MINISTRY OF HEALTH AND CARE

HM Government of Gibraltar

Gibraltar National Mental Health Strategy 2021-2026

LISTENING & LEARNING

with our community

Foreword

Having been recently appointed as Minister for Health in August 2020, I have made it my mission to make the Mental Health and wellbeing of the people of Gibraltar one of my priorities.

In November 2020 we published a Mental Health Situational Analysis report which was commissioned from Public Health England. The report highlighted excellent progress to date with improvements to the physical environment, the Mental Health Act reforms, and front-line response of our mental health services in Gibraltar as well as suggesting several areas for further improvement, this includes:

- A need for better integration of mental health care across the GHA, and between agencies such as, the Care Agency, Education, other public bodies and NGOs.

- Suicide rates in Gibraltar are not dissimilar to elsewhere, but there is an upward trend globally with a need for further development of our suicide prevention strategy for Gibraltar. In particular we want to get men to feel comfortable talking about their mental health.

- A requirement for better information in respect of the mental health needs of the population, current activity and alignment of funding of services to needs.

- A need to develop greater mental health awareness/literacy in the population and increase self-help strategies for mental health wellbeing and personal resilience.

- A requirement to undertake more work to shape service delivery and quality improvements in partnership 'listening to the patient and carer' voice.

I am indebted and would like to publicly thank the patients, carers and families who have already shared their stories to help shape this strategy. Over thirty people have contributed so far and we intend to continue to work with you as we implement the changes and we continue to evolve.

Our mental health services demonstrated great resilience and have coped well with the challenges of the COVID-19 pandemic and our staff at the GHA, as well as at the Care Agency, should be congratulated for their efforts. During the pandemic I commissioned further work on this strategy to further develop our mental health services, particularly because of my concern over the impact that the pandemic would have on the mental health of people in our community.
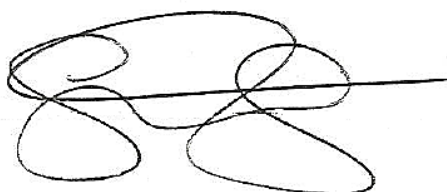
However, the mental health service has not been sitting still while we have been finalising this strategy. In May 2021 I launched a parallel programme of preparatory work supported by external experts in the development and delivery of mental health services to ensure that the service is ready to respond to the changes required to deliver this ambitious vision.

These include:
- Extension of the 'listening and learning' initiative which will be used to give us the opportunity to better use the stories of patients and their relatives to help staff improve the services we provide on an ongoing basis.

- I also intend to launch a patient survey for people receiving mental health support from the GHA. This will not only enable us to continue to learn from people's experience, but measure satisfaction and progress in relation to implementation of the strategy.

- A new integrated interagency 'crisis care pathway' was launched on the 26 July this year. The aim is to improve access to services and follow up support for people presenting in crisis. This will include:

- A clear pathway using evidence-based protocols with published response times that are aligned to the level of assessed clinical need that a patient is presenting.

- Early bookable assessments for those not needing an immediate response or admission to hospital

- Crisis plans for known patients in response to signs of relapse and enhanced support in the community to help prevent further deterioration and support families/carers.

- Better support and advice to GPs in primary care from specialist mental health professionals.

- Full electronic access to GHA records for staff supporting people in crisis to ensure that care is coordinated and they are fully aware of the needs and current treatment of individuals presenting in crisis.

- We have been providing further training for our in-patient staff in the application of the Mental Health Act and work is underway to develop the Code of Practice.

- Work is underway to set up interagency agreements between the GHA, the Department of Education and the Care Agency to provide more coordinated pathways and support to children and young adults with mental health needs.

- Better relationships with stakeholders and partners in the voluntary sector is always an asset. The GHA mental health service at Ocean Views is working more closely in partnership with NGOs. This includes working in partnership to support people with mental health needs as well as introducing people who are admitted to hospital to the services they provide before they are discharged.

- The Mental Health Board have been actively supporting the development of our services by providing an independent 'critical eye' through their visits and discussions with patients in Ocean Views. They clearly and quite rightly identified a need for an improved range of activities and rehabilitation activities for patients during their stay in hospital. In response we are launching a programme whereby there will be ward based staff with additional training and responsibilities to run ward based activities. This will be further enhanced through a refocused and more structured approach to the delivery of Occupational Therapy Treatments and a programme of ward based daily living activities for patients on our rehabilitation ward.

- We continue to focus on making improvements to the buildings that we deliver mental health services from including:

  - Refocusing our efforts to ensure Ocean Views is maintained to the standard it was when we opened the building.

  - Securing better facilities in the community for our community mental health services.

- We have been working to strengthen clinical leadership in the mental health service and clarify roles and responsibilities in respect of operational delivery and quality improvement. This programme of work will continue.

- Finally, I intend to launch ongoing audits and a formal review process in respect of significant events and untoward incidents in Mental Health in order that we can ensure we have learned and continue to learn lessons and incorporate these into our service transformation programme.

Although there has been much progress since taking up my position as Minister for Health there is still more that we can do to ensure the mental health needs of our population are well supported. As the Minister responsible, I am firmly committed to delivering the objectives of this strategy.

The Hon Samantha Sacramento MP
Minister for Justice, Equality, Health and Care

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Executive Summary

The primary goal of this 5-year mental health strategy (2021-2026) is to improve the mental health and wellbeing of the population of Gibraltar. To achieve this ambition we will need to strengthen existing mental health services which are primarily delivered through the GHA, ensure that they are well integrated with other public services and focus on the needs of the individual, family and community across the life course. The solutions developed will use a blend of evidence based best practice adapted to the unique needs of Gibraltar.

This strategy has been developed, over the last nine months, through a comprehensive and multi-agency stakeholder and public engagement process. The emphasis is on mental health promotion, ill health prevention, treatment, care and recovery with due attention to the principles of equity, human rights, evidence, and user empowerment.

Our vision is to provide the best possible mental health and care for the population of Gibraltar which is co-produced with the individuals served, along with their families and carers. This will be delivered through an integrated mental health and care system which works in collaboration with wider system partners to promote mental health and wellbeing in which:

- self-care is promoted

- stigma is addressed

- there is equitable access to care and treatment to support those who develop mental health disorders

- a focus on early intervention, community mental health care and recovery

The overarching aim is to strengthen the Gibraltar Health Authority (GHA) Mental Health Services as well as those of partner agencies such as the Care Agency. With a focus on community-based care, treatment and support, providing services in community settings in partnership with other public sector provision and voluntary sector organisations. The aim will be to deliver these services as close to the population served as possible. Our ambition is that hospital admissions are kept as brief as possible, promptly arranged to provide effective interventions and used only when necessary with support concentrated in the community. Central to this strategy is the integration of mental health services into the mainstream, to reduce stigma, facilitate parity and ensure equal access for those with a mental health need to other health and social care provision. Furthermore, we aim to work with other public sector depatments to help address the wider determinants of health.

The initial focus will be putting the patient first by delivering patient centred care in which individuals are empowered and involved in planning their own care. Families and carers will also play a vital part in the organisation and delivery of support, depending on the wishes and needs of the individual. Going forward, promoting self-care and building mental health resilience in the community will also be a priority.

The Gibraltar Mental Health Act (MHA) 2016 was developed to align with modern mental health legislation and in particular the MHA in the UK. This was an important step forward and those that worked to achieve this milestone should be congratulated. However, the Code of Practice to help interpret implementation of the Act needs to be finalised and implemented to ensure the benefit of the new legislation is fully realised. The Minister for Health has established a working group to undertake a final review of the current draft and ensure it is aligned to the needs of Gibraltar.

There has been significant capital investment in Mental Health over recent years including the reprovision of inpatient services to Ocean Views and development of the Associate Mental Health

Practitioner Role. Ideally, funding for mental health should be commensurate with health burden and need. Further analysis in respect of mental health budget and pattern of spend is required in-order to ensure there is parity and existing investment is targeted to the areas of greatest need.

Whilst great progress has been made there are areas where the specialist mental health services could be enhanced further, which include:

- standardised management of common mental health disorders through the Primary Care Centre (PCC)
- improved collaboration within the health system and with other statutory agencies and NGOs
- managing more acute care presentations and responding to crisis in the community
- a recovery approach (similar to the UK CPA)
- enhanced planning and support after discharge from hospital
- full implementation of the MHA 2016 and the Code of Practice, including the role of advocates
- a training plan that strengthens the skills required across the mental health system
- strengthening of interagency care pathways and support for substance misuse to supplement Care Agency Services
- development of a fully integrated and locally accessible service for children and adolescents with mental health needs that ensures they are supported in Gibraltar where possible
- enhanced monitoring of progress and health outcomes for the whole system

Some positive mental health promotion activities were delivered during the COVID-19 pandemic. This strategy intends to build on this success with the development of a more strategic and comprehensive approach to improve awareness, understanding and attitudes towards mental health, with a focus on self-care and resilience. With the introduction of GHA approved information, self-help resources and digital tools, local people can strengthen their mental wellbeing.

This strategy has 4 overarching priorities which are in alignment with the World Health Organisation (WHO) Global Mental Health Action Plan 2013-2030 (WHO, 2018). Within these overarching strategic priorities, we have 7 priority areas:

Leadership and governance
- Strengthen the Policy, Legislation and Administrative Framework for Mental Health
- Review of current patterns of investment expenditure and parity of financing for mental health

Information systems, evidence, and research
- Mental health information systems to improve patient care and support monitoring of the performance of the system

Community based mental health services
- All GHA and Care Agency mental health services focus on recovery, prevention, and early intervention
- Coordinated mental health service provision across the system through the appropriate workforce, care pathways and governance

Health promotion and prevention
- Reduce stigma and increase awareness of mental health
- Promoting GHA approved information, self-help resources and digital tools to enhance resilience and better mental wellbeing for everyone in Gibraltar

The Ministry of Health and Care will take a lead on ensuring this strategy is implemented, through the GHA and other partners in the mental health system.

1. Introduction

The primary goal of this strategy is to improve the mental health and wellbeing of the population of Gibraltar and to strengthen existing mental health services to ensure that they are integrated and focused on the needs of the individual, family, and community across the life course.

This strategy is based on the World Health Organisations (WHO) dictum 'no health without mental health' and conceptualises mental health as a "state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, work productively and fruitfully and is able to make a contribution to his or her community." (WHO, 2004)

Through the implementation of this strategy we seek to strengthen the GHA and Care Agency system, with a focus on community-based services by focusing on providing services in community settings close to the population served. While hospital stays are kept as brief as possible, promptly arranged, provide effective intervention and used only where clinically necessary.

Central to this strategy is the integration of mental health services. The provision of mental health services must be coordinated to reduce fragmentation in delivery, to avoid duplication of provisions in health and other sectors and ensure that the patient experiences a seamless well-coordinated service. Care at all levels should emphasise prevention and promotion of mental well-being, advance and protect human rights and address the wider social determinants of mental health, for example education, poverty and employment.

The proposed changes to mental health service delivery in this document have been developed through comprehensive and multi-agency stakeholder engagement with an emphasis on promotion, prevention, treatment, care, and recovery and due attention to the principles of equity, human rights, best practice evidence and user empowerment. The WHO Mental Health Gap Action Program (mhGAP) has informed the development of the detail of the strategy to assist with the cross-sector integration of mental health provision (WHO, 2018).

It also cannot be forgotten that this strategy was written during the COVID-19 pandemic when the mental health effects are being felt by everyone across the system. The impact is both directly from the disease itself, including the loss of life and bereavement and indirectly through the lockdown and restrictive measures. Schools have been closed, vulnerable people have been isolating; all of which has contributed to anxiety and low mood. For our mental health in-patients in Gibraltar the successes from Infection Prevention Control (IPC) measures means that there have been only 6 cases on our in-patient wards and no deaths. This is a great success in an institutional setting housing vulnerable people who often have co-existing physical health conditions. But this has come at a further mental health cost, like the rest of society, our inpatient population had minimal social contact with loved ones as well as a reduction in group activities and social interactions in the hospital. As we recover from COVID we must focus on our most vulnerable living in institutional settings as a priority so that their mental health does not deteriorate further, as well as the most vulnerable in society e.g. looked after children and people with disabilities.

2. The GHA mental healthcare system in Gibraltar

Before we can go forward with this strategy it is vital to reflect on the historical development of the mental health system in Gibraltar and the successes thus far.

2.1.   Policy, legislation and finances

The ambition and vision set out in this strategy align well with current global mental health policy. Some of the objectives and principles in this strategy are already starting to be implemented as agencies have been brought together to start implementing early action. However, further long-term action is needed to integrate the mental health system for the improved patient care, with a focus on prevention and early intervention. The following areas are a key focus for implementation:

- protecting the rights of those with mental disorders
- the involvement in policy and service evaluation of those with lived experience and their families
- a recovery approach in the specialist services
- enhanced promotion and prevention activities (particularly with children and young people)
- improved collaboration within the mental health services
- enhanced mental health service provision in primary care for those presenting with common mental health needs
- preventing ill mental health and promoting good mental wellbeing

The Gibraltar Mental Health Act (MHA) 2016 was developed to align with modern mental health legislation and in particular the MHA in the UK. The Act has established a Mental Health Board (MHB, 2018) which has produced three annual reports detailing the results of their independent review of the GHA mental health system. The introduction of the Act also involved the creation of the Approved Mental Health Professionals (AMHPs), a new role to help lead and manage the implementation of the Act, as well as providing mental welfare support, drop-in clinics and a crisis line, some aspects of the service is underutilised. The Code of Practice (practical legislation to interpret the Act) is in the process of being finalised. Its publication will help address potential variation in implementation of the Act as a result of interpretation and help ensure patients' human rights are consistently managed.

In accord with the Act, the Mental Health Review Tribunal was formalised under Part 6 of the Act in 2018. This Tribunal enables legal challenge to detention under the MHA and may order a patient's discharge where they deem appropriate. Since the MHA was introduced, over 100 patients have been referred to the Mental Health Review Tribunal. This is a positive sign that the rights of individuals under detention are safeguarded by these reforms. The Mental Health Board continues to develop it's role in monitoring the quality of services and produces an annual report of its work.

Sufficient levels of sustainable funding for mental health are important. Also of importance is what that funding is spent on and how it is distributed across the mental health system. An analysis of the mental health budget and assets (such as the estate) will look at how resources are distributed currently. A comparison with other health systems will then be made which will inform future decisions on allocation, efficiency and value for money.

Another pre-requisite of improving mental health services and addressing mental health needs of a population is data. For prevalence data we need to incorporate identification of mental health need through community surveys. For our mental healthcare system and to understand how well we serve those using our services we need to move away from paper towards electronic records, in order that we can better monitor activity, standards of care and outcomes. Data sharing agreements between

statutory agencies (that address GDPR concerns) need to be in place for improved care of the patient and to share information on a need to know basis between agencies and services.

2.2.   Mental Health Treatment Services

Mental health services in Gibraltar have advanced in recent years and has much of the same components as most other modern mental health systems. Those provided by the GHA include:

- primary care
- community multi-disciplinary care
- a modern hospital based inpatient unit

The core aim of this strategy is to further refine, develop coordinate and integrate the existing components of the mental health system.

2.2.1. Primary Care

In any healthcare system most mental health need will initially present in primary care. Common mental health problems are usually well managed in primary care, particularly where there are well developed systems of support including:

- evidence-based treatment protocols
- accredited patient information and self-help tools
- structured time limited primary care counselling and advice using Cognitive Behavioral Therapy techniques

These arrangements work best when they are supported by clear care pathways into secondary care where more specialist assessment and or treatment is required and support and support/advice from specialist/secondary care services.

Evidence from the UK indicates that around 40% of patients seen by General Practitioners (GPs) are for mental health reasons (MIND, 2018). Data for Gibraltar indicates less than 5% of GP consultations are recorded as mental health; coding remains an issue in primary care and so we know that this figure may well be higher.

As we move forward with this strategy there will be a need to identify a primary care General Practitioner (GP) mental health lead. With the support of psychiatrists, psychologists and other mental health specialists and development of clear care pathways we can move to a standardised and accessible offer of mental health support and care for common mental health needs. In addition we will work to ensure that there is parity in respect of the physical healthcare needs of people with severe and enduring mental health problems delivered in partnership between primary and secondary care. A further aim of this strategy is that primary care will play a central role in community management of mild/moderate common mental disorders. This should include the development of a range of evidence-based options including GHA accredited advice and information, digital self-help tools and a stepped care model of psychological support and counselling.

Until recently the AMHPs sat within the Primary Care Centre (PCC) and provided mental welfare support to patients in the community, as well as being the approved professionals to arrange involuntary admissions to hospital where appropriate. This includes MHA assessments, Mental Capacity Act Deprivation of Liberties (DoLs) assessments, patient welfare support and family interviews for tribunal. Now that the role is well established we are integrating these staff with the rest of the Mental Health system as is common practice in the UK.

2.2.2 Associated Hospital Services

St Bernard's Hospital (SBH), predominately in A&E but across the hospital also have a key role in caring for people with mental health. In 2020 there were over 1047 attendances at A&E were for mental health reasons (3.4%). Many of these patients present in 'crisis'. The underlying data, reasons for these presentations, clinical coding and the support these patients require, needs further review and analysis as well as better management through the introduction of enhanced triage arrangements and follow up delivered in partnership with the specialist mental health service.

2.2.3   Community Mental Health Team (CMHT)

The CMHT at Coaling Island offers home visits, clinics and follow-ups in the community. The team consists of psychiatrists, psychologists and nurses (senior mental health nurses and enrolled nurses). The service is currently working to include input from occupational therapists and social workers to enable the community mental health service to offer the full range of multi-disciplinary supports.

CMHT caseload is just under 500 patients. Additionally nearly 200 Alzheimer's/Dementia patients are supported at the Memory Clinic at Bella Vista Day Centre. The service provided at Bella Vista is provided in partnership with the Elderly Residential Services and provides invaluable support to this care group and their carer.

A core aim of this strategy is to further develop the role of the CMHT as the central plank for the delivery of specialist secondary care community Mental Health and Social Care services. There is a need for community mental health services to be better linked through joint working with other system partners, including social services substance misuse services, housing, the police, education and NGOs.

2.2.4   In-Patient Mental Health Services

In-patient facilities have improved considerably with the opening of the new in-patient facility at Ocean Views (OVs) in 2015, replacing the previous King George V (KGV) hospital. This is a modern 52 bed mental health facility, with a well-equipped Activity and Rehabilitation Centre (ARC).

Ocean Views receive around 15 admissions per month with an average length of stay of 91 days. These come most often via the newly established Mental Health Liaison service (2019) which is working towards ensuring rapid assessment and support for people in a mental health emergency. During the COVID-19 pandemic MHL have seen increases in demand; Jan-March total 128; April-June total 144; July-September total 160. The GHA Mental Health Service have recently introduced a crisis pathway which integrates MHL, AMHPs, and CMHT services. This pathway is supported by 111 as a single point of contact to help triage an prioritise need and help individuals presenting in crisis access support quickly and easily. This will make for a more streamlined and responsive service for people presenting in crisis. This includes additional bookable nurse led appointments for those not requiring urgent assessment or admission to hospital. Going forward the Care Agency will be providing Social Worker support to this team. The length of stay for the inpatient service seems high although the data may be related to the impact of the pandemic. Further work is required to ascertain norms. Introduction of structured care pathways for Acute Care in the UK has reduced length of stay by at least 10% and Improved engagement and management of patients on discharge from hospital. A similar approach should be considered for Gibraltar.

The adult gender service has also recently been developed with mental health providing secondary care and mental health support for the specialist endocrinology service. Consideration should be given to how this service should be defined and structured going forward.

2.2.5   Child and young people service

For children and young people we have a dedicated part time psychiatrist and mental health nurse who work with partners across the system. COVID-19 is impacting children and young people's mental health and without coordinated action, with a focus on prevention and early intervention, we will see increased demand on mental health services. Children and young peoples mental health services need further development and strengthened inter agency arrangements. The Education system in Gibraltar has developed an excellent complementary school-based offer to support the wellbeing and resilience of children see 3.2 below.

2.2.6   Summary

Whilst great progress has been made in the mental health system in Gibraltar, there are areas where the specialist mental health services could be enhanced further. These include:

- the introduction of structured care pathways
- improved collaboration within the health system with other statutory agencies and NGOs
- adoption of a recovery approach to care and treatment for people with long term mental health needs (similar to the UK Care Programme Approach)
- enhanced planning and support after discharge from hospital
- publication and implementation of the MHA 2016 Code of Practice
- a training plan that strengthens the skills required across the mental health system
- managing more acute care presentations in the community
- standardise and enhance the management of common mental health disorders through the Primary Care Centre
- enhanced monitoring of progress and health outcomes for the whole system

2.3   Mental health information systems

There is no single clinical information system used in Gibraltar. PCC use EMIS and A&E use Symphony. Nursing and Psychiatrists at CMHT at Coaling Island and in-patient services at Ocean Views use paper notes. Prior to the introduction of the new crisis pathway comprehensive information was not easily available for patients presenting in crisis. This has been addressed through the introduction of laptops with remote access to all the above systems for staff working in the crisis pathway. Furthermore all the documentation supporting this pathway can be uploaded to EMIS. The introduction of Crisis Plans for known patients will further enhance the information available to help GHA mental health staff and GPs in Primary Care understand if a patient is showing signs of relapse. These plans will document patient preferences and the support which needs to be activated to prevent relapse.

Going forward it will be important to work towards digitising all other mental health records.

2.4   Community aspects of mental health

Members of the community in Gibraltar are increasingly approaching primary care with mental health related problems. However continued stigma and negative attitudes about mental health means we do not feel able to talk openly about it to each other outside of a doctor's clinic. A lack of GHA accredited information and awareness of self-care options also limits the ability of individuals and families to take better care of their own mental health.

The service has undertaken some mental health promotion activities, especially around supporting mental health and wellbeing in the current COVID-19 pandemic. This strategy intends to build on this success with the development of a more strategic and comprehensive communications approach to improve knowledge and attitudes towards mental health, with a focus on self-care in line with other modern mental health systems.

2.5   Mental health resilience and wellbeing

To cope with the challenges of everyday life and stressors like COVID-19, the community in Gibraltar needs the necessary psychosocial awareness, skills and tools to remain mentally resilient. Regardless of whether individuals have a mental disorder or not we all need to know how to look after our mental health and wellbeing.

There are helpful resources online that can assist individuals and families to protect and promote their mental health and wellbeing (Good Thinking, 2020). For instance the NHS Every Mind Matters (NHS, 2021) resources support individuals to make personal 'mind plans' which takes a self-care approach to a mentally healthier lifestyle. There are also NHS approved apps (NHS, 2020) that can help people manage their own mental health. With the introduction of GHA approved information, self-help resources and digital tools, local people can become more resilient and experience better mental health.

2.6   Mental health in the context of COVID-19

This strategy was written at a time when the COVID-19 pandemic was at its peak in Gibraltar and much of the world including its impact on mental health which will be felt for many years to come without early intervention now. In both the initial lockdown in March 2020 and the second lockdown and peak in January 2021, mental wellbeing support has been made available to staff across the Gibraltar Health Authority and Care Agency as well as the extension of bereavement support to families affected by COVID-19 directly and indirectly in the second lockdown. These successes need to continue to be built on to ensure we prevent a COVID-19 related mental health crisis.

3. The wider mental health system in Gibraltar

We cannot develop the mental health care system of the Gibraltar Health Authority without involvement with organisations and sectors outside of health that have an influence on the community's mental health. At the heart of this vision and strategy the aim is to work in collaboration and integration with the wider system of public services and Non-Governmental Organisations. This broadly aligns with the determinants and consequences of mental ill health, education, housing, employment, physical health, etc. (WHO, 2018). There are excellent examples of mental health work across these different sectors. Going forward we need to maxmise the impact of this work under the umbrella of a single vision of better mental health for everyone living in Gibraltar.

3.1   Social care

The Care Agency supports vulnerable children and adults. This involves support for children who are looked after and those on child protection plans. The Care Agency also provides care for adults (vulnerable or older people) and people with disabilities. Mental health needs are commonly seen in this vulnerable group. The Care Agency and GHA Mental Healthcare Services would both benefit from greater collaboration with both adult, children and older peoples services to provide coordinated and seamless support for patients and clients.

3.2   Education

Since 2017, the Department of Education (DfE) has invested in children and young people's mental health in an unprecedented way. This investment in prevention and early intervention has been further built on by the development of a strategy to promote mental health in schools (published in 2019). This has included the introduction of a school counselling service which already has a large waiting list. There is now a need for the education partners to work with GHA mental health colleagues and the Care Agency to ensure a structured pathway of care for those children and young people with mental health problems which includes recovery in the school community. An integrated approach will be developed that is collaborative and coordinated around the child/young person.

3.3   Housing

There is a large public rental housing sector in Gibraltar. A separate priority housing list is retained for people with additional needs, including people with a diagnosed mental disorder. It is also likely that a substantial number of adults with mental health needs, particularly common mental health conditions may be living in social housing without their needs known to housing services. The aim is to work even more closely with the housing department going forward to ensure people are well supported.

In line with St Bernard's Hospital Bed Management arrangements the aim is now to replicate this process with mental health at the Ocean Views Mental Health in-patient facility so that we can better plan for patient discharge and ensure they have access to timely and appropriate housing. The supply of accommodation and support services so that tenants can live independently also needs to be addressed across agencies. Currently there are a number of patients at OV who need supported living options in the community with individual tenancies wherever possible. Collaboration across housing, the Care Agency and the GHA is needed, and the Bed Management Meeting at Ocean Views will be a valuable first step.

3.4   Employment

We know that employment is a route to prevent poor mental health and is also vital in supporting people to recover from mental ill-health. The NGO Clubhouse provide support to people with mental health problems to access employment opportunities which is a valuable support service. The Department of Employment provide a supported employment company (SEC) offer wider than mental health. The Government also have the Economic Development & Employment Company (EDEC) offer for working age adults, which aims to place all locally unemployed persons into employment through business partnerships agreements with the private sector. Innovative work is also happening through the Gibraltar College, with a dedicated offer to train and support vulnerable young people transitioning from education into employment.

The safety net of welfare benefits is available in Gibraltar, including those with mental health problems, but this should facilitate a pathway back into work. Ensuring that any financial disincentives to people on a work rehabilitation pathway are removed in the welfare system and will ensure recovery is promoted.

There is now a need to develop an offer to include better trained support to those with mental health problems to engage and sustain employment. A coordinated offer to people with mental health problems needs to be established with all the key providers to avoid duplication and ensure there are many opportunities to engage in meaningful work, training and employment. This is crucial in aiding recovery. The GHA will also build on its own approach to supporting the wellbeing of its staff.

3.5   Crime

The Royal Gibraltar Police (RGP) and Her Majesty's Prison have access to Forensic Medical Examiners (FME GHA doctors) where there are concerns relating to the health or mental health of a detainee who will refer on to the GHA or mental health services if needed. Self-harm and depression are reportedly the most common mental health needs identified among police detainees. Several prisoners are known to the prison system to have mental health issues although others may be undiagnosed. The prison currently has input from a psychiatrist, a counsellor and a mental health nurse with experience in forensic MH settings.

The RGP are also often involved with community members in crisis or with acute needs, including taking people to a place of safety under the MHA. In 2020 the RGP supported ten such people under the MHA, nine conveyed to New Mole House (police custody) and one to SBH. Of these, five were released following the mental health assessment and five were sectioned and admitted to the Ocean Views in-patient facility.

3.6   Physical health – Parity of Esteem

There is a co-existing relationship in that people with mental health problems are more likely to have physical health problems and people with physical health problems, for example cancer, diabetes, cardiovascular disease are more likely to have mental health problems (WHO, 2013).

People with serious mental illness (SMI) experience profound health inequalities with a life expectancy up to two decades shorter than the general population. They experience higher rates of both long term conditions, such as heart and lung disease, diabetes and infectious diseases and adverse lifestyle risk factors related to smoking, nutrition, exercise, sexual health and substance misuse. MH service users however have proportionately poorer access to general health and health improvement services (Tudor Hart's Inverse Care Law). Barriers to health care can be related to patient and illness factors or to attitudes of healthcare staff and other service organisation issues.

Achieving 'parity of esteem' to improve the physical health and well-being of people with serious mental illness needs to be a key priority.

Barriers to healthcare can be ascribed to stigma – attitudes of healthcare staff and service organisation factors and to 'self-stigma' – factors related to patients or their illness.
Key factors include:

- diagnostic overshadowing – 'mental illness trumps all other symptoms'
- understanding, skills, competence and training
- attitudes, assumptions, expectations
- time, other resources, fragmented service and funding responsibilities

There is therefore a need to encourage dual management of mental and physical health as appropriate throughout the Gibraltar Health Authority starting with Primary Care (i.e. prescriptions, monitoring) moving on to other secondary care specialties. Furthermore, there is a need to develop health improvement activities and services in partnership with MH service provision.

3.7   Substance misuse

There is substantial co-occurrence of mental disorders and substance use disorders. The presence of Bruce's Farm rehabilitation centre is a valued resource that is currently being managed by the Care Agency. However, there is an urgent need for a system wide strategy and development of integrated care pathways particularly at a time of growing demand for these services as a consequence of the pandemic. In the interim there is a need to ensure there is adequate senior clinical input to support Bruce's Farm and this population. A needs assessment of the scale of misuse of drugs and alcohol in Gibraltar should be undertaken to help better identify the size of the burden and need in the population. Colleagues in substance misuse and mental health should work closely together to provide support for people with co-existing mental and substance misuse problems.

3.8   Vulnerable groups

Our most vulnerable groups are most likely to be impacted by mental health. This includes those living in poverty, looked after children, people with disabilities, those in contact with the criminal justice system, the unemployed etc. We have a role therefore to both ensure we prevent mental ill health in these vulnerable groups through a holistic package of support as well as ensure services adapt to meet the needs of these groups to give them timely mental health support when they need it.

4. Scope of this strategy

This strategy has been developed during the COVID-19 pandemic and therefore a time of change in how the mental health system works in Gibraltar as well as a time in population change from the lockdown restrictions. The detail will be further strengthened as we implement the milestones through detailed work with patients, carers, clinicians and expert advice.

4.1   Methodology

The Strategic Mental Health Committee was established in December 2020 to support the development of this strategy it has and will continue to meet regularly to inform the direction and implementation of this strategy. Two key stakeholder consultation workshops were conducted, the first in December 2020 in which the members of the Strategic Mental Health Committee were asked to rank the recommendations put forward in the PHE situational analysis 2019 report. The Strategic Mental Health Committee then worked to restructure and reword these recommendations into objectives for the strategy. The second stakeholder consultation was in March 2021 with key national stakeholders in which agreement was sought on the vision, mission, principles and the prioritisation of the objectives. Alongside this, a range of stakeholders have been consulted for their views and their insights are embedded into the final presentation of this strategy. A number of patients and carers contributed to the development of this strategy. Subsequently, we have continued to meet with individuals with lived experience of using services and their families to establish an ongoing programme of 'Listening and Learning'.   Going forward as we implement this strategy and support practice development this feedback will be actively used to guide us in our mission.

**What patients, carers and families said would help improve services:**

- A more coordinated response at times of crisis which is easy to navigate
- Development of crisis plans for known patients ensure services are activated early where there are signs of relapse to help prevent the need for readmission to hospital unless necessary
- Better coordination of services between the Mental Health and Primary Care including more options to better support people in primary care
- Better discharge planning with more consistent standards of care and follow up in the community
- Better support for people out of hours, over the weekend and bank holidays, particularly for known patients living in the community Strengthened support for carers, including young carers
- A better range of supported options in the community delivered in partnership between government departments that make people feel safe and supported outside of hospital
- More options for paid work or meaningful volunteering without financial penalties in respect of loss of benefits to assist recovery of people with Mental Health Needs as they work towards full or part time employment.
- Ensure that vulnerable children are supported well and long term institutional care is avoided where possible
- Continue to increase public awareness and reduce stigma through open dialogue in the community about mental health and mental wellbeing
- Ensure close working arrangements with NGOs and other services who make valuable contribution to supporting those with mental health needs

4.2   Ambition

The initial focus of the strategy will be to put the patient first always using patient centred care in which they are empowered and involved in their care plan, as well as promoting self-care in the community. The first two years will also focus on the improving integration within the Gibraltar Health Authority mental health system as well as a focus on increased collaboration with the Care Agency to avoid duplication and ensure coordinated care for the patient. The later part of this strategy will focus on improved collaboration with the wider mental health system, whilst recognising that all areas will continue to be working on improving mental health and wellbeing in our population.

The World Health Organisation promotes a mental health framework to optimise the mix of interventions to address the scale of mental health problems in any population in which the majority of any population will manage its mental health and wellbeing through self-care e.g. good sleep, nutrition, physical activity and social connections (WHO, 2003). It then highlights the role of informal community care to prevent and intervene early around mental health e.g. the work of schools and community services. The Primary Care Centre then manage people with low levels of mental health problems in the community, with the Community Mental Health Team managing a smaller number still through their specialist community mental health teams. At the top of the WHO pyramid we have the acute mental health specialist services, usually the mental health hospital. For Gibraltar we have adapted the WHO diagram into our Rock, and for which we aim to represent how we aim for our mental health system to be structured in Gibraltar, appropriately meeting population need.

Optimal mix of different mental health services
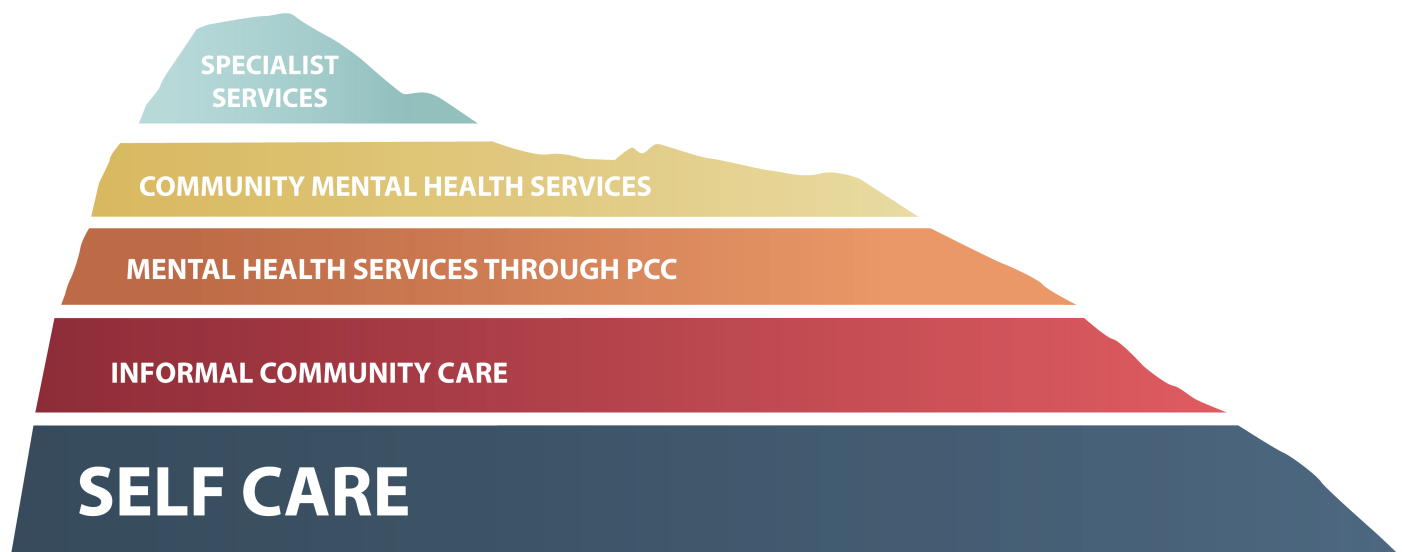
In Gibraltar the greatest unmet need identified is in those with common mental health or sub-threshold problems in the community. Primary healthcare, informal community care and self-care (bottom of the Rock pyramid) needs significant strengthening in order that the greatest quantity of care occurs where the most need is (at the lower levels of the Rock pyramid).

5   Vision

To achieve good mental health and wellbeing for everyone in Gibraltar, supported by an integrated mental health system where services are delivered in collaboration with wider system partners, self-care is promoted, stigma is addressed and equitable access to care and treatment is achieved.

6   Mission

To provide a comprehensive integrated mental health system that promotes self-care, recovery and reduces stigma.

7   Values and principles

The following values and principles will guide the development of the Mental Health system in Gibraltar:

- equity and equality
- respect for human rights and dignity for individuals
- integrated and evidence-based care
- individual and community involvement
- recovery and rehabilitation
- inter-sectoral collaboration
- mental health promotion
- promotion of mental well being and prevention of mental illness

7.1   Mental Health Principles

The underlying principles of this mental health strategy is based on the WHO's mental health action plan and includes the following cross-cutting principles (WHO, 2013):

- **Universal access and equity:** All persons with mental disorders should have equitable access to health care and opportunities to achieve or recover the highest attainable standard of health, regardless of age, gender or social position.

- **Human rights:** Mental health strategies, actions and interventions for treatment, prevention and promotion must be compliant with international human rights conventions and agreements.

- **Evidence-based practice:** Mental health strategies and interventions for treatment, prevention and promotion need to be based on scientific evidence and good practice.

- **Life course approach:** Mental health policies, plans and services need to take account of health and social needs at all stages of the life course, including infants, children, adolescents, adults and older adults.

- **Multi-sectoral approach:** A comprehensive and coordinated response of multiple sectors such as health, education, employment, housing, social and other relevant sectors should be utilized to achieve objectives for mental health.

- **Empowerment of persons with mental disorders:** Persons with mental disorders should be empowered and involved in mental health policy, planning, legislation, service provision and evaluation.

7.2   GHA Values

The mental health system in Gibraltar is also committed to the Gibraltar Health Authority Values found in its constitution:

- **Working together**
- **Excellence**
- **Compassion**
- **Accountability**
- **Respect**
- **Equality**

8   Objectives and assumptions

This strategy has 4 overarching priorities which are in alignment with the World Health Organisation (WHO) Global Mental Health Action Plan 2013-2030 (WHO, 2018). Within these overarching strategic priorities, we have 7 priority areas:

Leadership and governance
- Strengthen the Policy, Legislation and Administrative Framework for Mental Health
- Review of current patterns of investment expenditure and parity of financing for mental health

Information systems, evidence and research
- Mental health information systems to improve patient care and support monitoring of the performance of the system

Community based mental health services
- All GHA and Care Agency mental health services focus on recovery, prevention, and early intervention
- Coordinated mental health service provision across the system through the appropriate workforce, care pathways and governance

Health promotion and prevention
- Reduce stigma and increase awareness of mental health
- Promoting GHA approved information, self-help resources and digital tools to enhance resilience and better mental wellbeing for everyone in Gibraltar

Key Milestones for Implementation

Strategic priority	Priority area	Implementation	Timeline
Leadership and Governance	Strengthen the Policy, Legislation and Administrative Framework for Mental Health	• MH and Capacity Act Code of Practice • Actions to remove barriers to implementation of the strategy and prepare services/staff for the programme of transformation. • Development of an Implementation plan for this strategy • Introduction of project management arrangements to support implementation of the strategy	2021 2021
	Review of current patterns of investment expenditure and parity of financing for mental health	• Resource allocation, Benchmarking and Budget review	2022
Information systems, evidence and research	Mental health information systems to improve patient care and support monitoring of the performance of the system	• Integration of Mental Health Records into one of the GHA EPRs. Developments of a Mental health system performance dashboard	2021-2022
Community based mental health services	All GHA and Care Agency mental health services focus on recovery, prevention and early intervention	• Introduction of more robust: o discharge planning processes o Crisis Plans for known Patients o Staff training in the use of recovery and early intervention tools o Organisational Development plan to support culture change	2021-2023
	Coordinated mental health service provision across the system through the appropriate workforce, care pathways and governance	• Introduction of robust governance and performance reporting mechanisms • key care pathways developed forward forecast workforce planning	2021-2022
Health promotion and prevention	Reduce stigma and increase awareness of mental health	• Cross-sectoral mental health promotion and awareness plan developed and implemented	2022-2023
	Promoting GHA approved information, self-help resources and digital tools to enhance resilience and better mental wellbeing for everyone in Gibraltar	• Self-help advice and care resources approved by GHA and accessible to the population	2021-2022

8.1   Critical Assumptions

To develop such a comprehensive strategy, certain assumptions must be made to guide the process and to ensure that the strategy is as inclusive as is possible to aid the most effective implementation.

The following assumptions will guide the implementation of this strategy:

- The majority of personnel required to execute this strategy's activities will be available. This includes project management support to facilitate implementation and support the system leaders
- Effective actions to achieve targets require cross-agency collaboration outside health, and targets/goals should be shared rather than competing
- The strategic committee will be responsible for decisions and delivery of this strategy, and will report to the Minister for Health
- Colleagues across the system will provide appropriate assistance to support the implementation of this strategy
- Monitoring and evaluation is embedded within the implementation of this strategy, the efficacy of activities to be reviewed and revised to reflect changing realities.

8.2   Responsibility to Update the Mental Health Strategy

The National Mental Health Strategy is to be updated every five years, and each version will carry the date of publication on the front cover. The Ministry of Health will take the lead in ensuring the strategy is updated.

8.3   Conclusion

The Mental Health strategy is the platform being used to set targeted priorities for the improvement of the treatment, care and quality of life of people with mental health problems and mental illnesses and the promotion of psychological wellbeing of the people of Gibraltar across the life course.

9. References

Good Thinking, 2020. *Good Thinking: Digital Mental Wellbeing for London.* [Online]
Available at: https://www.good-thinking.uk/

MIND, 2018. *40 per cent of all GP appointments about mental health.* [Online]
Available at: https://www.mind.org.uk/news-campaigns/news/40-per-cent-of-all-gp-appointments-about-mental-health/
[Accessed 17 February 2021].

NHS, 2020. Mental Health Apps Library. [Online]
Available at: https://www.nhs.uk/apps-library/category/mental-health/

NHS, 2021. Better Health: Every Mind Matters. [Online]
Available at: https://www.nhs.uk/every-mind-matters/

PHE, 2019. *Mental Health Situational Analysis Report – Gibraltar.* London: Public Health England.

PHE, 2020. *COVID-19: mental health and wellbeing surveillance report.* London: Public Health England.

WHO, 2003. *The World Health Report 2003: Shaping the Future.* Geneva: World Health Organisation

WHO, 2004. World Health Organization. *Promoting mental health: concepts, emerging evidence, practice (Summary Report),* Geneva: World Health Organisation.

WHO, 2013. *Mental health action plan 2013 - 2020.* Geneva: World Health Organisation.

WHO, 2018. *mhGAP Operations Manual.* Geneva: World Health Organisation .

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- Minister for Economic Development, Enterprise, Telecommunications and Gibraltar Bank

The Mental Health Board

Gibraltar Health Authority

- Including representatives from:
  - The Primary Care Centre
  - Mental Health Service Community and In-Patient Staff
  - Saint Bernards Hospital
  - The Clinical Governance Department
  - Pharmacy

Other Government Departments

- The Royal Gibraltar Police
- Her Majesty's Prison Services
- The Department of Education
- The Care Agency
- The Housing Department
- Youth Services

Non-Government Organisations

- Club House
- Gibsams
- The Dementia Society
- Childline
- The Mental Welfare Society
- The Citizens Advice Bureau

MINISTRY OF HEALTH
AND CARE
HM Government of Gibraltar

Gibraltar National Mental Health Strategy 2021-2026

LISTENING
& LEARNING
with our community