

NHS Providers evidence submission to the Labour Party's mental health review 2024

NHS Providers is the membership organisation for the NHS hospital, mental health, community and ambulance services that treat patients and service users in the NHS. We help those NHS foundation trusts and trusts to deliver high-quality, patient-focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate. NHS Providers has all trusts in England in voluntary membership, collectively accounting for £115bn of annual expenditure and employing 1.4 million people.

Introduction

Despite significant growth in the number of people being seen by mental health services, [demand continues to outpace capacity](#) and there remain too many individuals who are not receiving the mental health care and support they need where and as soon as they need it. In our [October 2023 survey](#) of mental health trust leaders, over 9 out of 10 were worried about whether their trust has the capacity to meet demand for services over the next 12 months.

Trust leaders [have told us](#) any cross-government mental health strategy needs to be radical, bold and transformational, with a focus on how to shift resources towards prevention and early intervention and deliver a far more proactive and holistic model of health care to help prevent people developing mental ill health and enable early access to support for those that do. Support for children and young people must be an absolute priority, as well as reducing inequalities in prevalence, service access and life outcomes for ethnic minority and vulnerable groups. The alignment of departmental priorities and the right level of support and investment in health and wider public services is critical to success.

Embedding a prevention approach across Government

Promoting wellbeing and keeping people well

Commitments to supporting and improving mental health must recognise the deeply entrenched and complex factors influencing mental health, and not be limited to a focus on individual behaviour and healthy lifestyles. The impact of wider socioeconomic factors on demand for mental health services was a key finding from [our 2019 survey](#) of mental health trust leaders, and 72% of trust leaders

responding to our 2022 [survey on the impact of the cost of living](#) said they had seen an increase in mental health presentations due to stress, debt and poverty. There is a clear opportunity to address the link between health and wealth, the impact of housing conditions, local places, employment opportunities and educational outcomes on people's long-term health outcomes, as well as the impact of people's health on their life opportunities.

There must be increased support for wider public services, in particular public health and social care, given the crucial role they play in providing wider care and support and helping to both prevent mental ill health and avoid deterioration. Trusts and the wider health and care sector can add the most value when operating in partnership with an appropriately funded public health service, and accompanying government focus on addressing the wider determinants of health. In social care, there remains a need for a clear vision of reform, and tangible, fully funded measures to improve access and quality. A coordinated approach which balances national policy to support the prevention agenda with local level action on collaboration, planning and service delivery will enable front line staff to implement interventions which support communities to stay healthy. The impact on physical and mental health should be properly considered in the development and implementation of all government policies.

Examples of work by mental health trusts to support prevention:

- A [system-wide strategic programme](#) focused on prevention, early intervention and integrating services.
- 'South London Listens' and South London and Maudsley NHS Foundation Trust's work focused on the organisation as a community asset.
- Plans to create a mental health centre in South London looking at root causes of mental health issues and long term solutions.

Supporting those with serious mental health conditions

Work underway to deliver [new integrated models of community mental health care](#) should be built on in the years ahead. This will take time and require sustained focus and resources, given historic levels of underinvestment in community mental health services and workforce constraints. Wider socioeconomic factors – including poverty, homelessness, and public health concerns such as substance misuse – must also be addressed, including through better supported access to appropriate housing and financial and social support.

Trust leaders have also stressed the importance of the integration of physical and mental health services, and continued work to reduce stigma around severe and enduring mental health conditions. There remains a considerable lack of equity of treatment associated with mental health which is reflected in how we view, support and deliver services and wider support for people with serious mental health conditions. It is critical to ensure the right levels of support and investment, including capital funding, for inpatient settings are in place to enable people receive therapeutic, high-quality care and that they can be safely discharged in a timely way when they are ready. Ensuring people can access high quality inpatient care as soon and only for as long as they need would also maximise the effective use of inpatient services' capacity and avoid people staying in the wrong part of the mental healthcare pathway for their needs.

Race equality and redressing disparities

There needs to be a focus on tackling inequalities and a targeted, multi-pronged approach to prevention and early intervention for Black, Asian and minority ethnic people given the significant inequalities in access, experiences and outcomes from mental health services for these groups.

Existing national plans to support local health systems to better address mental health inequalities need further support and to be sustained. The wider inequalities experienced by these groups of individuals that have a profound effect on life chances and mental health also need to be tackled. Trust leaders recognise more must be done to tackle structural racism, bias and discrimination. They would welcome national support to take effective action on race equality, with a particular focus on such support providing challenge, sharing best practice and holding boards to account.

Delivering 8,500 more mental health professionals, mental health support in schools and mental health hubs

Delivering 8,500 more mental health professionals

Despite progress in growing the mental health workforce, there remain significant shortfalls both in the number and skill-mix of staff. Retention, particularly of mental health nurses, remains a key challenge. Six in 10 trust leaders (60%) **are worried** about whether their trust has the right numbers, quality and mix of staff to deliver high quality health care. Latest national **data shows** there were 28,550 vacancies in the mental health sector, which is 2% more than the same time last year. The mental health sector vacancy rate was 11.7%, which is higher than the national vacancy rate (8.4%) and the highest of all sectors.

We must see the implementation of the NHS long term workforce plan, which must be fully funded beyond 2028, and [sustainable resolution on pay](#). It is important to emphasise that staff with the right skills in the right place are just as important as an increase in the number of staff: effective mental health services depend on multi-disciplinary teams with the right levels of expertise, skills and experience to meet individuals' care and treatment needs. There also needs to be a focus on staff wellbeing, morale, retention and making the NHS a great place to work, ensuring compassionate, courageous and inclusive leadership at all levels. Capital investment to make inpatient and community mental health settings better places to work would also help with staff morale, recruitment and retention.

Community mental health hubs and support in schools

In order to establish mental health hubs in every community, the government should put an emphasis on outcomes and local areas using coproduction and building on existing communities' assets. For example, some trusts have already [embedded 'health hubs'](#), with many including a focus on mental health and wellbeing, in a range of community-centred settings. There are also other [wellbeing access services](#) available, although these may be less developed for older age groups and improving access for all ages should be a focus if so.

There needs to be an adequate focus on workforce recruitment, training and retention, as well as capital investment, to deliver effective community mental health hubs and mental health support teams in schools on a sustainable basis. The shortfalls in the number and skill-mix of staff in the mental health sector remain the most pressing challenge to the sustainability, accessibility and expansion of services, and one which will take the longest to resolve. The pressure wider partners, including VCSE organisations, are under is a key concern of trust leaders and the strategy should helpfully think through how the VCSE sector can be better supported.

Trusts are taking a range of steps with local partners to better meet people's needs in the community such as by: setting up day services as an alternative to hospital admission; using digital to expand access where appropriate; and working with social care partners to deliver pop up package support, crash pads, crisis beds/day facilities, and other short-term supported accommodation options. Trusts are also [working with housing associations](#) to address the challenge of sufficient housing which may unintentionally prolong people's stay in hospital.

Reversing the rising trends in the rate of lives lost to suicide so they are declining within five years

NHS trusts are **working hard** with wider partners to support the communities they serve, but they know more needs to be done to reduce suicide rates and improve support. The government's current strategy rightly emphasises a cross-government approach, and the crucial role of frontline services and agencies working together to respond to people in crisis, and commits to action in key areas, such as wider prevention, especially through education and workplace training, better signposting to local help and support, and investment in self-care skills.

The right amount of funding and support over the long term – particularly to recruit, train and retain the staff needed to deliver key measures – is critical. We are concerned current levels of investment are unlikely to be sufficient given the scale of unmet need and pressures facing mental health services and their wider partners. Support and investment are particularly needed in earlier intervention and community services, as well as to improve how people with mental health conditions are discharged from hospital and supported in the community. Trust leaders have also stressed the need to enable better understanding of and response to population-based trends. Those affected by suicide need to be involved to support local systems to develop and implement effective plans for their local populations. Local areas may need to prioritise and focus investment in different ways so flexibility will also be crucial.

Ongoing funding and support to **specialist perinatal community mental health teams** is important to improving the journey through pregnancy and after birth and providing better support to mothers. Ensuring frontline staff in maternity services are freed up to deliver care and work across disciplines is also important, as is a focus on tackling health and race inequalities.

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