

Mental health and wellbeing in Kensington and Chelsea, and Westminster

Joint Strategic Needs Assessment (JSNA) Report

Executive Summary

DRAFT report for consultation

1. Introduction

Good mental health and wellbeing is important for us to lead happy, healthy lives. The foundations for good mental health and wellbeing are established in childhood and adolescence. It has a positive impact on our inter-personal relationships and how we cope and engage with the world around us. Research shows that good mental health and wellbeing promotes our overall health, supports recovery from illness, and improves life expectancy. It also has a positive impact on better educational achievement, reducing risky health behaviours, reduced risk of mental illness suicide, improved employment rates, reduced anti-social behaviour and higher levels of social interaction and participation.

Unfortunately, at least one in four people will experience a mental health problem at some point in their lifetime, with one in six adults and one in ten children (aged five to sixteen years) suffering at any one time. Around 75% of mental health conditions are established by the age of 17. This indicates the importance of early intervention and addressing the childhood determinants of mental health and wellbeing. Of these, family relationships are pre-eminent, as positive attachments result in good emotional and social development for children, equipping people with the necessary skills and knowledge to achieve resilience and positive mental wellbeing in adulthood

Mental illness represents up to 23% of the total burden of ill health in the UK – the largest single cause of disability – with estimates suggesting that the cost of mental health problems in England is close to £105 billion per year, including costs of lost productivity and wider impacts on wellbeing and treatment costs. These are expected to double by 2030.

This JSNA seeks to improve our understanding of the mental health and wellbeing landscape within our communities, understand how poor mental health and wellbeing affects our local health and social care economy, and recommend priority areas for action

Definitions

The terms mental health and mental wellbeing are often used interchangeably, and there is often confusion around terminology. For the purpose of this JSNA we have mostly used the term mental health and wellbeing to include the whole spectrum and experience, from positive mental wellbeing through to severe mental illness.

Mental Health

The World Health Organisation defines mental health as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”

The term covers a “spectrum from mental health problems, conditions, illnesses and disorders through to mental wellbeing or positive mental health” – *Better Mental Health for All, Faculty of Public Health*.

Mental Wellbeing

Mental wellbeing covers the positive end of mental health covering both the ‘feeling good’ and ‘functioning well’ components. Feeling good is subjective and embraces happiness, life satisfaction and other positive affective states. Functioning well embraces the components of psychological wellbeing (self-acceptance, personal growth, positive relations with others, autonomy, purpose in life and environmental mastery)

Our emotional or mental wellbeing is closely linked with our physical health, and is strongly associated with positive relationships and healthier communities

2. Purpose and Scope

This JSNA report responds to a recommendation in the annual report of the Director of Public Health to undertake a needs assessment of mental health and wellbeing in the boroughs of Kensington and Chelsea and Westminster. It has been undertaken to provide **an evidence base to inform and support strategy development, commissioning decision making and action planning** to improve mental health and wellbeing and reduce inequalities across the Bi-borough.

The key questions for the JSNA were developed at a workshop held with key stakeholders in July 2018. These are;

- a) What do we mean by mental health and wellbeing?
- b) What is the local prevalence and characteristics of mental health and wellbeing across the life course?
- c) What are the local determinants and factors (risk and protective) for poor mental wellbeing and illness across the life course?
- d) What local services and assets in the community are available to meet these needs?
- e) What works to promote or protect mental wellbeing across the life course?
- f) What are the views and experience of both residents and patients accessing services?
- g) What are the potential gaps or areas of unmet need which require local action?

Further questions for the JSNA to consider are included in the Appendices of the full report.

Both national and local strategy and guidance emphasises the benefits of promoting positive mental wellbeing to the individual and society, and the importance of shifting the focus to preventing mental ill-health. An important recent example of investment in prevention is that of the implementation of Mental Health Support Teams in schools and colleges following the green paper on Transforming Children and Young People's Mental Health Provision.

The prevention agenda is a key policy driver for the local authority, Adult Social Care, Public Health, the NHS and other key partners, and has been highlighted in the recent publication of the NHS Long Term Plan. Both the Joint Health and Wellbeing Strategies make a commitment to preventing mental illness and promoting good mental wellbeing across the life course, and align with the ambitions set out in the Like Minded vision for North West London. While much of the data available for this JSNA focusses on mental ill health, it also reports on many of the factors that impact on mental health and wellbeing, and mental wellbeing data is included where available.

3. Key findings at a glance

Key findings are summarised at the beginning of each chapter in the full report. Drawing on these, and from the evidence and data contained within the JSNA, the following analysis of current strengths, areas for future development, opportunities and potential challenges was undertaken by the Mental Health and Wellbeing JSNA Steering Group, and has informed the development of the key themes and recommendations. This provides a strategic overview of the findings of the JSNA.

Mental Health and Wellbeing JSNA - Key findings at a glance

Current strengths	Areas for future development
<ul style="list-style-type: none"> • Thriving community and voluntary sector supporting and promoting mental wellbeing • Specialist clinicians and centres of excellence • Clear perinatal mental health pathway, specialist pathways, suicide strategy, and specialist homelessness services • Strong Healthy Schools Partnership and Healthy Early Years • Development of models such as Primary Care Plus and Community Living Well • Relatively well funded with commitment to mental health and wellbeing • Compared to the London average there are: <ul style="list-style-type: none"> • Higher levels of life satisfaction and happiness, with an upward trend in high life satisfaction, finding life worthwhile and high happiness in Westminster • Higher educational attainment and low youth unemployment • Lower rates of long-term unemployment • Lower rates of looked after children • Higher % of people in touch with mental health services who are in stable appropriate housing • Lower hospital admission rates for self-harm • 100% IAPT referrals resulting in treatment waited less than 18 weeks • Lower rate of smoking among adults in both boroughs • Lower prevalence of residents (children and adults) with a long-term health problem or disability in both boroughs • Lower prevalence of adults and children with a learning disability • Lower prevalence of residents registered deaf or hard of hearing in both boroughs • Lower percentage of unpaid carers in both boroughs 	<ul style="list-style-type: none"> • Develop a strategic vision with clear delivery plan for mental health and wellbeing with clarity on leadership and specific roles • Develop visible care pathways to recovery for children and adults • Build trust and confidence in the capacity and skills within primary care to better manage mental health and wellbeing • Waiting times can be lengthy and exacerbate mental health conditions • Better communication and clarity needed on services and assets, and how to navigate the system • Local issues affecting our population include high numbers of homelessness, population churn, and high number of residents experiencing trauma • Looked after children are placed out of Borough which brings specific challenges • Compared to the London average there are: <ul style="list-style-type: none"> • lower % of service users with a crisis plan • lower % of patients waiting <28 days between first and second treatments • higher numbers of delayed discharges • lower satisfaction with social care support and protection

Mental Health and Wellbeing JSNA - Key findings at a glance

Opportunities	Potential challenges for the future
<ul style="list-style-type: none">• The JSNA builds on the current national and local conversation on mental health and wellbeing, and could provide a good platform for developing creative and collaborative partnerships of key stakeholders, and setting ambitions for the mental health and wellbeing of our population• Existing and potential work with social housing providers to support residents with mental health conditions and to promote community resilience, address loneliness, and promote mental wellbeing.• Opportunities to identify best practice in developing peer support models• Work with residents and services users to co-produce pathways and services to promote mental health and wellbeing• Build on existing social prescribing models across the two Boroughs, such as My Care My Way to promote mental health and wellbeing• Support the already strong community and voluntary sector to provide services promoting mental health and wellbeing to all local communities, and to address specific barriers (such as language barriers)• Recommissioning and procurement of supported housing services may present opportunities to improve support for residents with poor mental health• Trailblazer funding secured to implement Mental Health Support Teams in schools• Utilising new technologies to deliver services to meet the needs of young people in a way that is engaging for them	<ul style="list-style-type: none">• Potential danger of overburdening universal services with mental health referrals• Working within the existing financial envelope, there is a tension between maintaining current investment in treatment services in order to meet needs and the shift required to invest in prevention• This is particularly important when levels of future funding are uncertain and in the context of an increasing demand for mental health services• There is a particular challenge for children & young people with mental health needs who are not accessing education• Compared to the London average there are:<ul style="list-style-type: none">• downward trends in high life satisfaction, finding life worthwhile and high happiness in Kensington and Chelsea• Higher rates of adult and child poverty• Higher % of children with social, emotional and mental health needs and lower percentage of children 'school ready'• Higher rates of children in need due to parental absence or parental illness/ disability• Higher rates of hospital admissions for mental/ behavioural disorders due to the use of alcohol• Higher rates of opiate and crack use• Higher rates of homelessness and single person households• Higher rates of depression in Kensington and Chelsea• Higher rates of severe mental illness in both boroughs• Suicide rate higher in RBKC, comparable in WCC. Rate in males higher for both boroughs• Mixed life satisfaction results at age 15 years• Higher rates of unemployment• Higher rates of residents registered blind or partially sighted 18 to 75 years in Kensington and Chelsea and 75+ in Westminster

4. Recommendation and priorities

Drawing together the evidence and the analysis above the JSNA has identified one key recommendation to mobilise improvement in mental health and wellbeing in the Bi-borough.

Key recommendation

The Health and Wellbeing Board takes a leadership role in setting the vision to achieve improved mental health and wellbeing in the Bi-borough and to reduce inequalities. The Board should establish a Mental Health and Wellbeing Working Group involving key partners to:

- Reach consensus on a vision for mental health and wellbeing in the Kensington and Chelsea, and Westminster population.
- Agree on a set of priority outcomes to achieve this vision
- Create a Strategic Action Plan and framework to implement and deliver these outcomes
- Monitor progress against the Strategic Action Plan and provide quality assurance for the Health and Wellbeing Board
- Ensure that local strategy and delivery plans address the findings of this JSNA
- To identify innovation and 'cutting edge' practices and develop a mechanism to coordinate bids to maximise potential for success

The mental health and wellbeing 'system' is incredibly complex and broad in scope and we acknowledge that to coordinate this system would be a virtually impossible task. However, this recommendation would ensure there is a responsible body with leadership and oversight of a shared work programme to promote mental health and wellbeing in the population, and reflect the spirit of collaboration and integration that is required.

From the available evidence and analysis the JSNA has highlighted a number of priorities that need to be considered at a strategic level.

Priorities

Mobilising local assets, services, and communities

The Bi-borough benefits from a thriving and vibrant third sector who make a significant contribution to promoting mental wellbeing, as well as the expertise and knowledge of a variety of specialist clinicians and centres of excellence for mental health and wellbeing. We need to ensure that we build capacity across the system and make the most of these assets, services and communities – and ensure that they are sustainable, and work collaboratively to promote and maintain the mental health and wellbeing of our residents and patients

Pathways

There is emerging evidence that the Perinatal Mental Health Service pathway is helping to provide good care for residents and patients using those services. Similarly, clear and well communicated pathways for children and young people, and adults, need to be developed.

Funding

Any future strategies and commissioning plans should consider how we work better in partnership in order to maximise outcomes within existing budgets, and how funding can be sustained across the system into the future.

Future demand

There is evidence of an increase in demand for mental health services, including indications of increasing needs for children and young people. Consideration will need to be given to focusing on prevention as well as early intervention to address demand and future planning to ensure services are equipped to meet this need.

Primary care

Primary care, and GPs in particular, play a key role in enabling a cultural shift towards a recovery based model where patients are discharged in to their care, and their recovery from mental ill-health can continue. Primary care practitioners must have the knowledge and skills to manage mental health conditions and enable these pathways to recovery

Innovation

Work in partnership across local authority, NHS, community and voluntary sector, business and industry, and academia to develop and trial innovative and integrated solutions to promote good mental health and wellbeing across the Bi-borough, with a particular focus on prevention and early intervention. Use academic collaborations to evaluate effectiveness and cost effectiveness of local initiatives and programmes to ensure value for money.