



**From the IIMHL and IIDL Update List**

**Welcome to this bi-monthly edition of Update 15 March 2018**

IIMHL organises systems for leaders to share innovations, network and problem solve across countries and agencies. The overall aim is to promote mental health and well-being for everyone. This includes developing leaders who can create the best possible conditions for mental health in all sectors across the life-span. Equally, it includes developing leaders who can deliver the best possible outcomes for people who use mental health and addictions services and their families.

**Update allows the rapid transfer of new knowledge through sharing information about upcoming Leadership Exchanges, as well as key national documents, training and webinars.**

**Please feel free to share this e-bulletin with others and we would be delighted if you would join us on Facebook.**

**IIMHL & IIDL Leadership Exchange 2018  
Stockholm, Sweden, May 28 - June 1**



**IIMHL & IIDL 2018  
Building Bridges  
Beyond Borders**

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**SAVE THE DATE – NETWORK MEETING  
<http://www.iimhl.com/files/docs/20171221a.pdf>**

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## **IIMHL Feature - USA**

**H.Res.443 - Recognizing the importance and effectiveness of trauma-informed care.115th Congress (2017-2018)**

"HOUSE OF REPRESENTATIVES

On Monday, February 26, 2018 the U.S. House of Representatives passed [HR443](#) with unanimous bipartisan support, affirming and advancing trauma-informed care throughout the United States. The Resolution includes:

*Resolved*, That the House of Representatives—

- (1) recognizes the importance, effectiveness, and need for trauma-informed care among existing programs and agencies at the Federal level; and
- (2) encourages the use and practice of trauma-informed care within the Federal Government, its agencies, and the United States Congress”.

### **Introduced in House (07/13/2017)**

Recognizes the importance, effectiveness, and need for trauma-informed care among existing federal programs and agencies. (Trauma-informed care takes into account a patient's history of trauma in the design of the patient's treatment.) Encourages the use of trauma-informed care within the federal government. Expresses support for the

designation of National Trauma Awareness Month and National Trauma-Informed Awareness Day.

### **Implications:**

Now that the federal government has passed this resolution - governmental organizations that function under the federal government (receive funding / states / local legislators etc) can use this language - which opens the flood gates for radical systems level / policy level change.

<https://www.congress.gov/bill/115th-congress/house-resolution/443>

## **Other IIMHL Articles of Interest - Scotland**

### **Distress Brief Intervention (DBI) Programme**

Scottish Government, 2017

The Scottish Government (SG) is focused on improving responses to people in distress. This focus arises from Commitment 19 of the Mental Health Strategy (2012 – 2015)<sup>1</sup> and theme A of the Suicide Prevention Strategy (2013 – 2016)<sup>2</sup>. As part of this work, a brief intervention is being developed and tested as a possible response to people who present in distress when accessing services.

The overarching aim of the DBI Programme is to provide a framework for improved interagency co-ordination, collaboration and co-operation across a wide range of care settings, interventions and community supports, towards the shared goal of providing a compassionate and effective response to people in distress, making it more likely that they will engage with and stay connected to services or support that may benefit them over time. Health, mental health, Police, Ambulance, primary care & A & E & NGOs are all involved.

To read this article in full:

<http://www.dbi.scot/resources/progress-reports/>

### **Mental Health Strategy: 2017-2027**

Scottish Government, 2017

Our guiding ambition for mental health is simple but, if realised, will change and save lives - that we must prevent and treat mental health problems with the same commitment, passion and drive as we do with physical health problems. That means working to improve:

- Prevention and early intervention;
- Access to treatment, and joined up accessible services;
- The physical wellbeing of people with mental health problems;
- Rights, information use, and planning.

<http://www.dbi.scot/resources/>

### **Making it Easy: A Health Literacy Plan for Scotland**

NHS, 2014

We want Scotland to be a health literate society which enables all of us to have sufficient confidence, knowledge, understanding and skills to live well, on our own terms, and with any health condition we may have.

Making it Easy, the National Health Literacy Action Plan for Scotland, has been developed with a national group, which has drawn on the expertise of front line practitioners, policy makers, academics and those with years of experience with NHS boards and the third sector; they in turn drew on the direct experience of those who have struggled to engage with health and care services.

<http://www.gov.scot/resource/0045/00451263.pdf>

### **A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections**

Scottish Government, January 2108

Social Isolation and loneliness is an issue that can affect anyone at any age or stage of their lives. Feelings of loneliness have been demonstrated to have wide ranging consequences for those effected. and has been shown to lead to depression across all ages, as well as cognitive decline and dementia in older people. There is also the potential for serious physical health implications which have been compared to those of obesity or smoking.

<https://consult.gov.scot/equality-unit/connected-scotland/>

### **New Scots Refugee Integration Strategy (2018-2022)**

Scottish Government, COSLA and the Scottish Refugee Council, February 2018

The strategy builds on the work from 2014-2017, setting out key principals for supporting refugees and asylum seekers and acts as a platform for organisations to develop their work around.

The strategy, which has been endorsed by the United Nations' Refugee Agency, was developed through a series of engagement events and input from more than 700 refugees and asylum seekers.

<http://www.gov.scot/Resource/0053/00530097.pdf>

### **Mind The Gap: The National Disability Insurance Scheme and psychosocial disability - Final Report: Stakeholder identified gaps and solutions**

"You may be aware that the NDIA have issued a public rebuttal to the Mind the Gap report. The link to the rebuttal is below:

<https://www.ndis.gov.au/news/media/on-the-record>

## **IIDL Features - England**

### **Beyond Direct Payments: Making the case for micro-enterprise, Individual Service Funds and new forms of commissioning in health and social care**

Think Local Act Personal, Feb 2018

Personalisation has rightly been associated with a significant growth in the use of direct payments. They give people choice and control over their care and support, and the flexibility to live their lives the way they want, but direct payments are not the only way to help people have better lives.

This guidance has been developed to make the case for new approaches to support people should a direct payment not be the preferred option. It challenges the view that support from micro-enterprises can only be purchased using a direct payment.

[https://www.thinklocalactpersonal.org.uk/\\_assets/News/BeyondDirectPayments.pdf](https://www.thinklocalactpersonal.org.uk/_assets/News/BeyondDirectPayments.pdf)

### **Clock Turned Back on Rights for People with a Learning Disability**

*Rob Greig is chief executive of the National Development Team for Inclusion (NDTi) and a former government national director for learning disabilities*

Social Policy in the UK and increasingly world wide has a focus on increasing the choice and control people have over where they live. Current UK policy calls on “care managers to have an increased focus on home ownership and assured tenancies as a model for housing and support”. Recently, however, pressure has begun to mount to move back to a residential care model on supposed cost grounds. This article looks at issues of cost benefit analysis and the real impact and cost when policies limit or deny people opportunities for full engagement in the social and economic fabric of society.

[https://www.theguardian.com/social-care-network/2016/oct/14/rights-learning-disability-residential-care?CMP=share\\_btn\\_tw](https://www.theguardian.com/social-care-network/2016/oct/14/rights-learning-disability-residential-care?CMP=share_btn_tw)

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### **Join IIMHL / IIDL**

Any leader in mental health, addiction and disability services can join IIMHL or IIDL free by using this link: <http://www1.iimhl.com/Join.asp>

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