

The future of mental health in England

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Belfast 3rd February 2017

Five Year Forward View for Mental Health



Simon Stevens: “Putting mental and physical health on an equal footing will require major improvements in 7 day mental health crisis care, a large increase in psychological treatments, and a more integrated approach to how services are delivered. That’s what today’s taskforce report calls for, and it’s what the NHS is now committed to pursuing.”

Prime Minister: “The Taskforce has set out how we can work towards putting mental and physical healthcare on an equal footing and I am committed to making sure that happens.”

The report in a nutshell:

- 20,000+ people engaged
- Designed for and with the NHS Arms’ Length Bodies
- All ages (building on Future in Mind)
- Three key themes in the strategy:
 - **High quality 7-day services for people in crisis**
 - **Integration of physical and mental health care**
 - **Prevention and early intervention**
- Plus ‘**hard wiring the system**’ to support good mental health care across the NHS wherever people need it
- Focus on targeting inequalities
- **58 recommendations for the NHS** and system partners
- **£1bn additional NHS investment by 2020/21** to help an extra 1 million people of all ages
- Recommendations for NHS accepted in full and endorsed by government

5 Year Forward View for Mental Health: overarching themes

- Reduce our dependence on institutional solutions to people's (mental) health problems – and make them high quality when we do use them
- Create more/better alternatives to institutional care – primary, community and home care/treatment – acute, crisis and non-acute And self-help
- Integrate mental health care into the health service at all levels and in all parts of NHS [and ?schools?]
- Help mothers, children and young people – prevention, secondary prevention, early intervention
- Timely access to what works – and focus on what has the chance to produce lasting change (work, psychological therapies, self management)

In response to the taskforce report, and with new funding, the NHS is delivering a programme of transformation across the NHS so that by 2020:

NHS

England

70,000 more **children** will access **evidence based** mental health care interventions

Intensive **home treatment** will be available in every part of England as an alternative to hospital

No acute hospital is without all-age mental health **liaison services**, and at least 50% are meeting the 'core 24' service standard

At least 30,000 more women each year can access evidence-based **specialist perinatal mental** health care and 3 new MBUs

10% **reduction in suicide** and all areas to have multi-agency suicide prevention plans in place by 2017,

Increase access to evidence-based **psychological therapies** to reach **25%** of need, helping 600,000 more people per year

The number of people with **SMI** who can access evidence based **Individual Placement and Support (IPS)** will have doubled

280,000 people with **SMI** will have access to evidence based **physical health checks and interventions**

60% people experiencing a **first episode of psychosis** will access **NICE** concordant care within **2 weeks**

Inappropriate out of area placements (**OAPs**) will have been **eliminated** for adult acute mental health care

New models of care for tertiary MH will deliver quality care close to home reduced inpatient spend, increased community provision

There will be the right number of **CAMHS T4 beds** in the right place reducing the number of inappropriate **out of area placements**

Children and Young People

- £1.4 Billion over 4 years
 - Evidence-based psychological treatments for children and young people in line with NICE (CYP IAPT) – train existing workforce
 - An extra 1700 CAMHS workers trained to do CYP IAPT
 - Specific focus on eating disorders in the community with waiting time standard (1 week for urgent; 4 weeks for rest)
 - Enhance the role of schools (Green Paper depts of Health and education on MH and Schools)

As set out in the implementation plan, investment supports these objectives and is phased over the 5yfv period

CCG Baseline Allocations	Investment				
	2016/17	2017/18	2018/19	2019/20	2020/21
CYP Mental Health	119.0	140.0	170.0	190.0	214.0
Eating Disorders	30.0	30.0	30.0	30.0	30.0
Specialist perinatal mental health				73.5	98.0
Expansion of Psych. Therapies (IAPT access to 25%)			157.0	233.0	308.0
Crisis and acute care		43.0	90.0	140.0	146.0
Early intervention in psychosis		11.0	20.0	30.0	70.0
Physical health interventions for SMI		41.0	83.0	83.0	83.0
Secure Care Pathway					58.0
Gross Savings - MH	2016/17	2017/18	2018/19	2019/20	2020/21
Crisis Response Home Treatment Teams			-64	-135	-168
EIP to 60%		-4	-8	-12	-20
Gross Savings - Acute	2016/17	2017/18	2018/19	2019/20	2020/21
Reduced acute healthcare utilisation – IAPT access to 25%		-26	-122	-236	-364
Reduced acute healthcare utilisation – SMI physical health		-27	-81	-108	-108
Mental health Liaison (50% of hospitals)			-15	-30	-84
STF Monies for Allocation (indicative)	2016/17	2017/18	2018/19	2019/20	2020/21
Perinatal community development fund	5.0	15.0	40.0		
Additional CCG funding to be allocated				11.5	22.0
Mental Health liaison services		15.0	30.0	84.0	120.0
National Programmes (indicative)	2016/17	2017/18	2018/19	2019/20	2020/21
Crisis care models	5.5				
Workforce development (HEE)	38.0	38.0	22.0	17.0	
Workforce development (other)	18.0	18.0	12.0	4.0	
Specialist in-patient / outreach	21.0	11.0	4.0		
Vulnerable Groups	20.0	24.0	25.0	24.0	21.0
Other Programmes	14.5	5.0	3.0	1.0	1.0
Mother and baby unit development	4.5	10.0	15.0	15.0	15.0
Perinatal workforce development	3.0	2.5	2.5	2.5	2.5
Regional perinatal MH networks	1.5	1.5	1.5	1.5	1.5
Investment in integrated services	20.0	88.0			
Community mental health			13.0	33.0	50.0
Armed Forces	1.7	1.7	1.7		
Secure services transition fund		1.0	5.0	30.0	
Liaison & diversion	5.0	12.0	17.0	27.0	31.0
Suicide prevention			5.0	10.0	10.0
TOTAL	306.7	450.7	456.7	519.0	537.0

Incentives

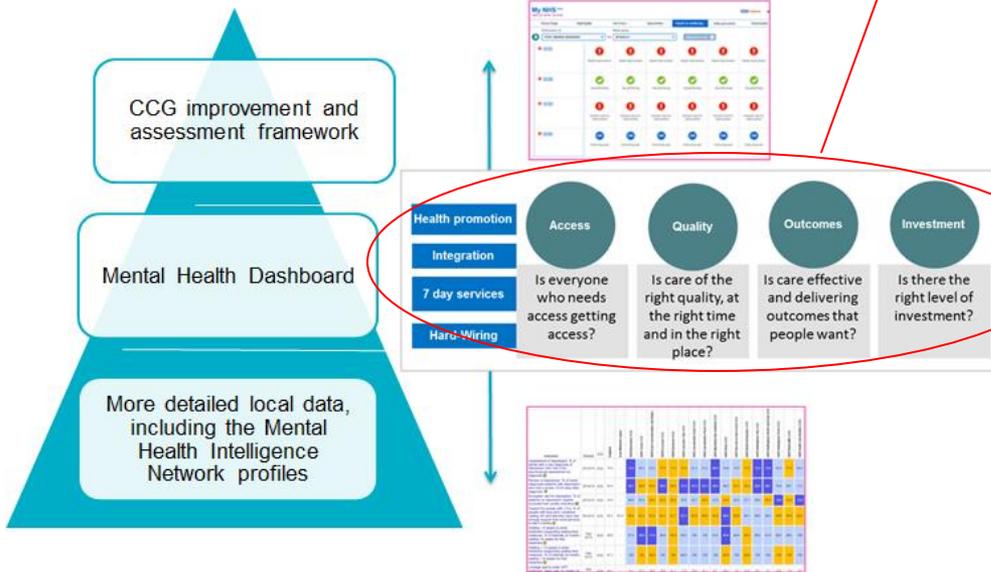
- Quality Premiums (CCGs)
 - Out of Area treatments
 - Older people and BAME access to IAPT
 - CYP improved access
- CQUIN: A&E mental health frequent attenders
- CQUIN: CAMHS transitions to adult services
- CQUIN: Physical health interventions and outcomes for physical health in EIP, community teams and inpatients
- New tariff (incl. quality and outcomes) from April

The Mental Health Dashboard will track delivery by CCG and eventually STP

- 52 indicators mapped against recommendations from the MH FyFV.
- Metrics presented thematically across the life course of mental health.
- Intended to support national monitoring of progress against the FyFV and enable local benchmarking.
- Incorporates finance measures for the first time.
- Data is available at national, regional and CCG level wherever possible.
- Contains 'placeholder' measures to be populated as data becomes available.

Mental Health Five Year Forward View Dashboard

Code	Indicator	Change	Latest period	Annual objective	Indicator value	Trend	Better is...	Priority (1=ones to the right indicate better)
Perinatal Mental Health								
PMH(i)	Additional number of women receiving specialist perinatal care compared to baseline							PLACEHOLDER
Children and Young people Mental Health								
CYP(i)	CCG IAF Mental Health Transformation Milestones- Total CAMHS score							DATA TO FOLLOW
CYP(ii)	Additional number of CYP receiving treatment in NHS funded community services in the FP	▲	Q1 2016/17	N/A	24,463		▲	Chart available at CCG level only
CYP(iii)	Proportion of CYP with eating disorders seen within 1 week (urgent) or 4 weeks (routine)							PLACEHOLDER
CYP(iv)	a. Total number of bed days for CYP aged 0-17 inclusive in CAMHS tier 4 wards	▲	Q1 2016/17	N/A	107,701		▼	Chart available at CCG level only
J	a. Total bed days of CYP aged 0-17 in adult in-patient wards	▲	Q1 2016/17	N/A	4,399		▼	Chart available at CCG level only
CYP(v)	b. Total number of CYP aged 0-17 in adult in-patient wards	▲	Q1 2016/17	N/A	1,938		▼	National and regional measure only
CYP(vi)	c. Total number of CYP aged 0-17 in adult in-patient wards	▼	Q1 2016/17	N/A	79		▼	National and regional measure only
CT17(i)	CCG IAF Mental Health Transformation Milestones- Crisis Q1b score							DATA TO FOLLOW
CYP(vii)	a. CYP MH total planned spend - excluding LD and ED (£k)	N/A	2016/17	N/A	950,089	N/A	N/A	N/A
J	b. CYP MH planned spend: Eating disorders (£k)	N/A	2016/17	N/A	40,607	N/A	N/A	N/A
Adult mental health: common mental health problems								
IAPT(i)	a. IAPT Access to treatment (current standard)	▲	Q4 2015/16	15% in 2015/16	4.20%		▲	Chart available at CCG level only
	b. IAPT Access to treatment for older people in IAPT as a proportion of older people in the population							PLACEHOLDER
IAPT(ii)	a. IAPT recovery rate (current standard)	▲	Q4 2015/16	50%	48.20%		▲	Chart available at CCG level only
	b. IAPT recovery rate for BME							PLACEHOLDER
IP17(i)	IAPT referral to treatment time (current standard)	▲	Q4 2015/16	75% in 6 weeks	83.78%		▲	Chart available at CCG level only
IP17(ii)	IAPT planned spend (£k)	N/A	2016/17	N/A	399,730	N/A	N/A	N/A
Adult mental health: community, acute and crisis care								
EIP								
Proportion of people experiencing a first episode of psychosis meeting both criteria a								
EIP(i)	a. Proportion of people who started treatment within two weeks of referral	▲	Q1 2016/17	50%	68.67%		▲	Chart available at CCG level only
Proportion of people receiving treatment with a NICE approved package of care								
EIP(ii)	b. Proportion of people who are waiting more than two weeks following referral- All ages	▼	Q1 2016/17	N/A	53.30%		▼	Chart available at CCG level only



- ### Dashboard - highlights
- Clearly identifies CCGs not meeting national standards and gives indication of distance to travel for those underperforming.
 - Includes figures on numbers accessing treatment for CYP for the first time.
 - Provides overview of numbers of CYP admitted and those on adult wards to support reductions and elimination against national objectives.
 - Includes outcomes including numbers of people known to services in employment and stable accommodation.
 - Focuses on physical health needs for people with SMI.
 - Includes measures on inequalities for older people and BME populations.
 - Allows tracking of appropriate resourcing for crisis and liaison services.

Any questions?