

NHS England Long Term Plan for Mental Health

Professor Tim Kendall

National Clinical Director for Mental Health NHS England

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National Context

- The National Service Framework for Adult Mental Health and 2003 NHS National Institute for Mental Health in England publication *Personality disorder: No longer a diagnosis of exclusion* sought to ensure provision of evidence based care for people with a diagnosis of 'PD', acknowledging it was a neglected and isolated area of mental health

A laudable ambition at the time but there is much to suggest this is certainly not achieved...

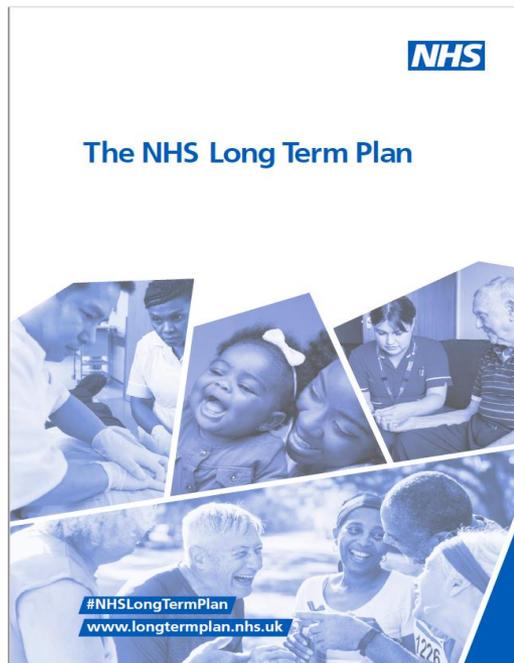
- *Five Year Forward View for Mental Health* wide stakeholder engagement –MH Taskforce - lead by Paul Farmer, identified top priorities in mental health

Budget restrictions meant that not all the areas of mental health, could be fully addressed...

- The *NHS Long Term Plan* presents opportunity to drive improvements nationally in care for people with a diagnosis of 'PD'

The NHS Long Term Plan

- 18 June 2018, the Prime Minister announced NHS funding will grow at an average of **3.4 per cent** a year real-terms increase from 2019/20 to 2023/24, equating to £20.5 billion in real term over the next five years.
- In return, the NHS was asked to prepare its Long Term plan, setting out ambitions for improvement over the next decade, and plans to meet them over the five years of the funding settlement.



- The NHS Long Term Plan published on 7 January 2019 commits to grow investment in mental health services faster than the overall NHS budget.
- This creates a new **ringfenced local investment** fund worth at least £2.3 billion a year by 2023/24.

Key ambitions at a glance (by 2023/24)

345,000 more CYP will access help via NHS funded mental health services and school or college-based Mental Health Support Teams

Provide better community mental health support to 370,000 people with SMI via new and integrated models of primary and community care

24,000 additional women will access specialist perinatal mental health services. The period of care will be extended from 12 months to 24 months post-birth

Anyone experiencing mental health crisis will be able to call NHS 111 and have 24/7 access to the mental health support they need

380,000 more people will access NICE-approved IAPT services each year

Reduced length of stay in units with a long length of stay to the national average of 32 days

Ensure that the parts of England most affected by rough sleeping will have better access to specialist homelessness NHS mental health support

Expand geographical coverage of NHS services for people with serious gambling problems

Expand the existing suicide reduction programme to all STPs in the country

The detail: crisis and acute mental health

Ensure that anyone experiencing mental health crisis can call NHS 111 and access 24/7 age-appropriate mental health community support.

Introducing mental health professionals in 111/999 control rooms

Continue ambition to ensure that all adult community crisis resolution and home treatment services are resourced and operating with high fidelity by 20/21

Ensure that by 2023/24, 70% of Mental Health Liaison services in acute hospitals meet the 'core 24' standard for adults, working towards 100% coverage thereafter

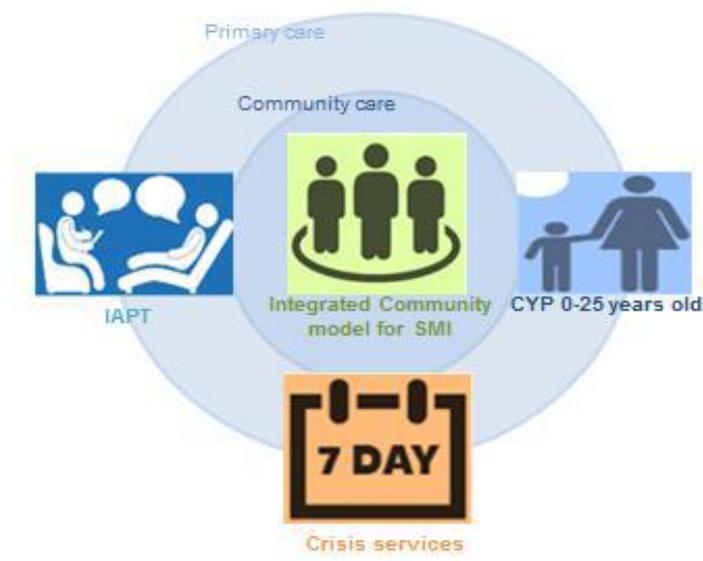
All children and young people will have access to 24/7 crisis, liaison and home treatment services by 2023/24

Increase alternatives to inpatient admission in acute mental health pathways, such as crisis houses and acute day services.

Full coverage across the country of the existing suicide reduction programme and suicide bereavement support service for families, and staff in mental health services

LTP ambition for integrated primary and community care

- Establish new and integrated models of primary and community MH care to support **370,000 adults and older adults who have severe mental illnesses** each year
- **Greater choice** and **control over** care, and **support** to live well in their communities.
- This includes maintaining and developing new services for people who have the most complex needs including EIP, **‘personality disorder’**, rehabilitation and adult eating disorders
- Increase the number of people with severe mental illnesses receiving **physical health checks** to an additional 110,000 people per year
- Support an additional 35,000 people to participate in the **Individual Placement and Support programme** each year by 2023/24.



New place-based, neighbourhood based model...

Integrated, Core Community Mental Health Networks England

- **Place based, neighbourhood based** - built around local needs, local geography with specialist services arrangements to contribute to variation in population size
- Brings together **primary care** support for people with less complex and complex needs and **secondary care** community mental health teams
- Creates **multidisciplinary** team, with **strong links** with crisis teams and other services such as inpatient care, residential and liaison mental health services in emergency departments
- **Primary care enabled** to provide a broader range of services in the community that integrate primary, community, social and acute care services, and bring together physical and mental health
- Networks will have **common pathways** for specific needs or problems, **agreed protocols** for the delivery of care, **shared protocols** for the management of specific problems, and **reduction in multiple points of access**



Care organised around local communities, built around clusters of GP practices



Local community = a population size of about **50,000**

Wider community = several local communities with a total population size of about **250,000 +**

Services providing support, care and treatment for: **less complex** and **complex needs** at a local community level

Specialist services for **more complex needs** shared/ commissioned by the population of the wider community

Represents approximate population sizes and complexity of needs, as opposed to geographical location.

Public health provided services are out of scope

Needs not requiring mental health support, care and treatment	
Less complex needs	
Complex needs	
More complex needs	

The detail: ambitions for 'PD'

Co-designed and -produced **dedicated community services** available for those with more **complex needs**, and fulfil their secondary function of educating and upskilling generic services.

Through the transformation of **core community** services ensure that (generic) teams are equipped to be inclusive and provide high quality, evidence-based interventions for people with complex mental health difficulties who are diagnosed with a 'PD'.

Equip the **workforce** with capacity and competency to:

- deliver NICE-recommended **psychological therapies** with nationally funded courses being delivered from 2019/20 academic year
- deliver **trauma-informed care**
- shape what new, fair, safe and supported **peer support roles** could look like and how they could be implemented

Ensure people with lived experience are at the heart of efforts to design, develop and implement these ambitions

Shape the future by listening, being honest and recognising the reality of the past and present

Thank you

Attend NHS England's session on day 3 to contribute to national policy development underway in collaboration with the Mental Health Policy Research Unit

