Adult Mental Health and Wellbeing in Sandwell

Joint Strategic Needs and Assets Assessment

Executive Summary

Background

The overarching priority for the Sandwell Health and Wellbeing board, over the next five years, is to increase healthy life expectancy for people living and working in Sandwell. As part of this, the board recognises the critical role of mental health and wellbeing as a determinant of healthy life expectancy and wider health and wellbeing.

The independent Foresight Mental Capital and Wellbeing Project Final Report states that;

> *An individual's mental capital and mental wellbeing crucially affect their path through life. Moreover, they are vitally important for the healthy functioning of families, communities and society. Together, they fundamentally affect behaviour, social cohesion, social inclusion, and our prosperity.*

This joint strategic needs and assets assessment (JSNAA) is how the board will start to understand the level of need in Sandwell in relation to adult mental health and wellbeing. This includes an understanding of what will help promote and maintain positive mental health and what support people with mental health problems need.

Purpose

This JSNAA describes the mental health and well-being needs of adults in Sandwell to inform the future planning, commissioning and delivery of services. It also looks at the assets that exist in Sandwell, the strengths and current good practice that we can build on to improve services.

This JSNAA is the first phase of a longer-term assessment of need and services in Sandwell. The focus for this first phase is to assess how people access mental health and wellbeing services. It describes what is working well, where improvement is needed, and the barriers and challenges that people experience when they need support and care with mental health problems. The JSNAA also provides a summary of current policy, guidance and evidence for best practice and for what will work to improve and maintain positive mental health.

The needs and assets assessment draws conclusions about current need in Sandwell and makes specific recommendations for what will improve mental health and what needs to inform future commissioning and service provision. These recommendations will need consideration by key stakeholders at strategic and operational levels.

Local Context

The needs assessment provides an analysis of the demographics of the population and forecasts for future trends. It also summarises the available evidence about the determinants of mental health and wellbeing. The determinants that influence mental

health and wellbeing are wide ranging and complex. Alongside direct individual factors such as gender and ethnicity there are the experiences people have over their lives.

The evidence is clear that the social determinants of health such as housing, education, employment and environment, are major influences on peoples mental health and wellbeing. Analysis of risk and protective factors for Sandwell shows that the people of Sandwell face a number of challenges related to the high levels of disadvantage when compared to the rest of England. Balancing these challenges are strong communities and a vibrant voluntary sector.

The impact of mental health

The West Midlands Combined Authority (WMCA) has established a mental health commission, which has recently published a report that examines mental health in the West Midlands. The report estimates that nearly a quarter of adults living in the WMCA are experiencing a mental health problem at any one time. The report highlights the impact of mental health problems, which affect every aspect of people's lives, as well as those of their carers, families and communities. The report states that people must receive the help they need to maintain their mental health, and be able to access the support they need quickly and effectively when they are experiencing problems.

The report also estimates the aggregate economic and social cost of mental health problems in the WMCA. The estimate is that in 2014-15 the aggregate cost of mental health problems was around £12.6 billion, equivalent to a cost of about £3,100 per head of population. The estimated aggregate costs of mental ill health in Sandwell for 2014-15 were £958 million.

Wellbeing, mental health and mental illness in Sandwell

When looking at the evidence for levels of mental health and wellbeing in Sandwell, and the need for treatment and support, the strength of the evidence is variable. There is a lack of solid data and evidence for the levels of wellbeing in Sandwell. This lack of information about wellbeing is a national as well as a local problem that needs addressing.

For common mental health disorders, the evidence is not consistent. Data from the Quality and Outcomes Framework in primary care shows lower levels of depression compared to England average and levels of prescribing for common mental health disorders are lower than the average for England. However, data from surveys of GP patients, along with patterns of service use, suggest that there are higher levels of common mental health disorders in Sandwell.

For severe and enduring mental illness, the evidence is more consistent, and suggests that Sandwell has higher rate of severe mental illness, including psychotic illness, than the England average.

The number of hospital stays for self-harm are higher in Sandwell than they are in the wider West Midlands or England. The rate of suicide in Sandwell is not significantly different from the England average. However, recent reports have stated that variations in suicide rates between areas may by partly due to differences in how coroners record deaths.

The needs assessment does show significant differences in the levels of reported mental illness between people from different ethnic backgrounds. Referrals into services, which will tend to be for lower levels of mental health problems, do not show a marked variation across ethnicities. Hospital admissions, which will tend to be more severe mental health problems, do show marked variations between ethnicities, with males from a black background having substantially higher rates of admission than the general population.

People with Caribbean, any other white background, any other Asian background and any other black background all have higher rates of admission than the population average. The highest rate of hospital admissions is for 'Any other Black Background', who have a rate nearly four times higher (1,602.6 admissions per 100,000 people) than the population average (412.1 admissions per 100,000 people). The highest rate for admissions is for males from any other Black background (1971.1 per 100,000 people). These findings are generally is in line with the findings from national reports on service use by different ethnicities.

The needs assessment has identified particular challenges for people with both substance misuse and mental health problems. The available data suggests that overall drug use is higher in Sandwell than in England, and admissions to hospital for alcohol related behavioural disorders are higher than the England average. Concurrent contact with mental health services and substance misuse services are similar to the England average.

Services supporting people with substance misuse problems have identified that people with mental health problems are able to access support with substance misuse problems, however there are barriers for people with substance misuse problems accessing mainstream mental health services.

People with severe mental illness have a 10 to 25 year shorter life expectancy than the general population. The majority of these deaths are due to long-term health conditions such as cardiovascular disease, respiratory and infectious diseases, diabetes and hypertension.

Smoking is the single largest cause of the gap in life expectancy between people with mental illness and the general population. The other major cause of death is suicide. The available data suggests that mortality rates in Sandwell for people with mental illness are similar to the England average. The positive impact of stopping smoking on anxiety and depression appears to be at least as significant as antidepressants

Only limited data is available on how the physical health of people in Sandwell with mental health problems is monitored, and how they are supported with adopting and maintaining healthier lifestyles. This needs addressing and there need to be robust mechanisms to ensure people with mental health problems receive the support they need.

There are vulnerable groups within Sandwell who are at substantially higher risk of poor mental health. These groups often find it more difficulty to access support and care. There is a lack of intelligence on the mental health needs of some of these groups and they are substantially under-represented in services. Specific groups identified are carers, people who are homeless, new arrivals, asylum seekers and refugees, people in contact with

criminal justice, people who define themselves as lesbian, gay, bisexual and transgender and victims of modern day slavery.

Current services

In developing the JSNAA, we consulted widely with commissioners and providers of services. We also worked with people with lived experience of mental illness and of using services and non-mental health providers who support people with mental health problems.

This review of current services identified the substantial contribution from non-mental health organisations, and non-mainstream mental health providers, in supporting people outside of formal mental health services. This is an important asset in Sandwell and provides valuable support to vulnerable people. This contribution is not always fully recognised and there is real potential for improved joint working across sectors to improve support for people with mental health problems or low wellbeing.

Realising the potential of these providers will need different approaches to how organisations and sectors work together. One approach where there is some, developing, evidence of benefit is the use of social prescribing. This is fully in line with the focus on prevention and wellbeing as set out in the Five Year Forward View.

The review of services identified areas where commissioning and service delivery could be better coordinated. It also identified that people can experience significant challenges in navigating services to obtain the support they need. This is not a criticism of any particular commissioner or provider of services. There are systemic problems and unclear pathways between services that all partners need to address.

The main themes that emerged from the review of services were;
- Substantial challenges in emergency crisis referral pathways and access to assessment and treatment
- Unclear pathways into assessment and treatment for routine referrals, including inconsistencies in when people are discharged for non-attendance and a lack of clarity about pathways for re-referral.
- Difficulties for people with substance misuse problems accessing mainstream mental health services.
- A lack of overall coordination of pathways, referral routes, and access to assessment and treatment across all partners
- There needs to be more coordination of approaches, pathways and support between statutory and voluntary mental health providers and the non-mental health providers that are supporting vulnerable people and people with mental health problems.
- A need for a coordinated approach to workforce development across all partners, including improved training and support for non-mental health providers.
- Gaps in data collection and reporting that need addressing. There are developments underway which will improve this situation but all partners need to ensure there is robust data collection. This must include monitoring and standardisation of data across organisations, for example, in the recording of ethnicity data.