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Strategic Challenges for Mental Healthcare in Wales

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My agenda

1. Where are we now – a thematic analysis of the challenges?
 - The nature of mental healthcare
 - Evidence from the Royal College of Psychiatrists' Fair Deal campaign
2. Enduring strategic challenges
 - Developing the interpersonal quality of mental health services
 - Creating public mental healthcare in Wales
 - Working constructively and effectively with local authorities and the third sector
 - Handling transitions more effectively
3. Current strategic challenges in Wales
 - Implementing the structural changes in NHS Wales
 - Implementing revalidation of doctors
 - Coping with the impacts of recession and the present economic position
 - Developing mental health services for children and young people
 - The potential impacts of the proposed Mental Health Measure
 - Developing very specialised mental healthcare services for people of all ages

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1. A thematic analysis of where mental health services are now

- The nature of mental health and mental healthcare
 - Mental healthcare is substantially evaluative
 - The remit of mental healthcare is very broad
- Evidence from the Royal College of Psychiatrists' Fair Deal campaign

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Mental health

1. A Utopian aim, an idealised state
2. What every child needs to develop appropriately
3. People who are less resilient or more vulnerable than others
4. People who face more than the average volume of risk factors
5. People who have distressing experiences that do not amount to them perceiving that they have a sustained problem
6. People who have a mental health problem
7. People who have a mental disorder
8. People who have more than one mental disorder or other comorbidity

Common confusions

- People's needs for emotional wellbeing
- Children and young people's needs for psychosocial and emotional development
- People's emotions and behaviour when they are distressed, have problems or have a disorder
- Behaviour problems, mental disorders and learning impairment

Impact and burden

- Burden is *"the presence of problems, difficulties or adverse life events which affect the life (lives) of the psychiatric patient's significant others"* Angold et al
- Burden takes in both perceptions of the manifestation of a person's problems and their relatives' and carers' abilities to cope and support them

Risk factors

- Number rather than types of risks
- Prevalence of psychiatric disorder links to both social group and income
- Prevalences are greater in families with the following features:
 - Low socio-economic status
 - Lone parent
 - Reconstituted
 - Separation has occurred
 - More than 5 children
 - Neither parent working
 - Parents have no educational qualifications
 - A parent has their own mental health problem
 - Family instability and conflict
 - Maltreatment
- Inequity is usually mediated through caregivers
 - Poverty
 - Parenting
 - Attachment patterns
 - Parental psychopathology

Protective factors

- Positive temperament
- Intellectual ability
- Supportive family
- Encouraging and rewarding social support system
- A good caring relationship with at least one adult

Five core features of psychosocial resilience

- Social support
 - The abilities of people to accept and use social support
 - And the availability of itare two of the key features of resilience that may have greater effect than exposure to events
- A staunch acceptance of reality
- Belief in oneself buttressed by strongly held values
- Ability to improvise

Mental health services

- Universal services
 - To assist the emotional wellbeing, psychosocial development and relationships of everyone
- Selective services
 - To assist people who have higher than average risks of developing a mental health problem or disorder but have no problems or symptoms
 - To offer support to people who are distressed in response to untoward events
- Indicated services for people who have:
 - Prolonged distress
 - Mental health problem(s) or
 - Mental disorders

Prevention

- Effective prevention programmes have in common
 - Comprehensive
 - Systematic
 - High intensity and long duration
 - Contents are structured
 - Commence early
 - Risk factor specific
 - Involve specific training for practitioners

RCPsych Fair Deal campaign

- Campaign priorities
 - Discrimination and stigma
 - Engagement with service users and their carers
 - Linking mental and physical health
 - Funding
 - Access to services
 - Availability of psychological therapies
 - Inpatient services
 - Recovery-based services

A fair deal for mental health



- Equal access to evidence-based care and treatment for people with mental health problems and disorders
 - Stop harmful cuts to mental health services
 - Treble mental health research funding
 - Mental health receives 6.5% of all research funding (25% for cancer and 15% for neurological diseases)
 - Invest in early intervention
 - Begins in childhood
 - Should continue into adulthood (50% of disorders start before age 16 and 75% before age 25)
 - Put mental health at the heart of public health



2. Enduring strategic challenges

- Developing the quality of mental health services
 - Person-centred mental healthcare
 - Family- and carer-focused mental healthcare
 - Clinical engagement and leadership
- Creating public mental healthcare in Wales
 - Mental health promotion
 - Early intervention
 - The wider health context of mental health problems and mental disorders
- Working constructively and effectively with local authorities and the third sector
- Handling transitions more effectively
 - Horizontal
 - Vertical



3. Current strategic challenges in Wales

- Implementing the structural changes in NHS Wales
- Implementing revalidation of doctors
- Coping with the impacts of recession and the present economic position
- Developing mental health services for children and young people
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Developing mental health services for children and young people 1

- Based on Everybody's Business: the components delivered by NHS Wales
 - Tier 1: primary child and adolescent mental healthcare (CAMHcare)
 - Embedding and sustaining the changes to Tiers 2 & 3 that have been started progressively since 2006
 - Improved responsiveness
 - Specialist forensic CAMHS
 - Services for children and adolescents who have both a mental disorder and a learning disability
 - Services for children and adolescents who misuse substances
 - Services for young people who are aged 16 and 17
 - Completing the developments to inpatient services
 - Developing a greater range of advocacy services

Developing mental health services for children and young people 2

- Based on Everybody's Business: the components delivered by local authorities and the third sector
 - Universal services (services for all)
 - Developing an approach based on the national curriculum to develop and sustain the psychosocial resilience of children and young people
 - Developing an approach based on the national curriculum to develop and sustain the emotional well being and mental health of children and young people
 - Selective services (services that are targeted on people who are at greater risk)
 - Mental health promotion services
 - Early intervention services
 - Indicated services (services that are based on need)
 - Joint working between sectors
 - Services for children and young people whose problems with learning affect their behaviour
 - Adopting a more rational approach to parenting interventions
 - Services for children and young people who have substantial behaviour problems

Critical client groups

- Older adolescents and young adults
- People of all ages who have serious disorders such as
 - Early onset psychosis
 - Eating disorders
 - Dementia
- Combinations of disorders and of mental health needs combined with other needs

The proposed Mental Health Measure

- Local primary mental health support services: duty for health boards and local authorities to deliver local primary mental health services
- Coordination of and care planning for secondary mental health services: requirements about care and treatment planning
- Assessments of former users of secondary mental health services: requirements on secondary mental health services to have in place arrangements to ensure provision of timely access to assessment for previous service users
- Mental health advocacy (compulsory patients): extension of 'qualifying patients' under MHS who are entitled to receive independent mental health advocacy services
- Mental health advocacy (informal patients): enable all patients receiving mental health care and treatment in hospital to have access to independent and specialist mental health advocacy

A ten point continuum of care

1. Effective parenting: care and support for parents, children and families
2. Promoting emotional wellbeing and mental health through families, communities, schools, and workplaces
3. Resilience building during childhood and adolescence through families and schools
4. Early intervention in childhood and adolescence by schools and education services and primary healthcare services
5. Effective interventions during childhood and adolescence
6. Create psychosocially healthy and supportive communities and workplaces
7. Family-orientated mental health services for adults
8. Primary and secondary mental health services working together to focus on young adults
9. Models of care for people of all ages that are based on the principles of recovery
10. Effective early interventions for older people
