

The future of mental health

Mental Health Network
NHS CONFEDERATION



Digital technology and the future of NHS mental health services

Rebecca Cotton, Director of Mental Health Policy

About the Mental Health Network

- Part of the NHS Confederation – the membership body for all organisations that commission and provide NHS services.
- We represent 70 providers of mental health services in England – including +90% of NHS Trusts and Foundation Trusts, voluntary sector and independent sector providers.
- Governed by a board of members – including Chief Executives, Chairs, Clinicians and service user and carer representatives.



What we do

- We help shape and challenge national policy and legislation affecting our members.
- We provide members with up to date news and analysis, through briefings and events.
- We also work to identify and spread good practice and innovation in the mental health sector.



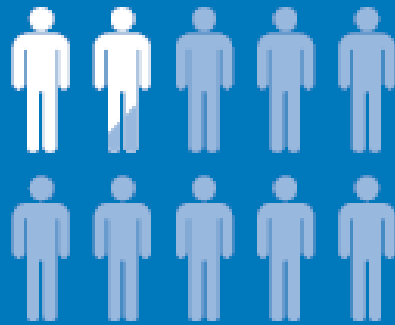
Why is this issue important?

- Digital technology the potential to transform the face of the NHS, and health services around the world.
- 83 per cent of UK homes have internet access.
- UK is one of the most developed eCommerce markets in the world. 72 per cent of all adults have purchased goods or services online, 50 per cent of users are accessing internet banking, and 53 per cent of adults access social media sites, such as Facebook.
- Improving the mental health of the population is one of the major social policy challenges of our time. The Centre for Mental Health estimates that the costs associated with mental health problems in England equals £105 billion a year.



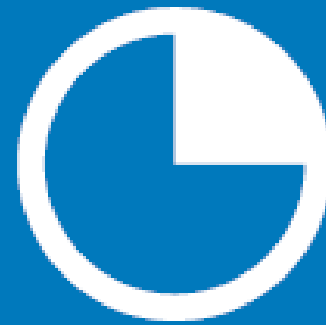


The resource challenge



17.6%

The proportion of the English population meeting the criteria for one common mental disorder has increased from 15.5% in 1993 to 17.6% in 2007.



1/4

Only a quarter of those with depression or anxiety-related mental health problems in England are in treatment.



Trends: numbers of people with mental health problems

- By 2030 there will be approximately 2 million more adults in the UK with mental health problems than today – assuming prevalence rates remain the same.
- But - proportion of people with common mental disorders increased from 15.5 per cent in 1993 to 17.6 per cent in 2007. Will this trend continue?
- The World Health Organisation predict that depression will be second leading cause of global disability burden by 2020.
- As of 2012, there were 800,000 people in the UK with a form of dementia. By 2021 this is projected to rise to 1 million, and then to 1.7 million by 2051.





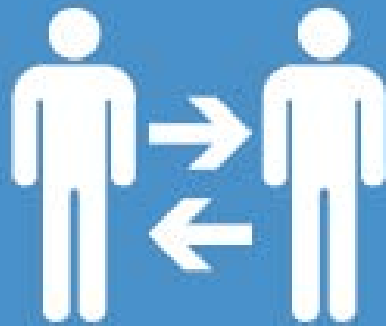
NHS Confederation Member Survey, February '14

- **96%** of MHN members are worried about potential future budget cuts.
- **90%** think there's insufficient investment to meet current service requirements.
- **89%** are concerned about outdated service and workforce models.

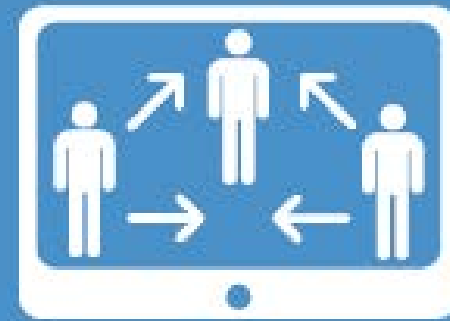
- **Question: What does the NHS need to do to maintain or improve quality if finances stay the same and there is no large scale service change?**
 - **68%** - reduce demand through prevention
 - **41%** - take action on staff costs e.g. continue pay restraint and review terms
 - **31%** - increase efficiency of procurement by the NHS
 - **28%** - find further efficiency savings
 - **25%** - increase pooling of budgets
 - **27%** - introduce rationing of care
 - **14%** - introduce user charges
 - **17%** - sell off NHS estates



Cultural transformation



Orientating services around principles of recovery and personalisation involves recasting relationships between service users and professionals as true partnerships.



Service users and carers are making more of the opportunities presented by technology to communicate with others online, creating peer networks and communities of support, including through purpose-built platforms such as Big White Wall.



A digital revolution?



- Pressure on resources creates a powerful incentive for developing new ways of delivering care and support.
 - Technology is already supporting a cultural transformation.
 - 43% of users have accessed health information online, up from just 18% in 2007.
-
- Meeting the expectations of younger service users will require embracing the digital revolution – choice of provider may become relevant.
 - There are great examples of digital being used in mental health – Clintouch, Buddy, Big White Wall – but we have a long way to go. Much to learn from other countries too.



MHN member survey – digital technology

- Survey held as part of work for forthcoming report for NHS England.
- Survey found that, in general, mental health services in England are still at a very early stages of digital maturity.
- Respondents asked how they currently use digital technology to engage with service users and the public:
 - 83% - online directory of services
 - 75% - website provides general information about mental health conditions.
 - 66% - signpost information online, such as the contacts for local carer groups.
 - 50% - options to access services remotely, for example by telephone.
 - None enabled online appointment booking



MHN member survey – digital technology

- There were indications of an appetite to make greater use of technology – most said they had plans to enable online appointment booking in future and have plans to use online and mobile applications to support service delivery.
- Almost all respondents said that they had plans to provide remote access to services in future, although some said this was not on the immediate horizon.
- Respondents were also asked to identify what barriers existed that were hindering greater use of digital technology. Responses included “financial constraints”, “investment” and “IT literacy” of staff and service users.

Themes from stakeholder interviews and workshop

- Interviews and workshop also held as part of work for forthcoming report for NHS England.
 - **A clear need for change:** *“people want which is very different from what we are currently providing....”*
 - **Opportunity to support recovery and culture change, importance of peer support**
 - **Digital as an opportunity to promote public mental health and wellbeing.**
 - **Must avoid creating a new silo:** *“if we just add digital to each part of the existing system there is a big risk of creating a new world of online digital fragmentation of what we already have...we owe it to service users and to the improvement of the system to think better and deliver more than that...there is a real transformative opportunity here we need to capture”.*
 - **Difficulties identifying and spreading good practice:** *“how do we recognise where good practice exists and how do we make good happen everywhere?”*
 - **Difficulty ‘selling’ into the NHS for commercial organisations**



Themes from stakeholder interviews and workshop

- **Lack of a clear evidence base / evaluation framework:** *“an evaluation process for digital pathways is a key priority if we are to determine the true benefits of digitally enabled interventions”.*
- **Potential professional resistance:** *“many physicians think digital health will make healthcare roles obsolete... this is not the case”.*
- **Potential resistance from users:** *“maintaining the unique value of face-to-face” contact was thought to be important amongst or workshop attendees. One participant suggested that in terms of shifting culture and attitudes it will be necessary to avoid promoting what could be criticised as a “binary idea” of digital vs real world, and rather to “promote [a] complementary approach”.*
- **Investment:** *“financing digital initiatives will be interesting.... I can see that there could be the need for new forms of “transformational funding” and even QIPP funding levers we can use”.*
- **Workforce:** *Concern about the capacity and capability of the workforce to keep pace, and a major area for development.*

- Currently finalising recommendations for the report, which also highlights a number of good practice case studies.
- In the 2013 report, we called for a national framework for e-mental health.
- Recommendations will need to cover the issues raised by the survey, interviews and the workshop, namely:
 1. How can we address these interlinked questions of gathering evidence, strengthening evaluation, and addressing governance and safety?
 2. If we are going to deliver more services remotely, and clinicians are to make best use of apps and other tools, what does this mean for our future workforce?
 3. How can we scale up what works? Much investment at the moment, within the NHS, seems focussed on small scale local projects – is this making best use of the resources we have?



Thank you

rebecca.cotton@nhsconfed.org

[@beckycotton](#)

[@nhsconfed_mhn](#)