

# Parliamentary briefing from Mind



The Mental Health Taskforce – England

February 2015

## About Mind

We're Mind, the mental health charity for England and Wales.

We believe no one should have to face a mental health problem alone. We provide advice and support to empower anyone experiencing a mental health problem. We campaign to improve services, raise awareness and promote understanding.

## Background: The Mental Health Taskforce

"Promoting good mental health and responding to mental health problems does not start or stop at the doors of the NHS."

For too long, people with mental health problems have had to put up with second rate, second class services. This has affected lives and it has cost lives.

In this climate, an independent Mental Health Taskforce made up of experts was brought together, chaired by Paul Farmer, Mind's Chief Executive. More than 20,000 people who live with a mental health problem or work in the mental health sector gave their views on how the NHS needs to improve its response to people's mental health needs.

They told us they want timely access to good quality mental health services, their mental and physical health needs to be treated equally and a bigger focus placed on preventing mental health problems. They also told us that a decent place to live, a job and good quality relationships in their local communities were crucial to their ability to stay well.

The Mental Health Taskforce sets out a five year plan for the NHS bodies in England (Care Quality Commission, Health Education England, NICE, NHS England, Public Health England and NHS Improvement). To ensure its recommendations are implemented, the Government needs to show commitment to delivering the strategy.

## Key Recommendations for the NHS and Government

- By 2020/21, one million extra people will be provided with support for their mental health problems.
- People facing a crisis should have access to mental health care 24/7 – right care, right place, right time.
- People's mental and physical health should be treated in a joined-up way – including people with severe mental health problems, pregnant women and new mums, and children and young people.
- All areas of society need to aspire to the promotion of good mental health and prevention of mental health problems – in all areas of people's lives.

## The current state of mental health in England

One in four people will experience a mental health problem in any given year.

Mental health problems are wide-ranging, including common mental health problems (such as anxiety and depression) through to more complex or severe conditions (such as severe anxiety and depression, psychosis, schizophrenia, bipolar disorder, and personality disorder).

### Who's at risk?

People at greater risk of developing mental health problems include those experiencing traumatic experiences and stressful life events, poverty, unemployment, poor housing, social isolation and loneliness, and inequality. Addressing social determinants for the primary prevention of mental health problems is possible, and important.

### What are the costs?

Poor mental health carries an economic and social cost of £105 billion a year in England. The personal costs of mental health problems are significant. People experiencing mental health problems can have lives that are harder, poorer and shorter than those without them. Left untreated, mental health problems have a huge impact for people of all ages throughout their lives.

### People's experiences of care

There is a significant treatment gap in mental healthcare in England, with about 75% of people with mental health problems receiving no treatment at all. Many children and young people find it difficult to get the help they need, and most get no support for their mental health problem.

Going to your GP is usually the first point of call for any person concerned about their own mental health. The national programme to increase access to psychological therapies for anxiety and depression has raised the profile of talking therapies. However, waiting times vary dramatically across England – in some places 60% of people wait over 90 days to receive treatment, but in others, over 95% of people wait less than 28 days.

**“I have experienced very mixed crisis care services depending on where I have lived – an example of the ‘post-code lottery’ in the provision of mental health services.”**

Similarly, people's experiences of emergency mental health care vary drastically, with many people unable to access adequate 24/7 crisis services and people increasingly sent out of area when beds are not available locally. These experiences have a negative effect on people's wellbeing and mental health.

Too many people from Black and Minority Ethnic communities have problems accessing quality mental health care and have lost faith in services. The taskforce demands urgent action to ensure that everyone gets the help they need, irrespective of their background or the communities to which they belong.

## Actions for the NHS

The Mental Health Taskforce provides a set of recommendations for NHS England, other NHS Arm's Length Bodies, and for Government as a whole. There are broad system reforms needed in the NHS to enable the change that is needed in mental health, and this section summarises these recommendations.

To ensure the change needed does happen, we need to see the creation of a Mental Health Delivery Board, which publicly updates on progress against recommended outcomes.

### Giving more people with mental health problems access to quality care

- Safe and immediate emergency mental health care for people in crisis needs to be a reality, 24/7, and investment is needed to expand crisis support in the home and community. Out of area placements should be reduced and ultimately eliminated as quickly as possible, and there needs to be a major drive to reduce suicide by 10% by 2020/21.
- To transform the care for pregnant women and new mothers, more women need to be able to find specialist care locally. There needs to be more emphasis on mental health prevention and promotion among children and young people as well as early intervention to help access quality mental health care.
- We need to be better able to support people's mental and physical health needs at the same time. This can be achieved through better access to talking therapies for people with long-term conditions, and ensuring that people with severe mental health problems have their physical health needs met.
- The number of people able to access talking therapies has improved in the last five years, however we need to raise standards. Too many people wait far too long for treatments, and do not have any choice over the type of therapy offered.

### Supporting people with mental health problems

Employment is vital to health and should be recognised as a health outcome. As such, the Mental Health Taskforce calls for the NHS to play a greater role in supporting people with mental health problems to get and stay in work.

- Individual Placement and Support (IPS) is the most effective model of back-to-work support for people with mental health problems. The NHS and the Joint Work and Health Unit needs to increase access to psychological therapies for common mental health problems and double investment in IPS, to support more people into work.

## Actions for Government

Mental health touches every home and every community, every public service – every part of our lives. Strong leadership from Government, Parliament and civil society is needed if we are to see the outcomes for mental health in England for which the Taskforce strives. Promoting good mental health and responding to mental health problems does not start or stop at the doors of the NHS.

The Department of Health, Cabinet Office and NHS England should put in place clear mechanisms for ensuring the cross-government recommendations are implemented in full, and show leadership to combat stigma and discrimination towards mental health problems.

### Ending stigma and discrimination

**“There have been many occasions when I’ve been told that I was lazy and selfish. Some people were of the opinion that I should easily be able to pull myself together and shrug off my problems.”**

Improving attitudes and ending stigma around mental health problems is critical. Nearly nine out of ten people with a mental health problem consistently say they have faced stigma or discrimination. It makes them feel isolated and excluded from everyday activities, makes it harder to get or keep a job, and can prevent people from seeking help.

Time to Change is England’s biggest programme to end mental health stigma and discrimination and has been running since 2007. The programme, led by Mind and Rethink Mental Illness, has led to significant improvements in attitudes and behaviour towards people with mental health problems, but changing attitudes is the work of a generation, and there is a strong moral and economic case for doing much more.

#### Recommendation:

The Department of Health should work with Public Health England to continue to support proven behaviour change interventions, such as Time to Change, and to establish local government Mental Health Champions in each community to contribute to improving attitudes to mental health by at least a further five per cent by 2020/21.

### Supporting working communities

**“Many years ago before all this happened, when I had my breakdown, I had a really good job and I loved it. And hopefully one day I do want to go back into work and be more independent.”**

The employment rate for people with mental health problems is unacceptably low, and this is despite the fact that the majority want to work. Addressing this is crucial to achieving the aims of the Mental Health Taskforce, and there is a clear role here for Government.

**Recommendations:**

- There should be improved access to talking therapies and specialist back-to-work support (Individual Placement and Support) for people with mental health problems – to help people find and stay in work.
- The Department for Work and Pensions should ensure that current funds for people on Employment and Support Allowance be reallocated to more effective and health-based back-to-work support.
- The Department for Work and Pensions should invest to ensure that qualified employment advisers are fully integrated into expanded psychological therapies services.

**Reducing suicides**

**“If you feel unwell in the evening, during the night or at the weekends and bank holidays there is no choice but to go to A&E. There’s no support out there during these times.”**

The Taskforce’s target is to reduce the rate of suicide in England by 10% by 2020. The main driver to achieving this is to see the full implementation of the National Suicide Prevention Strategy – published under the Coalition Government in 2012.

**Recommendations:**

- The Department of Health, Public Health England and NHS England should support all local areas have multi-agency suicide prevention plans in place by 2017
- Out of area placements should be reduced and ultimately eliminated.
- NHS Improvement and NHS England, with support from Public Health England, should identify steps to ensure all deaths by suicide in mental health settings are learned from to prevent repeat events.

**Transforming care for children and young people**

**“My 12 year old daughter is currently struggling with acute mental health problems and has been begging for help. I have had to chase her referral through the NHS system and all the while, I am begging for affordable, accessible and efficient private NHS approved contacts to get a quicker diagnosis to help my daughter!”**

**Recommendations:**

- NHS England should continue to work with Health Education England, Public Health England, Government and other key partners to resource and implement *Future in Mind*, building on the 2015/16 Local Transformation Plans and going further to drive system-wide transformation of the local offer to children and young people.

One in ten children aged 5-16 has a diagnosable mental health problem, yet most children and young people get no support. The Taskforce is calling for wider promotion of good mental health and for waiting times for evidence-based care to be substantially reduced.

## Funding

Within the context of a growing demand for care, unmet need and constrained budgets, national leadership from the NHS and from Government is key to really improving the lives of people with mental health problems over the next five years.

Mental health has been chronically underfunded for decades, and this issue underpins the whole of mental health. To fully achieve parity of esteem, we need to get the funding right. The Prime Minister's recent announcement on mental health funding is welcome. However, while the announcement of additional funding for mental health services is a good start, it is vital that we see this money reaching local services, and increased investment in mental health from NHS England, if we are to achieve the turnaround we so desperately need.

The Mental Health Taskforce recommends that an additional £1 billion is invested by 2020/21. This will generate significant savings.

It builds on the £280 million investment each year already committed to drive improvements in children and young people's mental health, and perinatal care.

## A 'black hole' of data

Understanding what sort of care people are receiving, how quickly people are able to be seen and what outcomes they are experiencing is key to delivering good care. However, good and consistent data for mental health still lags behind physical health. There is good information available, but it is not co-ordinated or analysed usefully. This leaves a gap in mental health data, and affects both those who use mental health services, and service delivery.

The information gathered should reflect social as well as clinical outcomes – education, employment and housing, for example – that matter to people with mental health problems.

**Recommendation:** By 2020/21, Clinical Commissioning Groups should be required to publish a range of benchmarking data to provide transparency about mental health spending and performance.

## What MPs can do

Having waited a long time for a fair deal, this is a landmark moment in transforming mental health care in England, and as an MP you have an essential role to play in raising the bar for mental health.

Whether you have a particular interest in health, education, employment or criminal justice – every aspect of your work affects and impacts on people's mental health and wellbeing. It is crucial that all MPs are prioritising mental health in their work.

The recommendations of the report are clear, mental health care needs to be transformed. Now it's down to the Government, NHS and other organisations to get the job done. We need you to join our calls for change, and hold those bodies to account.

### What you can do:

- Write to the Prime Minister to ask if he will be implementing the Mental Health Taskforce recommendations for Government – particularly around what governance arrangements he intends to put in place to support the delivery of this strategy.
- Call and lead a Westminster Hall debate on the Mental Health Taskforce recommendations for Government.
- Ask Parliamentary Questions to Government on how the relevant ministers (health, as well as in areas such as employment and education) are responding to the Taskforce recommendations.
- Speak with your local NHS leaders, and ask how they will be implementing the Mental Health Taskforce recommendations on a local level.
- Write to your local Director of Public Health to call on them to ensure the promotion of good mental health and prevention of mental health problems is high on their agenda.
- Meet your local employment support advisers, and learn more about what back-to-work support is available for your constituents with mental health problems.

We welcome the opportunity to speak to you about how you can help ensure the Mental Health Taskforce recommendations are implemented. If you'd like to talk to us about this briefing, please contact:

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