

***Mental Health Services:
Impact of Covid-19 and learning so far***
A perspective from Black Country Healthcare NHS FT

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NHS : Our New Trust

Black Country Healthcare
NHS Foundation Trust

Established on 1st April 2020 – A ‘lockdown’ merger

Key facts


3,250
staff


65
total sites


7
acute hospitals


58
community bases


1.16m
population


4
boroughs
Dudley Sandwell
Walsall Wolverhampton


5
divisions

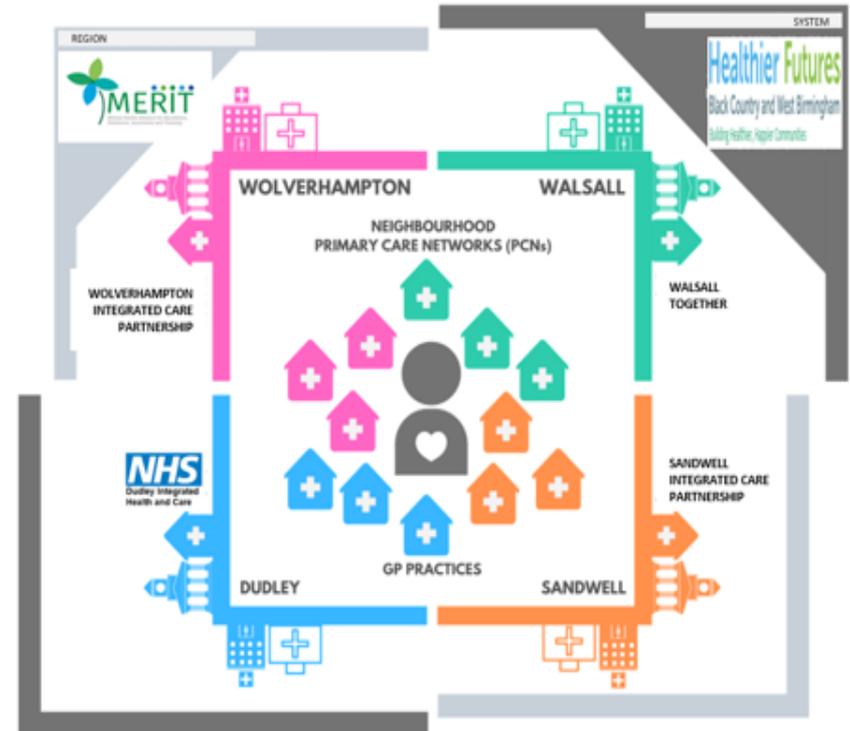

■ Adult mental health


■ Older adult mental health


■ Child and adolescent mental health services (CAMHS) / Eating disorders (ED)


■ Learning disabilities


■ Children, young people and families



OUR COMMUNITY PROUD AND DIVERSE



 **1.16 million people live here**

More people are living longer 

 **Growing refugee / asylum community**

4% households; no one with English as main language

Areas of deprivation; 56% of people accessing mental health services live in most deprived areas of England.

Higher rates than national average for: physically inactive adults, diabetics, smokers, infant mortality, premature respiratory mortality.

20% of accident and emergency attendances are mental health service users, who are only 7% of the population.

Dudley

313,000 people	90.4% White 5.6% Asian 1.7% Black 1.6% Mixed Race 0.7% Other	Four towns and 24 wards	5.3% unemployment
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Traditionally industrial centre of manufacturing, quarrying, and mining, now a shift towards service sector and tourism.

Sandwell

309,000 people	69.9% White 9.2% Asian 5.9% Black 3.3% Mixed Race 1.6% Other	Six towns and 24 wards	7.3% unemployment
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14th most deprived borough in UK, but council and partners have invested for regeneration attracting new SME businesses.

Walsall

269,000 people	78.8% White 15.2% Asian 2.7% Mixed Race 2.3% Black 0.8% Other	Seven towns and 20 wards	6.8% unemployment
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Traditionally home of leather saddle manufacturing, now attracts large businesses, inc. retail storage and distribution.

Wolverhampton

249,500 people	68% White 17.5% Asian 6.9% Black 5.1% Mixed Race 2.5% Other	20 wards; it became a city in 2000	6.5% unemployment
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Traditionally centre for coal mining, steel production, lock making and vehicle manufacture, the economy is still based on engineering, including aerospace, as well service sector.

Figures from 2011 census

Going into Covid-19 from an uneven starting point

Mental Health in the Black Country:

- 56% of people accessing mental health services, live in some of the most **deprived** areas of England;
- A life expectancy gap of approx. **18 years** for men, and **15 years** for women between those in the Black Country who are in contact with mental health services, and those who are not;
- **Depression** rates are higher than the England average;
- Level of **unemployment** for individuals with mental health needs is significantly higher than the rest of the Black Country population;
- Whereas cancer is the leading cause of death for the population as a whole, **circulatory disease** is the most common cause of death for mental health service users in the Black Country.



A national challenge: Mental Health and COVID-19

- Mental Health services have continued to be delivered but with elements of scale-back during the response phase;
- Rates of referrals reduced significantly: (Covid-supressed) – but already seeing significant increase in urgent/crisis needs;
- Impact of the COVID19 pandemic on mental health and wellbeing of all ages: lockdown, access to education, isolation, bereavement unemployment: (Covid-generated)
- Significant amount of work has started nationally and regionally (MERIT) to look at:
 - *Covid-19 impact on population mental health (direct and indirect)*
 - *Subsequent impact on demand for mental health services*
 - *Specific work on ‘at risk’ individuals*

1. 'Rethink' Survey

- 800 people living with mental illness surveyed in April 2020
- **80%** stated current Covid-19 crisis has made their mental health worse
- **69%** attributed this to not being able to see friends and family
- **47%** said reduced support from MH services has contributed to them feeling worse
- **29%** said that their employment situation was a key factor in the deterioration of their mental health

2. International Journal of Social Psychiatry – ‘What does COVID mean for UK mental health care?’ (2020)

- *‘Not since World War II has there been such risk, displacement and change affecting the whole community. This is the first UK mass trauma in the presence of the NHS...’*
- Three main challenges for services:
 - Prolonged exposure of front line staff to trauma at scale
 - Social distancing having a disproportionately negative impact on already vulnerable groups
 - The impact of significant economic downturn on mental health, including suicide rates

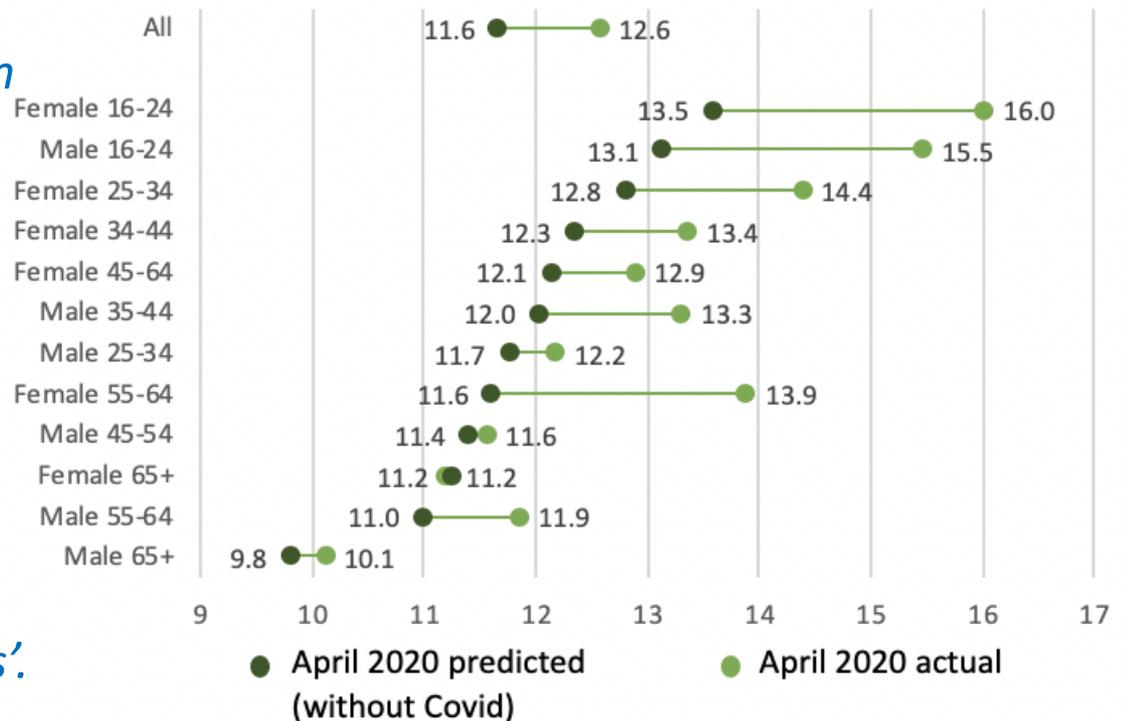
3. Institute for Fiscal Studies (June 2020)

'The COVID-19 episode has had substantial negative impacts on mental health across the population. The biggest impacts have been on the gender and age groups – broadly women and the young – that already had relatively low levels of mental health.

Pre-existing inequalities in mental health have therefore been

exacerbated by the crisis'.

Figure 2. Average overall mental health (GHQ-12) scores by age and sex, April 2020. Higher scores indicate worse mental health



How has our Trust responded?

- Operating in 'Major Incident Mode'
- Rethink of inpatient services – reduce occupancy to maximise safety
- Community support offered remotely where possible
- Getting PPE right!
- Using technology to facilitate home working
- Focus on clear communications and staff engagement
- Clear processes for step down/up of services, using business continuity approach and impact assessment
- Working with partners across the Black Country inc. system-wide workforce wellbeing offer
- Set up new 24/7 urgent MH support line

So.... What next?

- Modelling likely future demand on services
- Locking-in changes that have added-value
- How can we take a whole system approach to exploring opportunities for improving population health – building upon and sustaining new ways of working seen in recent months?
- Where do we focus our change efforts to have the greatest impact? – scenario modelling
- What changed behaviours / processes are needed across the system to accelerate the pace of change?
- Maximising investment inc. from the NHS Long Term Plan for mental health to support our communities who are now more vulnerable than ever? – Focus on core community services
- A new relationship with social care, voluntary and independent sector
- Developing our estate, and tackling our workforce shortage challenges
- **Not just restoration & recovery...**

**Re-imagining
our future**

Thank you – questions?

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