensure that young people receiving support for their mental health experience a smooth transition to adult services if this is required. The transition should be considered as part of the individual’s person-centred outcomes and care plan rather than solely based on calendar age.

11.33 A working group is currently considering how the transition pathway for young adults can be improved and is reporting the Rights in Mind Commissioning and Review Group.

12. Next Steps

12.1 The Thrive team organised a stakeholder event on 9 May 2023 at Napier Edinburgh University, Craiglockhart Campus, Edinburgh to share recent developments from each of the Thrive Edinburgh Adult Health and Social Care Workstreams and invited people to consider provocations, priorities, key priorities for the plan.

12.2 The event was attended by over 70 people representing Edinburgh Health & Social Care Partnership, NHS Lothian and Third sector organisations. Ian Brooke, Deputy Chief Executive chaired the event he urged all to reflect on Thrive works being done to date; how people want these to develop and any new area of works they would like to see.

12.3 The event included workshops sessions held in the morning. Dr Linda Irvine Fitzpatrick then led a session to update on progress against the strategy, as well as give a flavour of upcoming key focuses for the year ahead.

- 12.4 To close the event, people were asked to share **their provocations, priorities, pleas, and passions** to help inform our next three year's commissioning plan. Below is a full list of what was discussed on the day, this will help inform our priorities and actions for the coming years.

Provocations

- Hourly framework rate model e.g. A place to live – not conducive to quality collaboration/creativity, focus has to be on financial efficiency.
- Urgent Care - Pushing need on to things like Welcome Team and changing remit – move complexity - concerned it is not the right solution.
- Current NHS incorporated peer support roles are not being adequately supported to be integrated into the service.
- How are we ensuring we/this strategy create capacity within programmes/services. Referral + need for support for many services is now exceeding pre-covid levels. How do we continue working towards de-medicalising the model
- Charity and competition hinder how well we help people.
- Adequately funded projects commissioned by local authorities + not expecting the 3rd sector to fund the shortfall especially projects that are preventative + save the state significant sum in the long run.
- Include deaf/BSL users in progression of services
- Does the community want to live alongside people with mental health issues?
- Flat hierarchy of pay
- Is the role of the 'family' support being strengthened/supported?
- We are already completely stretched – will there be more money?
- Where was/is the voice of the voluntary sector today? Is this a sign of where the focus of the commissioning plan will be?
- Challenge 'power' – what is it anyway?
- Thrive needs to be able to explain itself to non-medical/3rd sector orgs.
- Where is the LGBT+ workshop? Why isn't this a priority?
- Voluntary sector voice – taking the lead. We are flexible, resourceful & value for money professionals.
- Make sure that there are managers holding all parties to account when implementing the plan
- Invisibility of LGBT+ voices – I raised it in the Pop-Up workshop. But otherwise, there was not acknowledgement of LBGT+ community – consider high suicide rates in the LGBT+ community.
- Capitalise the deconstruction of power? in the Plan e.g., patient, provider.
- Dedicated resource to learning, explore & support focus, identified personality disorder e.g., MDT.
- Happy to hear honest/open feedback about REAS/EHSCP to help us improve.
- Address inequality, think, analyse who is not there and why? By addressing inequalities, we benefit everyone.
- If we are looking at commissioning new support services – can we be brave and turn the current model on its head. Listen to people currently in supported accommodation and do things differently.

Priorities

- A world where all these amazing activities & therapies are available to all & before people are struggling – often too much too late.
- Prioritise access to nutritious food because there is plenty of research out there that indicates that food insecurity has adverse effects on mental health.
- Clarify structures/decision making process.
- Build community resilience.
- Be clear about who interventions are aimed at.
- More collaboration - work together at how we make services + opportunities more visible + more accessible as a result.
- Recruiting people with lived experience.
- Make the Welcome Teams more accessible.
- Access to mental health treatment & support for people using drugs/alcohol. Not used as a gatekeeper. Mental Health 'exclusion criteria'.
- Personality disorder specific service
- To keep dancing, Art/culture!
- Make more use of independent individual advocacy for specific groups e.g., people with housing issues/at risk of homelessness.
- Using H.R. lens is so useful cos we're all human.
- Focus on shared values, establish them at start and hold people to them if old cultures come to fore.
- Inclusion of people with lived experiences in all levels of decision making & strategy.
- Valuing & acting upon views of people with lived experience.
- Get back to the basics of partnership work – no competition, one outcome is an outcome for all.
- We need funding for coffee, buses & more to support people to get connected.
- Fund travel to mental health services.
- What does Thrive mean to public?
- Build the connections to join up the health & social care system (NHS, HSCP/Private/3rd sector ++)
- People are at the hearth/centre.
- Provision of psychological input for trauma experiences. Not CBT based. Availability of EMDR.

Pleas

- Lack of awareness/inclusion of trauma informed approaches.
- Support to capture the stories well and ensuring they get heard.
- Need to address inequalities.
- Were we preaching to the converted today? How do we get others involved?
- There is so much excellent work going on in Edinburgh e.g., REH volunteer Hub, Thrive Welcome Teams etc. – this needs to be shared! (Outside Edinburgh + beyond).
- Better adaptation in MH Services for neurodiversity.
- Police out of healthcare! Employ a specialist mental health nursing team for emergency interventions and difficult admissions instead.
- GPs based in community practices. Link workers in GP practices.
- Coming together to discuss how we can stop trauma in 1st place – housing, education,

economics. Prevent vs. React.

- We live in a world where we are paid to help create good lives not support symptoms caused by bad lives.
- More open access/spaces in communities. Co-created for people to gather and meet together that do not involve monetary transactions like a coffee shop/café.
- Longer term interventions available as standard e.g., Thrive team involvement not time limited.
- Think about advocacy.
- Pay staff well.
- What lessons can we learn from other cultures about health & wellbeing?
- Don't forget about the most marginalised most mad people?
- Shift money from private sector to public & third sectors. Recruit mental health philanthropists 'build & support holistic communities.
- That feedback is not "personal" or about "the" and "us" and we consider what "we" need to do.
- The continued funding of physical activity programmes (create more capacity). Embed physical activity pathways into mental health care pathways.
- That the power of physical activity is promoted within the strategy (specifically prevention and early intervention).
- Fill in the geographical gaps.
- What is legacy of Thrive.
- Need to look at the role of diet in MH and especially on wards in hospital.
- How do we ensure Council Procurement Process holds people at the centre of their process/decision?
- A world where we are equipped to thrive rather than learning to thrive after the event.
- We really can do more together – please continue to invest in working in partnership. Involve us as for experience.
- Make services BLS inclusive and Deaf aware.
- Voice of people is heard across health and social care.
- More inclusive language please – such as they/people instead of him/her.
- Workshops were great & wish they had been part of the core programme so everyone hear/share.
- Learning from way we worked through Covid – make sure we don't go back to old ways of doing.
- How do we transition of 'services' to healthy '20 mins' communities owning health/wellbeing. We need to do cultural shift.
- Not KPI – Impact and Outcome.
- Pathways into paid employment: Volunteer; peer support; MH worker – good model in substance use.
- Experts by experience, not just people with lived experience.
- More of things like: Dance Base, rights based, gypsy traveller session, LGBT awareness.
- Kindness, courage, listening rather than talking, time to celebrate achievements.
- Intersectionality!
- Open the lid on how many staff have lived experience - can be more open + share+ utilise this in their practice.
- 'They/them' 'everybody' – when referring to all individuals in Edinburgh, can we use more inclusive language to ensure we actually mean all individuals!

- Run Awareness sessions on Drug Ed & Sex Ed (CREW 2000), Community Justice.
- School not just in nursery & primary but high school.
- Absence of black, brown and people of colour and other minorities

Passion

- Ensuring all of the services that support our people keep them at the centre of them.
- Keeping people at the centre of collective advocacy groups – not organisations own viewpoints and agendas.
- Meaningful relationships – allow people to take risks and build sustainable, non-professional relationships.
- Engaging with all areas of Edinburgh.
- Lived experience training
- Less hierarchy
- Delay discharge
- Future mental health
- Having a world where psychiatric hospitals are not needed.
- Putting people first, tackling inequalities.
- The need & the desire for change is clearly evidence.
- Power of connection for Peer Advocacy
- Ask what people are passionate about? – use that to inform forward planning.
- Continue to be brave & take risks.
- Let's focus on people and not systems. Systems should meet the needs of people not vice versa.
- Art Therapy in the community not just acute services.
- Third sector staff wellbeing. There is big turnover in many charities and orgs.
- Listen to individuals, keep them at the heart of all decisions.
- Joint working is the key.
- Are we going far enough and fast enough with de-institutionalisation?

12.5 We will be setting up a series of planning sessions beginning April 2024 to set out our refreshed priorities reflecting the changing national and local context.

Thank you for working with us, for your commitment, passion, and energy to creating a Thriving Edinburgh

Update Produced by Dr Linda Irvine Fitzpatrick, Cat Young, and Emma Gall

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