

Scottish Patient Safety Programme Mental Health

Programme offer and submission guidance

September 2025



Contents

Introduction	3
Programme priorities	
SPSP MH Improvement Support	3
Joining the programme	4
Get in touch	4
Appendix 1 - Frequently Asked Questions	5
Annendiy 2 — Evaressian of interest IMS Form questions	Q

Introduction

This document sets out the improvement offer from the Scottish Patient Safety Programme for Mental Health (SPSP MH) to NHS Scotland boards and corresponding HSCPs, regarding a new workstream focusing on safety at points of transition. This offer was co-designed with NHS boards, Scottish Government and strategic partners to accelerate sustainable improvement in locally identified safety priorities.

SPSP is a national quality improvement programme delivered by Healthcare Improvement Scotland, which aims to improve the safety and reliability of care and reduce harm. The SPSP MH was first established in 2012 and aims to prevent serious harms experienced by people with severe and potentially enduring mental health problems. Previously, the SPSP MH focused on point of care improvement around reducing use of restraint and seclusion and improving observational practice. A new workstream focusing on safety at points of transition has been developed following completion of a discovery phase, considering findings of core mental health standards local assessments, and input from key stakeholders.

Programme priorities

As a priority, the programme will focus on the interface between acute and community mental health care as a known area of risk. The overall aim of the safety at points of transition workstream is to: "Reduce harms and improve patient experience when transitioning from inpatient to community care".

Our programme objectives include:

- the successful onboarding of test sites across NHS Scotland,
- supporting test sites to actively investigate, measure and improve their approach to safety at points of transition between inpatient and community settings,
- develop learning materials which support the sharing of practice, and
- develop insights into safety at points of transition to inform future scale and spread.

SPSP MH Improvement Support

Participating boards will be supported by Healthcare Improvement Scotland to identify, test and spread evidence-based change ideas. Where full participation is not possible, boards will have the opportunity to be kept updated on progress via our SPSP learning system as outlined below.

Boards who wish to participate fully in the safety at transitions workstream should complete the <u>expression of interest form</u>. For further detail, please see appendix 2 detailing the questions contained within the expression of interest form.

The table below outlines the improvement support Healthcare Improvement Scotland will provide to boards, tailored to the level of participation.

Improvement Support	Full participation as a test site	Learning system only
Up to date improvement resources	✓	✓
National reports, with narrative context	✓	✓
National learning events / webinars	✓	✓
MS Teams channel	✓	✓
Workstream specific improvement network meetings	✓	
Progress reports with feedback	✓	
Project surgeries to share and learn together	✓	
Site visits co-designed with boards and opportunities		
for regional learning	,	
Board/team specific improvement coaching	✓	
Data and measurement support	✓	

Joining the programme

NHS boards can apply to join the programme by 1st October 2025. It is anticipated that submission of the expression of interest form will be coordinated locally by the SPSP lead for mental health within the board and then submitted via the MS Form below. To support local discussion, the questions in the form are provided in the appendix of this document, alongside a frequently asked question section.

Click here to access the form

Following submission of the expression of interest form, participating boards will be invited to complete an operational agreement with Healthcare Improvement Scotland.

Get in touch

Email us at his.transformationalchangementalhealth@nhs.scot if you have any questions about the SPSP MH programme, or if you would like to talk to a member of the team.

Appendix 1 - Frequently Asked Questions

This frequently asked questions document has been prepared to provide answers relating to the launch of the 'safety at points of transition' workstream within the SPSP MH. Any further queries relating to the proposed workstream can be sent to the SPSP MH programme team at:

his.transformationalchangementalhealth@nhs.scot

Question 1: What steps do I need to take if I wish to be involved in the workstream? Will there be a selection process?

Answer: Following the launch webinar, we will provide participants with a link to complete a Microsoft form indicating formal expressions of interest in participation. This should be submitted by the designated SPSP key contact within each board area **by 1st October 2025**. After teams have submitted their expression of interest, the internal HIS team will review the forms and confirm participating boards. It is envisioned they be notified 7 days after the closing date.

Question 2: What are the selection criteria?

Answer: The selection criteria to participate in the safety at points of transition workstream include:

- requirement for a named executive level sponsor and sign-off to participate,
- dedicated project / QI support identified locally,
- intention to focus on interface between inpatient to community settings, and
- identified clinical lead(s) for the workstream locally.

Question 3: How many teams are likely to be involved in this new workstream?

Answer: There is no pre-defined number of teams that we intend to be involved in the workstream. We invite expressions of interest from all health boards at this stage. In the event of a large volume of interest, we may consider a phased approach to onboarding, and/or combining teams from the same health board for the purposes of regular meetings and reporting.

Question 4: What level of commitment/resource will be required from local project teams?

Answer: We intend to make participation enjoyable and meaningful for all teams involved, balancing capacity with the expectations of programme. All participating teams will be expected to:

- attend coaching sessions at a frequency suitable to each team,
- create local vision/plan/aims and objectives,
- co-ordinate data collection, analysis and submission on a quarterly basis, and
- share learning at quarterly network meetings both good and bad.

Question 5: What resources are available for participating in the programme?

Answer: All participating teams will be supported by the SPSP MH National team through:

quality Improvement expertise, advice and support,

- access to resources templates, research, evidence,
- access to other teams following similar improvement activities, and
- access to drop-in sessions.

Please note, as the SPSP MH is a core-funded initiative, there is no additional financial resource available to participating teams.

Question 6: What are the measures for the programme, and will we be required to collect data?

Answer: There will be a measurement framework accompanying this workstream. This is currently being developed with the input of the SPSP MH Expert Reference Group and is intended to be formally confirmed with participating teams at the beginning of the programme of work.

The intention will be to ensure that any measures are proportionate and can be used locally to monitor progress. It is envisaged that there will be a data submission requirement on a quarterly basis with participating teams.

Question 7: What is the programme plan (start dates, length of programme)

Answer: Once all participating teams have been confirmed, we intend to formally commence the programme in October 2025. This will involve a kick-off meeting with each site. Provisionally, the first three months of the programme will be used to work with local systems to understand issues and select appropriate change ideas accordingly, before moving into a 12-month period to test and refine interventions. It is envisaged that this will be followed by an evaluation of the programme to inform future scale and spread.

Question 8: We have concerns regarding participation - how will the programme be flexible enough to support engagement when teams are under pressure?

Answer: This programme has been designed and planned with an understanding of the current state of the system and the pressures mental health services are facing. The national team will be mindful of the impact of additional seasonal pressures and will be responsive to capacity issues within participating teams and will take a flexible and adaptive approach.

Question 9: Who needs to be involved locally?

Answer: Each local area will determine the most appropriate stakeholders for their circumstances. Whilst we will not be prescriptive about who should be involved from each site, participating teams at a minimum will be required to identify an executive sponsor, clinical leadership, and appropriate QI / project management support, consistent with the inclusion criteria as listed above.

Question 10: How will we learn from other boards so we aren't re-inventing the wheel?

Answer: Access to a learning system will be integral to the running of the programme. There will be opportunities to share learning during quarterly meetings with all test sites, resources will be shared on our new SPSP MH webpages, and a dedicated MS teams channel will be established to easily contact and share resources with other teams involved within the programme. In addition, the SPSP MH national team will co-ordinate sharing of learning between teams wherever possible.

Question 11: Locally we would like to be involved in the workstream but don't have the capacity to commit currently. How do we keep informed of progress, and will there be a further opportunity to become involved later?

Answer: For teams that are not directly involved in the workstream from the outset, there will be opportunities to keep informed of progress via national webinars and resources shared on the SPSP MH website. The evaluation at the end of the workstream will inform you of the next stages of development for the programme, which may provide a further opportunity for involvement at that time.

Appendix 2 – Expression of interest: MS Form questions

2.	Surname
3.	Job title
4.	Email address
5.	NHS Board
	NHS Ayrshire & Arran
	NHS Borders
	NHS Dumfries & Galloway
	NHS Fife
	NHS Forth Valley
	NHS Grampian
	NHS Greater Glasgow and Clyde
	NHS Highland
	NHS Lanarkshire
	NHS Lothian
	NHS Orkney
	NHS Shetland
	NHS Tayside
	NHS Western Isles
	State Hospital
artici	pation

Pa

1. First name

- 6. Please briefly outline your initial plan as to where you intend to focus improvement efforts as part of your participation in the workstream, including proposed site(s) and justification. (2-3 sentences only).
- 7. It is anticipated that team(s) within a board area would work in partnership with HSCP(s) if you know which HSCP(s) you would be working with, please provide details below.

Key contacts

This section asks you to identify key contacts supporting delivery of SPSP MH safety at points of transition in your board. Please include full names, job titles and contact details.

- 8. Who is/are the executive sponsor(s) for the Scottish Patient Safety Programme within your board
- 9. Who is/are the clinical lead(s) for the Scottish Patient Safety Programme within your board

9

10. Do you have project and/or quality improvement resource locally to support with

participation in the workstream?