

# Royal College of Psychiatrists' briefing Mental Health Watch policy summary

May 2022



Mental Health Watch was launched as a tool to hold Government to account on the delivery of the Five Year Forward View for Mental Health and NHS Long Term Plan. In the context of the pandemic, it offers a helpful snapshot of how services are responding to unprecedented demand.

The most recent Mental Health Watch update summarises data up until the end of the 2021 calendar year, and in some cases into 2022. While poor reporting continues to present a real challenge across several indicators, the data gives an initial insight into the impact of the Omicron wave on services.

## **Planned spending per head**

Newly published data on planned mental health spending confirms that 2021/22 budgets set aside an average £208.69 per head, compared to £202.21 the previous year. While all ICS areas planned to increase spend per head once adjusted for need, there remains significant variation. For example, Lancashire and South Cumbria only planned to increase their spend by £1.21 per head, compared to a far more substantial £14.16 in Lincolnshire.

Meanwhile, 23 ICS areas plan to spend above the overall average for England in 2021/22, with an almost £120 per head difference between North East London (£151.34) and Cornwall & the Isles of Scilly (£270.46). Further variation can be seen at CCG level, where 4 out of 106 CCGs actually plan to spend less in 2021/22 than 2020/21. North Lincolnshire would be set to reduce spending by a staggering £48.12 per head if plans are realised, compared to £16.47 in Morecambe Bay, £7.55 in Fylde & Wyre, and £6.99 in Manchester.

Final spend for the year won't be available until the autumn update of Mental Health Watch, but with services facing unprecedented demand since the pandemic, we'll be keeping a close eye on how local areas' budget plans are translated in reality.

## **Some progress on workforce – but not enough**

The latest workforce data for September 2021 confirmed a record number of full-time equivalent psychiatrists at all grades working in the NHS, 3.2% more than the same point in 2020. While the increase of mental health nurses was just 1.2%, the NHS was able to recruit 6.7% more applied psychologists and psychological therapists over the past year. Concerns remain, however, about the slow pace of consultant growth – just 1.0% or 46 FTE posts filled in the year to November 2021. With demand sky high and an ongoing workforce crisis hampering progress, this is clearly not enough.

The next Mental Health Watch update will include the latest results from the NHS staff survey across mental health trusts, offering vital insight into how well the NHS is able to maintain welfare and retain staff.

## **Children and young people's eating disorder services at crisis point**

The much-reported crisis in children and young people's mental health services is also reflected on Mental Health Watch, particularly the indicator on waiting time performance across eating disorder services. At the end of December 2021, a record 1,918 patients were waiting for routine treatment, a 57.7% increase on the same time last year. There were also 203 patients waiting for urgent treatment, the second highest on record and an 136% increase on the same time last year.

This has largely been driven by an enormous increase in referrals, which are working incredibly hard to keep up. Between October and December 2021, 2,460 people received routine treatment and 649 received urgent treatment. While these are slight decreases on the same time last year (3.7% and 7.3% respectively), they still represent substantial increases from two years prior (35.8% and 72.1% respectively).

Commenting on this data in a [recent RCPsych press release](#), Chair of the Child and Adolescent Psychiatry Faculty Dr Elaine Lockhart said: “The government made an ambitious commitment on waiting times, but the pandemic has set us back years. Urgent action is needed to ensure children and young people with eating disorders get the help they need, when they need it.”

### **An update on post-discharge follow up**

The College welcomed the introduction of a national standard of 80% of people discharged from adult acute care being followed up within a 72 hour window, given the evidence base showing the increased risk of patients dying by suicide on days 2 – 3 after discharge from inpatient services.

The latest data for December 2021 showed the poorest performance since the data was originally included with Mental Health Monthly Statistics, at just 73.2%. Our ‘spotlight on’ data briefing for this mental health watch update will delve into this metric in more detail, including identifying the best and worst performing CCGs.

### **IAPT recovery targets missed again**

Recovery rate targets for the Improving Access to Psychological Therapies (IAPT) programme were the first outcome measures introduced across the mental health system. With further standards set to be introduced following the clinical review of standards, it is concerning to see that the 50% threshold for IAPT recovery was not met in the third quarter of 2021/22.

While the target was met for the first time for patients from Black, Asian and Minority Ethnic in the first quarter of 2021/22, it is disappointing to see that it has now been missed for the following two quarters. Performance for the total patient population also dropped below the 50% threshold for the first time since the corresponding quarter in the previous year, highlighting the need to strengthen services.