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Public Health



Why undertake a mental health needs assessment?

- Significant increase in the profile of mental health in recent years with the launch of the NHS Long Term Plan in 2019 which committed to improving access to mental health support for those who need it.
- Growing concerns about mental ill health and the number of people seeking help, exacerbated by the COVID-19 pandemic.
- There is evidence of growing mental health need in Richmond.
- Currently lacking up-to-date understanding of the mental health needs of the Richmond population.



Aims and objectives

Aims:

- Understand the level of mental health need across the life course in Richmond and how this is being met by services.
- Inform policy and commissioning intentions for mental health services over the next five years.

Objectives:

- Estimate the scale of mental health need in the Richmond population, including in groups at increased risk of mental ill health.
- Estimate levels of unmet mental health need.
- Understanding the impact of the COVID-19 pandemic on the mental health of the Richmond population and whether any specific groups have been disproportionately affected.
- Developing recommendations for more effective and efficient services that better meet the mental health needs of the population.

The needs assessment covers the following cohorts:

- Childhood and adolescence (0 19)
- Working age and adults (16-64)
- Older people aged 65+



Methodology

Steering Groups:

- Set up two steering groups one for children and young people and one for adults/older adults to guide the development of the needs assessment and support strategic decision making.
- Representation from South West London CCG (now ICB), Achieving for Children, Social Care, the Data, Insights and Analytics Team, voluntary sector organisations and the local mental health trust.

Data:

- Identified core data sources:
- Mental Health of Children and Young People in England, 2017 [PAS], NHS Digital
- Mental Health of Children and Young People in England, 2020: Wave 1 follow up to the 2017 survey
- Adult Psychiatric Morbidity Survey: Survey of Mental Health and Well-being, England, 2014, NHS Digital
- Developed data specifications for service data from the NHS, local authority and CCG (ICB) commissioned services, social care and the voluntary sector.

Stakeholder Engagement:

Focus groups with multiple stakeholders using a semi-structured discussion guide.



Focus groups

- Richmond Wave 4 School Cluster
- Richmond Mental Health and Wellbeing Alliance
- Richmond CVS
- Richmond Learning Disabilities Partnership Board
- Free2B LGBTQ+ Youth Group
- Older Adults Mental Health Network Group
- Richmond MIND
- RUILS "Bridging the Gap" Project
- RUILS Social Prescribers Link Workers Group
- Housing Allocation Group
- Elias Ward, Tolworth Hospital



Key statistics – children and young people

National data estimates that:

- One in nine 6-16-year-olds has a probable mental health disorder.
- One in seven young women aged 17-19 years-old has a probable mental health disorder.



Key findings – children and young people

Data analysis showed:

- Increased prevalence of common mental disorders (CMD)
- 17-19-year-olds have the highest rates of mental disorder but the lowest number of CAMHS referrals.
- A decrease in boys being referred to the CAMHS Single Point of Access.
- Commonest reasons for referral are anxiety and neurodevelopmental (excluding ASD).
- A decrease in referrals to most services during 2020/21, associated with the COVID-19 pandemic.
- Increased waiting times for services in 2021/22 suggest a surge in need.



- A noticeable increase in eating disorders in girls.
- Significant unmet need in children and young people requiring a single professional response (tier 2 services).
- Surge in young people requiring crisis care during the height of pandemic restrictions.
- Increased levels of inpatient care, disproportionately affecting girls.
- Highest rates of referral to specialist CAMHS compared with other SWL boroughs
- Rates of self-harm are consistently high, consistently in the top quartile of London boroughs.



Key findings – children and young people

Stakeholders reported:

- Prevalence, complexity, acuity and longevity of mental health conditions, especially self-harm and eating disorders are increasing, particularly since the COVID-19 pandemic.
- Rising demands on mental health services are leading to increased wait times and insufficient care.
- Schools are struggling to cope with pupils' increased mental health needs.
- LGBTQ+ children and young people are particularly vulnerable groups.
- Services are disconnected from one another and work in silos.
- Lack of specialist mental health provision for children and young people with neurodiversity and/or learning disabilities.



Recommendations – children and young people

Recommendations	Key stakeholder(s)
Develop a public mental health strategy to prevent mental disorder and improve community resilience	Public health South West London Integrated Care System
Ensure that Mental Health Support Teams cover all schools and colleges.	NHS South West London Integrated Care Board
Consolidate whole school approaches to improve the mental health and well-being of children and young people.	Schools NHS South West London Integrated Care Board Achieving for Children Public health
Increase access to advice, guidance and targeted early intervention to meet unmet mental health needs.	South West London Integrated Care System
Implement a needs-based system of support for children experiencing mental health disorder based on the Thrive Framework.	South West London Integrated Care System
Integrate voluntary and third sector provision with statutory services to provide a seamless, comprehensive CAMHS.	Voluntary and community sector NHS South West London Integrated Care Board South West London St George's Mental Health NHS Trust
Increase access to targeted support for children and young people with emerging anxiety, depression and self-harm.	South West London Integrated Care System



Recommendations	Key stakeholder(s)
Work closely with parents and carers of children with special educational needs to coproduce effective care and support interventions.	Achieving for Children South West London Integrated Care System Voluntary and community sector
Explore ways to increase referrals of boys and young men into early intervention services.	South West London Integrated Care System Primary care (general practice)
Develop and communicate a clear menu of local community, voluntary sector and national resources to support children and families to access appropriate levels of support.	NHS South West London Integrated Care Board Achieving for Children Voluntary and community sector Public health
Develop and disseminate clear care pathways for children and young people's mental health needs based on NICE guidance.	NHS South West London Integrated Care Board South West London St George's Mental Health NHS Trust
Improve communication, support and resources for children and families waiting for treatment.	NHS South West London Integrated Care Board South West London St George's Mental Health NHS Trust
Improve crisis care, self-harm, and suicide prevention pathways by implementation of the self-harm prevention toolkit in universal services.	South West London Integrated Care System Public health



Recommendations	Key stakeholder(s)
Prioritise a multi-agency, multi- disciplinary workforce development strategy to improve recruitment and retention of the children's workforce.	South West London St George's Mental Health NHS Trust South West London Integrated Care System Achieving for Children
Increase the provision of early intervention (tier 2) targeted support for children and young people with emerging anxiety and depression.	NHS South West London Integrated Care Board South West London Integrated Care System



Key statistics – adults and older people

National data estimates that:

- One in six adults meet the criteria for a common mental disorder.
- One in three adults with a common mental disorder reported current use of mental health services.



Key findings – adults and older people

Data analysis showed:

- Women are more likely than men to report symptoms of CMD.
- Women are more likely to access mental health services than men.
- Young women have emerged as a high-risk group with higher rates of CMD, self-harm and PTSD.
- Mental health disorders are more common in people living alone, in poor physical health or with a disability or who are unemployed.
- Parents and carers, people who are unemployed and lower income families, young adults, people with existing conditions and ethnic minorities have experienced increased prevalence of CMD during the pandemic.
- A drop in referrals across most treatment services during 2020/21.
- An increase in referrals to services during 2021/22 compared to the previous year.



- 25-34-year-olds are the most common age group in services.
- Ethnic minorities are represented proportionately in psychological therapies and community services.
- Ethnic minorities are overrepresented in inpatient services.
- The Adult Social Care Mental Health Team has experienced a surge in referrals during 2021/22.
- There has been a steady increase in numbers of residents assessed as having mental health care and support needs.
- More men than women require social care for mental health needs.
- Suicide rates have increased consistently over recent years to the highest level seen in 20 years.
- The number of dementia care plans that have been reviewed is decreasing and lower than the London average.



Key findings – adults and older people

Stakeholders reported:

- Increasing complexity of mental health needs but a lack of services to manage them.
- Significant barriers to accessing and receiving mental health services long waiting lists, limited time and resources and threshold for acceptance.
- Awareness of and understanding the pathway between local mental health services is challenging.
- Service users with neurodiversity and/or learning disabilities, those with co-occurring mental health and substance misuse disorders, carers, homeless service users, those facing poverty and Black, Asian and minority ethnic groups were identified as particularly vulnerable.
- Lack of an integrated approach to mental and physical health in older people.



- Older people experienced high levels of isolation and faced barriers to accessing mental health service due to increased digital delivery.
- Increasing complexity of mental health needs but a lack of services to manage them.
- Inflexibility of services to individual's needs.
- A high number of people with dementia due to the large population of older adults in the borough.
- Pressure on voluntary and community sector groups to support the mental health of older people.



Recommendations - adults and older people

Recommendation	Key stakeholder(s)
Develop a public mental health strategy to prevent mental disorder and improve community resilience	Public health South West London Integrated Care System
Develop clear and accessible evidence- based treatment pathways to support residents with mental health disorders.	NHS South West London Integrated Care Board South West London St George's Mental Health NHS Trust
Build capacity in the community and voluntary sector to support care, support and recovery.	NHS South West London Integrated Care Board Voluntary and community sector
Improve the uptake of psychological therapies for 18–24-year-old women.	NHS South West London Integrated Care Board Richmond Wellbeing Service Primary care (general practice)
Review service provision to ensure adequate provision for the increasing numbers of residents experiencing trauma-related conditions especially in young adult populations.	NHS South West London Integrated Care Board
Explore ways to reduce the number of people who do not attend appointments.	NHS South West London Integrated Care Board South West London St George's Mental Health NHS Trust Voluntary and community sector



Recommendation	Key stakeholder(s)
Explore the impact of changes to service access methods (e.g., e-consultations) on certain groups (e.g., older people, ethnic minorities and people from low socioeconomic backgrounds).	NHS South West London Integrated Care Board South West London St George's Mental Health NHS Trust
Support primary care to systematically identify and screen carers and people with longterm conditions for CMD.	NHS South West London Integrated Care Board Primary care (general practice)
Increase access to appropriate psychological therapies for older people.	NHS South West London Integrated Care Board Richmond Wellbeing Service Primary care (general practice)
Place increased emphasis on maintaining recovery to avoid mental health crisis.	NHS South West London Integrated Care Board Primary care (general practice) South West London St George's Mental Health NHS Trust
Improve integrated working for people with co- occurring mental health and substance misuse conditions.	Public health Local authority commissioners South West London St George's Mental Health NHS Trust
Prioritise workforce development plans to improve recruitment and retention of mental health professionals.	South West London St George's Mental Health NHS Trust South West London Integrated Care System



Recommendation	Key stakeholder(s)
Improve engagement and support for vulnerable groups including LGBTQ+, learning disabled and neurodiverse communities.	South West London Integrated Care System South West London St George's Mental Health NHS Trust Voluntary and community sector
Implement the Richmond Suicide and Self-Harm Prevention Strategy, focussing particularly on reducing self-harm in children and improving crisis support for people experiencing financial hardship.	Richmond Crisis Care Concordat South West London Integrated Care System
Increase ethnic minorities' representation in early intervention services.	Primary care (general practice) South West London St George's Mental Health NHS Trust
Improve access to psychosocial support for the family and carers of people with dementia including bereavement and talking therapy services.	NHS South West London Integrated Care Board Primary care (general practice)

