No Health Without Mental Health: A guide for Local HealthWatch organisations

Mental health problems account for almost one quarter of ill health in the UK and their prevalence is rising, with the World Health Organisation predicting that depression will be the second most common health condition worldwide by 2020. Poor mental health affects people of all ages yet with effective promotion, prevention and early intervention its impact can be reduced dramatically.

Following the publication of the implementation framework for the Government's mental health strategy (HM Government 2012), this briefing sets out the crucial role of Local HealthWatch in ensuring that action is taken locally to achieve the strategy's objectives and improve both mental health for all and the quality of support offered to people using mental health services. These actions will help deliver the Government's commitment to ensuring 'parity of esteem' between physical and mental health in the NHS.

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What can Local HealthWatch organisations do?

The recommendations below build on the Implementation Framework's key actions for Local HealthWatch organisations:

- **Recruit people who use mental health services, the families and carers, to their membership,** ensuring inclusion of under-represented groups and children and young people. This may involve outreach work and using a range of ways to involve people, to lower the barriers to access for people less likely to engage.

- **Establish mechanisms to ensure mental health is a core focus for Healthwatch:** this could be achieved through linking in with local voluntary sector organisations or appointing a mental health 'champion' at the centre of the organisation.

  Investigate mental health and wellbeing services locally, including whether they receive 'parity of esteem' with physical health, and whether they are accessible and appropriate to all.

- **Consider how general health systems are working for people with mental health problems, their carers and families.** This could include, for example, the involvement of service users and carers in commissioning, or the NHS complaints procedure.

Facts and figures

Every year, at least one person in six experiences a mental health problem (McManus *et al.,* 2009). Depression and anxiety are the most common, affecting about half of the adult population at some point in their lives.

Mental ill health costs some £105 billion each year in England alone. This includes £21bn in health and social care costs and £29bn in losses to business from reduced productivity, sickness absence and unemployment (Centre for Mental Health 2010).

Half of all lifetime mental health problems emerge before the age of 14. Early detection and treatment of mental ill health can dramatically reduce the duration, severity and loss of quality life associated with mental ill health (HM Government 2011).

People with a severe mental illness die up to 20 years younger than their peers in the UK (Chang *et al* 2011). This is predominantly due to higher rates of poor physical health, for example related to smoking.

Thirty per cent of people with a long-term physical condition also have a mental health problem. This increases the cost of health care for each person by 45% - a national cost of at least £8bn to the NHS (Naylor *et al.,* 2012).

Objectives from the strategy

The Government's mental health strategy for England, No Health Without Mental Health, set out six key objectives for better mental health and improved mental health care. It can be found at: http://www.dh.gov.uk/en/Healthcare/Mentalhealth/MentalHealthStrategy/index.htm.

The six objectives are:

More people will have good mental health

More people of all ages and backgrounds will have better wellbeing and good mental health. Fewer people will develop mental health problems – by starting well, developing well, working well, living well and ageing well.

More people with mental health problems will recover

More people who develop mental health problems will have a good quality of life – greater ability to manage their own lives, stronger social relationships, a greater sense of purpose, the skills they need for living and working, improved chances in education, better employment rates and a suitable and stable place to live.

More people with mental health problems will have good physical health

Fewer people with mental health problems will die prematurely, and more people with physical ill health will have better mental health.

More people will have a positive experience of care and support

Care and support, wherever it takes place, should offer access to timely, evidence-based interventions and approaches that give people the greatest choice and control over their own lives, in the least restrictive environment, and should ensure that people's human rights are protected.

Fewer people will suffer avoidable harm

People receiving care and support should have confidence that the services they use are of the highest quality and at least as safe as any other public service.

Fewer people will experience stigma and discrimination

Public understanding of mental health will improve and, as a result, negative attitudes and behaviours to people with mental health problems will decrease.

Service user and carer involvement

Mental health services are in many places advanced compared with other health services in seeking and including the views of service users and carers in planning and development. Some mental health foundation trusts have large membership bases and some PCTs and local authorities have involved service users as equal partners in the re-commissioning process for a range of services. For information about this go to http://www.centreformentalhealth.org.uk/employment/commissioning.aspx. Local HealthWatch organisations can support and encourage effective service user and carer involvement with both commissioners and providers of health services, and lead by example their own engagement work with the community.

Making 'parity' a reality

The Government has stated that mental health should be treated on a par with physical health across the health and social care system. Mental ill health affects people of all ages and preventing and responding to it is an essential element not just of the NHS but also of social care and public health. Local HealthWatch organisations will be well placed to influence the priorities for Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies to ensure that mental health is treated equally to physical health.

Holding local services to account

HealthWatch organisations can ensure that key service developments are implemented locally. This could include monitoring the provision of psychological therapies for children and adults and the waiting times that exist for these. The Government's Improving Access to Psychological Therapies (IAPT) scheme is extending the provision of NICE-approved therapies across England. Funding for psychological therapy services, however, is determined locally and the development of IAPT services remains variable. HealthWatch organisations may wish to investigate:

- What are typical local waiting times for access to psychological therapy services?
- Do local IAPT services offer therapies to children and older adults as well as people of working age?
- What are the engagement and recovery rates for local IAPT services and how do these compare with the national average?

Integrating physical and mental health

People with long-term physical conditions have higher than average rates of mental ill health. People with co-existing mental health conditions have poorer outcomes (including higher mortality rates) from a range of long-term conditions including heart disease and diabetes.

People living with severe mental illness, meanwhile, have a premature mortality rate three times higher than the general population (HSCIC, 2012). Local HealthWatch organisations may wish to ask:

- Do all local hospitals have access to a liaison psychiatry service? Liaison psychiatry teams offer mental health support to patients in general hospitals and have been shown to reduce both the number and length of hospital admissions (Parsonage and Fossey, 2011).
- Do local smoking cessation services offer a tailored response to people with mental health conditions? For many people with a long-term mental illness, both their health condition and the medication they are given for it can affect their ability to give up smoking.
- Do people with long-term conditions get asked about their mental health and offered

Healthwatch in Kingston

In 2011 Kingston's Local Involvement Network (LINk) became a Healthwatch Pathfinder. They have joined their local council and Clinical Commissioning Group in making mental health a priority, and have established a mental health working group; free to join for anyone living or working locally who has an interest in mental health.

Healthwatch representatives work closely with the local Mental Health Trust and have recently been involved in a review of care planning for those with mental health problems – including considering the obstacles currently impeding consistently good care planning. Action to date includes the introduction of regular audits of care planning across the Trust and the development of care planning guidance for all clinical staff.

Healthwatch Kingston have also launched Rate Our Service; a new online system for individuals to rate local services, including mental health services, thus providing data with which to influence provision.

Healthwatch Kingston continues to develop ways to raise awareness of mental health across the local NHS and local authority, challenging local provision where needed to ensure mental health receives 'parity of esteem' with physical health services.

psychological therapy when it is required? People with diabetes and other long-term illnesses have better outcomes if their mental health is properly managed (Naylor et al., 2012.)

Tackling stigma

Local HealthWatch organisations can support the Time to Change initiative and ensure local work to reduce the stigma associated with mental ill health is linked with national action.

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