

Briefing for ICS strategies: mental health

August 2022

Why is there a renewed focus on mental health services?

Mental health services in England have come under increasing scrutiny in recent years and will likely feature high on the agenda for ICSs.

We are hearing from people that accessing mental health support is a real struggle, and people are not getting the help they need when they need it. Barriers to accessing support are even more acute for those facing health inequalities.

There is, therefore, the significant potential here for local Healthwatch to influence how ICS will be tackling this challenge.

What mental health issues should ICSs focus on?

In 2019 the [NHS Long Term Plan](#) (Pages 50–52 and 68–73) set out several key areas for improvement in mental health support. Mental health was a significant focus of the Long-Term Plan, with pledges to put greater emphasis on it and give it an increasing proportion of the NHS budget. The need for this is clear: the NHS reported that at the end of February, 1.5 million people were in contact with NHS mental health services.

The Long-Term Plan is currently being updated post-pandemic, but these areas will likely remain a priority for the ICSs.

Children and Young Adult's Mental Health Aims:

- Boost funding for child and adolescent mental health services, growing the services and increase support available.
- Reduce waiting times for treatment for young people with eating disorders
- Improve the transition from child to adult services, extending services and reducing gaps so that services are cohesive across ages 0 – 25
- Improve the understanding of NHS staff about the needs of people with learning disabilities and autism, reduce the waiting times for assessments and diagnosis, and ensure that all care from the NHS will meet Learning Disability Improvement Standard.

Adult Mental Health Aims:

- Service expansion and faster access to community and crisis mental health services
- Reduce waiting times for assessment and diagnosis

ICSs bring together local organisations in a pragmatic and practical way to deliver the 'triple integration' of primary and specialist care, physical and mental health services, and health with social care.

ICS will be required to implement integral services that prevent avoidable hospitalisation and tackle the wider determinants of mental and physical ill-health

What does our evidence tell us about progress to date?

With the Long-Term Plan due to be updated following the Covid-19 pandemic, we have taken a look again at what our data now tells us about mental health. Our report focuses on both adult mental and children and young people's mental health.

Children and Young Adults' Mental Health

We have heard that services are not meeting any of the goals set out in the 2019 Long Term Plan. Between April 2021 and March 2022, we heard directly from 129 young people and their families about their experiences accessing mental health support. The vast majority of this direct feedback shared with local Healthwatch was negative: 80% of people who spoke to us felt negative about their experience using child and adolescent mental health services, and just ten people (eight per cent) had a positive experience.

Key findings from this research:

- Children and young people have a good understanding of mental health. But they have a mixed awareness of what support is available and low confidence in services.
- Children and young people face long waiting times for diagnosis and treatment.
- Experiences of care are generally poor, with young people feeling like their symptoms are not taken seriously and increased demand on services limiting what support is available.
- Services don't always offer follow-up support after discharge.

Adult Mental Health:

Before the pandemic, most of the feedback we received on mental health was negative. This continues to be the case in 2021/22.

In 2021/22, we heard from far more people about their experiences of mental health services, with 1,451 people telling us about their experiences.

- 58% of people told us their experiences were negative, compared to 14% positive. Whilst the negative figure has come down, it is still higher than for all services.
- Additionally, for all services, the positive figure has increased significantly, whilst for mental health, the increase in positive experiences lags far behind, only rising by three per cent compared to 15% for all services.

Key Findings:

- GPs vary in how well-equipped to deal with mental health issues they are, and people can struggle to get their GP to refer them for specialist mental health support.
- Waiting times are long at all stages of the mental health system.
- Crisis services are over-subscribed and often inaccessible.
- Assessments can feel perfunctory and often do not lead to the outcome people want.
- Inpatient treatment is an unpleasant experience, whilst community treatment is patchy and sometimes unhelpful.
- Services communicate poorly both with patients and with other services.
- Treatment often ends too early, before people feel they are ready, without adequate follow-up support.

Useful external sources of data

[The mental health strategy for England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/94441/mental_health_strategy_for_england.pdf)

Areas where your ICS may need your help

There is still a great need to improve both the breadth and speed of access to services across the mental health system and increase the spread of mental health experts across the broader health system.

With the Covid-19 pandemic likely to be storing up mental health problems in future for large numbers of people, increased focus on and resources for mental health remains necessary.

There may be opportunities here for you to work with your ICS to:

- If you have completed research on mental health, meet with your ICS and present your findings.
- Conduct your own research to see how patients and their families are being affected in your area.
- Contact your ICS and ask what they are doing to improve mental health services.

Maternal mental health

The network has done quite a bit of work on [maternal mental health](#) in the past and secured some positive improvements, including the [extension of specialist mother and baby units](#) in every area of the country and the [introduction of mental health checks for new mums](#) at 6-8 weeks post birth.

There may be opportunities here for you to work with your ICS to:

- Assess the quality of specialist services through enter & view.
- Explore how the mental health checks are working for local people.

Note that we will be conducting further national research on this particular topic later in 2022, so any work you do with your ICS will also feed into this.



healthwatch

Healthwatch England
National Customer Service Centre
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

www.healthwatch.co.uk

t: 03000 683 000

e: enquiries@healthwatch.co.uk

 [@HealthwatchE](https://twitter.com/HealthwatchE)

 [Facebook.com/HealthwatchE](https://www.facebook.com/HealthwatchE)