



2019 General Election

Mental health priorities for the next Government

Summary

This policy briefing identifies key areas where the next Government can make a particular impact on the nation's mental health and the lives of people with mental health difficulties.

It identifies twelve steps that the next Government should take to secure better mental health for all and to reduce inequalities in mental health across society.

We recommend that the next Government should:

- 1. Produce a cross-government mental health strategy** that seeks to maximise the nation's wellbeing and reduce inequalities. This would include putting mental health in all policies, ensuring that all decisions made by government seek to boost wellbeing and reduce inequalities.
- 2. Commit to fund and implement the NHS Long Term Plan for mental health services**, including delivery of the Community Mental Health Framework.
- 3. Create a fair and sustainable settlement for social care** that recognises the needs of people of working age who require support for their mental health.
- 4. Reform the education system** to enable schools, colleges and universities to support young people's wellbeing.
- 5. Reform the criminal justice system** to make better use of community rehabilitation opportunities, to reduce the prison population and to make prisons safer by putting wellbeing first.
- 6. Reform employment support and social security**, including ending the use of benefit conditions and sanctions for people with mental health difficulties who are out of work, changing the way disability benefits are assessed and expanding access to Individual Placement and Support.
- 7. Invest in local public health services** to boost mental health and prevent losses of life through suicide.
- 8. Commit to implement the recommendations of the Independent Mental Health Act Review in full.** This includes introducing legislation in the next Parliament for a modernised Mental Health Act, providing capital funding for the NHS to update its mental health estate, and taking concerted action to reduce racial disparities in the Mental Health Act.
- 9. Take action to build a mental health workforce for the future.**
- 10. Take action to reduce by one third the number of people with a mental illness who die prematurely**, including through the provision of effective smoking cessation services.
- 11. Support parents, families and children** by investing in a national programme to expand access to evidence-based parenting interventions, and by funding specialist counselling for parents who have been bereaved by still birth or baby loss.
- 12. Support mental health online and through digital media**, including a balanced approach to social media and supporting the public service workforce to use digital media.

1. Produce a cross-government mental health strategy

Our mental health is influenced by many different factors during our lives. The determinants of mental health are the factors that either increase our risk of a mental health difficulty or protect us against poor mental health. While not all of the determinants can be controlled by government, it does have the ability to influence many of them and to support individuals, families and communities to increase their chances of having good mental health.

A cross-government mental health strategy would seek to maximise the nation’s wellbeing and reduce inequalities by:

- a. Introducing a ‘budget for wellbeing’ to maximise the health benefits of public spending decisions
- b. Putting mental health in all policies, ensuring that all decisions made by government seek to boost wellbeing and reduce mental health inequalities
- c. Taking action to promote good mental health in families, communities, schools and workplaces.

2. Commit to implement the NHS Long Term Plan

The NHS Long Term Plan includes a £2.3 billion ringfenced investment in new and expanded mental health support. We hope the next Government will honour this commitment and support the NHS to implement its plans for mental health in full. This includes the recently published Community Mental Health Framework, which sets out plans to reform community-based mental health services for adults and seeks to close the gap between

primary and secondary care that currently leaves too many people without effective support (NHS England, 2019). A recent Centre for Mental Health evaluation of a pilot programme in Nottingham which provides psychological support in primary care to people with chronic, unexplained physical symptoms found that it reduced the costs of other health services by more than its staff costs in its first year (O’Shea, 2019a).

PCPM: Cost per person (average)	Annual cost of scheme	Saving in first year of operation
£1,000	£210,000	£153,566

3. Create a fair funding settlement for social care

Successive governments have pledged to take action to resolve the long-running issue of the way adult social care is funded in England. There is now welcome recognition across all political parties that a sustainable and fair funding settlement for social care is vital for the future health of the nation. A successful funding settlement for social care must begin with a recognition that a significant proportion of adult social care supports people of working age: it is not just for those in later life.

Mental illness tends to begin early in life and often emerges during teenage years

and twenties. Learning disability and autism are usually lifelong. A social care funding settlement that requires people to save or insure themselves for future risk cannot meet the needs of people of working age with mental health or learning difficulties.

The NHS Long Term Plan provides financial security for the NHS over the next five years. But the NHS cannot work alone. The next Government must now do the same for social care, and within that for mental health and for people of all ages.

4. Reform the education system

Schools and colleges have profound and lasting effects on children and young people's mental health and wellbeing, yet too often this is left to chance. School environments, timetables, lessons and cultures all have an effect on the mental health of children and young people. From bullying to exam stress, schools, colleges and universities can be stressful places, especially for young people facing the greatest adversity. But they can also be good for mental health – for example through teaching life skills and creative subjects (Abdinasir, 2019).

The next Government must secure funding for schools, colleges and universities to enable them to create a healthy, nurturing environment. All schools should be supported to teach children about how to look after their mental health and develop life skills. And exam systems should be reviewed to tackle the 'teach to test' culture in many schools and ensure enough time is given to creative and cultural subjects.

5. Reform the criminal justice system

Nine out of ten prisoners and almost half of people in contact with probation services have at least one mental health problem or addiction. Most have complex needs that include long histories of poorly addressed mental health difficulties, as well as learning and communication difficulties and experiences of trauma, loss and neglect (Durcan, 2016).

The introduction of liaison and diversion services over the last ten years is a major achievement of successive governments. We now need to sustain progress and go further.

Adding more prison places is not the answer. The next Government should:

- Ensure people with mental health needs are diverted from prison whenever possible and get effective support in the community, where necessary alongside a community sentence
- Make prisons safer by creating trauma-informed environments that make wellbeing a priority for prisoners and staff alike
- Provide continuity of care for people with mental health problems when they leave prison.

6. Reform employment support and social security

We need to see large-scale changes to the social security system to offer people with mental health difficulties fair, effective and respectful support. Ineffective and damaging disability benefit assessments, conditions and sanctions should be reviewed and reformed to ensure that people get the most effective support at all times.

People with long-term mental health problems continue to have low rates of employment and a pay gap when in work. The most effective

form of employment support for people with mental health problems is Individual Placement and Support (IPS). The NHS Long-Term Plan pledges to extend IPS provision to reach 55,000 people by 2023/24, with an aspiration to reach 115,000 people by 2028/29. We hope the next Government will commit to go further and ensure everyone who wants help with employment receives it. We estimate that to extend IPS to halve the employment gap for people with a mental illness (reaching 155,000 people) would cost £418.5 million a year.

7. Invest in public health and suicide prevention

There is a growing acknowledgement that action to prevent poor mental health is both possible and cost-effective (Centre for Mental Health, 2019). A range of interventions is available that can help to promote good mental health – for example through social and emotional learning in schools – and prevent mental health difficulties or intervene early before they reach crisis point.

Local authorities in England play a pivotal role in prevention through their public health responsibilities as well as through the provision of early years services, youth services, support for schools and colleges, and social care for

people of all ages. Almost all local authorities now have suicide prevention plans, and many more have specific health and wellbeing strategies for mental health. Yet financial constraints have held them back and led many to cut back on the very services that are known to prevent later problems. A recent Institute for Fiscal Studies (2019) report on Sure Start centres, for example, demonstrated that they significantly reduced the chances of hospital admissions on children from more deprived backgrounds, yet spending on these services fell by two-thirds between 2009/10 and 2017/18.

8. Implement the Mental Health Act Review

Professor Sir Simon Wessely's independent Mental Health Act Review made 154 recommendations to modernise the Mental Health Act. Many were for legislative reform to bring the Act into the twenty-first century. The next Government should commit to introduce legislation which enacts the Review's proposed law changes, and to provide resources which ensure that legal safeguards can be implemented – for example, by expanding the reach and range of advocacy services.

The Review proposed a new Patient and Carer Race Equality Framework to address wide disparities in the use of the Mental Health Act. The next Government should commit to putting this in place nationwide.

The Review found that “people are often placed in some of the worst estate that the NHS has, just when they need the best” (Wessely, 2018). It called for major capital investment in renewing the mental health NHS estate, for

example to end the use of dormitory wards and mixed-sex spaces.

It is also important to consider where services are located. NHS England has already committed to end out-of-area acute hospital admissions, and there is a growing acknowledgement that ‘locked rehabilitation’ wards, where people can spend many months and years far from home, need to change fundamentally (Mohan, 2019). It is therefore vital that investment is targeted in a way that will make it unnecessary for anyone to be sent away from their local area for anything but the most specialised treatment.

The Review notes that too many people either arrive in hospital in a police vehicle or are taken from one hospital to another in inadequate vehicles. This can be a traumatic and frightening experience. It calls for investment in appropriate NHS ambulance services for people who need transport in or after a mental health emergency.

Item	Costs for one ambulance	Fleet of 100
Home Office Category B Ambulance*	£60,000	£6m
2 person staff team plus on-costs (FTE: not 24 hours)	£54,000	£5.4m
TOTAL	£114,000	£11.4m

*Vehicle running costs not included as these equate to existing transport options.

9. Develop a mental health workforce for the future

For the NHS Long Term Plan to succeed, the NHS alone needs at least 27,000 extra mental health workers within the next five years. This would be an unprecedented expansion to a workforce that is already under pressure, with high vacancy and sickness absence rates. The social care workforce also needs an urgent boost.

The mental health workforce needs to change to meet the needs of the twenty-first century. We need to train and develop new and expanding roles, including occupational therapy, psychology and peer support. And we need to look beyond the NHS to develop the social care and voluntary and community sector workforce, for example through the Think Ahead programme.

It will also be essential for the next Government to support the NHS to create more compassionate workplaces for its staff. Implementing the *Thriving at Work* report in the NHS and the public sector more broadly would help to make workplaces healthier and more productive (Stevenson and Farmer, 2017).

The last few years have seen a steady decline in the number of NHS nurses working in mental health inpatient services (in line with the reduced number of acute beds) without a consequent rise in the number working in community services. This is despite growing demand (Centre for Mental Health and NHS Benchmarking Network, 2017).

The loss of the bursary for nurse training brought with it a particular risk for mental health nursing, whose intake has tended to be older than for other branches of nursing and therefore less likely to be able to contend with tuition fees (Durcan *et al.*, 2017). The next Government will need to reflect on the impact of the introduction of tuition fees, not just on the numbers of people beginning nursing training but also on the number who move into mental health nursing subsequently.

10. Take action to close the life expectancy gap

People living with a mental illness currently die on average 15-20 years earlier than the general population in the UK. Most of this excess mortality is due to poor and neglected physical health. People on GP registers for psychosis are three times more likely to have diabetes, three times more likely to smoke, twice as likely to have an unhealthy weight and more at risk of almost all physical health problems (Public Health England, 2018).

The UK Government has signed up to the World Health Organisation's Sustainable Development Goals, including a commitment to reduce by one third the number of people dying before the age of 75 from long-term conditions. It is vital that specific action is taken to achieve this for people with mental health conditions. The

Equally Well collaborative is seeking to achieve equal health for people with a mental illness and we hope the next Government will support it, too.

Closing the gap will take concerted action on many fronts. But one immediate, evidence-based action is to offer effective help with smoking cessation to people who want to give up or reduce tobacco smoking. Supporting 150,000 people with a mental illness using NICE-approved techniques to quit smoking would cost £67.5 million (Centre for Mental Health 2016). This would generate an estimated £100 million saving to the NHS alone, as well as giving people who stop smoking an average of seven extra years of life.

11. Support parents, families and children

Invest in parenting programmes

About 8% of children have serious and ongoing behavioural difficulties, often alongside other mental health and developmental problems (Morrison Gutman *et al.*, 2018). Some will face school exclusion and lifelong disadvantages and adversities including poverty, mental and physical ill health, addiction and offending.

Evidence-based parenting programmes have been shown to bring about significant improvements in children’s behaviour. They are a low cost intervention with major benefits to children, parents and their families, schools and communities (Centre for Mental Health, 2016).

The next Government should invest in this essential public health measure and develop a national programme to expand access to evidence-based parenting interventions. Setting up and running a national programme is estimated to cost between £50 million and £100 million over five years.

Introduce counselling for parents affected by baby loss

About 5,000 women a year experience still birth or the death of their baby within 28 days of birth. Such losses can affect any family and are often devastating. For many parents, these tragic circumstances result not only in grief but also in trauma.

Counselling by the charity Petals aims to help parents to understand and cope with the trauma of this sudden, unexplained and tragic loss.

National provision of counselling would cost £3.2 million a year (O’Shea, 2019b). This would create a national safety-net of support to help parents at this immensely difficult time. No such service currently operates across England and Wales.

Petals Counselling	£69.70p per session
National Programme	£3.17m per annum
Net Return on Investment	£2.71 per £1 invested, net
Gross savings to HM Government from a national programme	£11.76m per annum

12. Support mental health online and through digital media

There is growing concern about the risks posed by social media to young people’s mental health. The next Government should seek to pursue a balanced policy towards our digital lives, taking opportunities to improve mental health support online as well as tackling the

potential for harm. We also need to equip the public service workforce with the knowledge and skill to support people’s wellbeing online and use digital technology wisely to meet people’s needs.

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