Response to the Dumfries and Galloway Council Budget Consultation

Submitted by Change Mental Health - November 2025

Introduction

Change Mental Health (CMH) welcomes the opportunity to contribute to Dumfries and Galloway Council's budget consultation. As one of Scotland's leading mental health charities, CMH supports over 10,000 people nationally each year, including more than 670 individuals across Dumfries and Galloway through our integrated network of Outreach and Resource Centre services. We are a long-standing partner of both the Council and NHS Dumfries and Galloway, delivering commissioned support since 1995 and currently holding six contracts jointly funded through the Integration Joint Board (IJB).

As a major service provider embedded in communities across Annan, Dumfries, Castle Douglas, Stranraer, and Newton Stewart, we see first-hand the transformative impact that accessible, preventative mental health services have on individuals, families, and wider public systems. Any reduction in early intervention and prevention funding would have a direct and measurable impact on the region's social work, housing, and homelessness services - risking regression in community wellbeing and increased demand on acute statutory provision.

The Case for Prioritising Community Mental Health

Dumfries and Galloway faces significant socioeconomic and health inequalities. Median weekly earnings are among the lowest in Scotland, and the region has a dispersed rural population with limited access to statutory support. Against this backdrop, Change Mental Health delivers practical, person-centred support that reaches people early - before they reach crisis - and helps them stay well in their communities.

Our Outreach Service supports adults living with mental illness at home, while our Resource Centres provide safe, structured spaces where people can connect, build resilience, and regain confidence. Together, these services supported **528 individuals in 2024-2025**, employing 23 trained staff and operating at an annual combined cost of **£637,967.12** - a modest investment that saves significantly more by preventing crisis interventions, hospital admissions, and homelessness.

Independent evaluation and service user feedback demonstrate that:

- **59%** of people said CMH support meant they didn't need to contact their GP for mental health issues
- **62%** avoided hospital-based care such as A&E or inpatient stays
- **51%** avoided needing help from social work teams

- **90%** felt CMH helped them access the right support and stay safe during mental health deterioration

These outcomes highlight a clear return on investment. For every person supported locally, CMH reduces pressure on public health and social services while improving long-term wellbeing. Our model aligns closely with the Scottish Government's Mental Health and Wellbeing Strategy, the Health and Social Care Service Renewal Framework, and the Population Health Framework (2025–2035).

Prevention and Early Intervention Protect Statutory Services

Cuts to preventative services would have serious ripple effects across Council departments. Outreach and Resource Centres act as buffers that prevent escalation of mental health needs into homelessness, crisis care, and social work intervention. CMH's own data shows that our support significantly reduces dependency on GPs, A&E, and social work teams, while also reducing isolation - a key driver of housing instability and vulnerability.

Without these supports:

- More individuals will present in crisis to overstretched NHS and Council services
- Hospital occupancy rates - already at **94%** in local psychiatric facilities - will worsen
- Homelessness prevention and housing support teams will face higher caseloads; and
- Social work will encounter more complex, higher-risk cases requiring intensive support

Preventative community support is not an optional extra - it is an essential component of the region's mental health and social care ecosystem. Sustained investment protects the Council's statutory obligations under the Mental Health (Care and Treatment) (Scotland) Act 2003 and contributes directly to achieving IJB outcomes on early intervention, wellbeing, and reduced health inequalities.

Local, Person-Centred Impact

Change Mental Health's approach is evidence-based, recovery-focused, and built on lived experience. Every service user develops a personal plan with clear goals and risk assessments, reviewed regularly to ensure progress toward self-management. Our staff - registered with the Scottish Social Services Council - deliver high-quality, regulated care and support, graded **"Very Good" (5)** by the Care Inspectorate.

The lived experiences of our service users show the real-world impact of this work:

- A young person referred from CAMHS who had not left their home for two years is now engaging in education and social activity.
- A man referred by Primary Care for severe depression and suicidal ideation now participates in community groups and has reconnected with his family.

- Another service user-built confidence and independence through supported learning, progressing to voluntary work and driving lessons.

These examples illustrate that our model not only improves mental health but strengthens community cohesion, self-reliance, and participation in the local economy.

Partnership with Dumfries and Galloway Council and the IJB

Change Mental Health values its long-standing partnership with Dumfries and Galloway Council and NHS Dumfries and Galloway through the IJB. We share the Council's priorities around prevention, sustainability, and improving outcomes for the most vulnerable. However, the current pressures facing public budgets must not undermine these priorities.

If funding for Outreach and Resource Centres were reduced, it would directly contradict the national and local policy direction toward community-based care and prevention. Moreover, moving all funding to individualised models such as the National Flexible Framework, without transitional protection, risks diverting scarce staff time from service delivery to administration, reducing capacity and effectiveness.

We urge the Council and IJB to maintain a stable block funding arrangement for CMH's services during any transition period, to safeguard continuity of support and ensure Dumfries and Galloway continues to lead on integrated, person-centred care.

Conclusion

Change Mental Health exists to help people live well and independently, and to reduce the need for crisis or institutional care. The evidence from our Dumfries and Galloway services shows that early intervention works - it keeps people safe, builds resilience, and saves public money. Disinvestment would be a false economy, driving up costs elsewhere in the system and worsening outcomes for some of the most vulnerable residents in the region.

We therefore call on Dumfries and Galloway Council and the Integration Joint Board to:

1. **Protect and prioritise funding** for community-based mental health services
2. **Maintain stability** in existing commissioning arrangements during any financial transition
3. **Recognise the essential preventative role** of services like CMH's Outreach and Resource Centres in safeguarding the wellbeing of individuals and communities across Dumfries and Galloway

Change Mental Health remains committed to working collaboratively to ensure the best outcomes for the people we support and the communities we serve.