New Horizons: Towards a shared vision for mental health: Consultation

Department of Health: Mental Health Division

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Target audience: PCT CEs, NHS Trust CEs, SHA CEs, Care Trust CEs, Foundation Trust CEs, Medical Directors, Directors of PH, Directors of Nursing, local authority CEs, Directors of Adult SSs, PCT Chairs, NHS Trust Board Chairs, Special HA CEs, Directors of Finance, allied health professionals, GPs, communications leads, emergency care leads, Directors of Children's SSs, public health leads and specialists, National Mental Health Development Unit

Circulation list: Organisations of services users, other government departments, headteachers, employers, Royal Colleges

Description: New Horizons: public consultation on a new vision for mental health and well-being to help develop the promotion of mental health and well-being across the population, improve the quality and accessibility of services, and to enable SHAs to deliver their regional visions, in a way that reflects the changed nature of the NHS

Timing: Public consultation closes on Thursday 15 October 2009

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Ministerial foreword

I am proud and pleased to present for consultation *New Horizons: Towards a shared vision for mental health*.

Good mental health is fundamental to the well-being and prosperity of our nation. And we know it is linked with good physical health and many other benefits for individuals and communities.

The radical reform of mental health services in England over the last 10 years has been a real success story – not only has investment in these services increased, accounting for almost one pound out of every seven that the NHS spends, but also the quality of care they offer has improved and is recognised internationally.

Our blueprint for this transformation has been the 1999 National Service Framework for Mental Health (NSF), but it is fast approaching the end of its 10-year lifespan. Now we need a new approach: one that builds on the NSF’s successes by supporting the local development of higher quality, more personalised services, and that also moves the agenda on by building a cross-government, multi-agency alliance that can tackle the root causes of poor mental health and get support to people where and when they most need it. *New Horizons* sets out to do just that.

The world has changed since 1999, and we cannot depend on the scale of extra investment that followed in the wake of the NSF. We do not need to. In *New Horizons* we discuss how we could make enormous progress by raising our game on prevention, intervening earlier, being more innovative and collaborative, improving productivity and getting maximum value for individuals and communities from the resources we invest.

We are entering an exciting period in health and social care, when people will increasingly have more control over their health, their care and treatment. More and more, the job of professionals will be to support them in this. Our job in government is to help set this direction, while at the same time recognising the particular challenges in mental health.

I want *New Horizons* to make a big difference to the way we promote equality. There are inequalities in mental health and in access to services. People with mental health problems still experience unjustifiable discrimination and avoidable inequalities in their physical health. *New Horizons* will build on and extend the excellent work that has begun in those areas in recent years.

The process of developing *New Horizons* started almost two years ago, and I am immensely grateful to the coalition of partners in the professions, third sector, health services and local government whose help and advice have been essential in getting us to this point. I hope many more people will respond now with their views and ideas. Together, we can create a vision that guides us to a healthier, fairer and equal society.

Phil Hope, MP
Minister of State for Care Services
Key themes

For more than 18 months, the New Horizons team and I have been meeting with a wide range of people up and down the country. We’ve been listening to their hopes, ideas and aspirations for the future of mental health in England from 2010.

A wide spectrum of views and a huge number of good ideas have been forthcoming from people who use mental health services, from carers, commissioners, clinicians and many more besides. Combining this with growing evidence about well-being and resilience, as well as learning from the best services in the country today, we have produced this report as a basis for further consultation.

Already, a number of key themes are emerging:

• **prevention and public mental health** – recognising the need to prevent as well as treat mental health problems and promote mental health and well-being

• **stigma** – strengthening our focus on social inclusion and tackling stigma and discrimination wherever they occur

• **early intervention** – expanding the principle of early intervention to improve long-term outcomes

• **personalised care** – ensuring that care is based on individuals’ needs and wishes, leading to recovery

• **multi-agency commissioning/collaboration** – working to achieve a joint approach between local authorities, the NHS and others, mirrored by cross-government collaboration

• **innovation** – seeking out new and dynamic ways to achieve our objectives based on research and new technologies

• **value for money** – delivering cost-effective and innovative services in a period of recession

• **strengthening transition** – improving the often difficult transition from child and adolescent mental health services to adult services, for those with continuing needs.

We are keen to know what you think are the answers to the questions we face, so please spare some time, if you can, to respond to the consultation. See pages 121–123 for how to respond in writing, online or via a local or national organisation.

And thank you for your interest and involvement.

Louis Appleby
National Clinical Director for Mental Health
Our vision

Our mental health, like our physical health, will vary throughout our lives – whether we’re young or old, working or not, whatever we do and wherever we live. It is important that we all understand what we need to do to build and maintain good mental health right from the start, from infancy into adulthood and older age, for individuals, families and communities.

In 2020 most adults will understand the importance of mental well-being to their full and productive functioning in society, to their physical health, and to their ability to make healthy lifestyle choices. They will also understand some of the factors that affect their mental well-being, and will have developed their own everyday ways for taking care of it. Children will increasingly be taught in school about the importance of mental well-being and how to nurture and preserve it, and a range of local services will support their well-being so that problems are detected early. Mental health needs will be identified at an early stage so that, for example, treatment and support can be provided while the individual is an adolescent, thus reducing the chances that mental health problems will continue and adversely affect their adult life.

In 2020 physical health and mental well-being will be seen as equal priorities, and the links between them recognised as key to maintaining physical and mental health. Lifestyle and well-being services will be widespread. Psychological and family treatments will be available to all who could benefit from them. Drug treatments will be individually tailored so they have fewer adverse effects. Services will use innovative technologies to promote independent living and the effectiveness of treatment.

**Personalised services**

People with mental health problems, and those at risk, will receive personalised care packages designed to meet their individual needs. They will be able to make decisions about their care, treatment and goals for recovery, as well as to monitor their own condition.

**Equality**

In 2020 all individuals will be treated with respect in an inclusive society, whatever their age, background or circumstances. Public services will recognise the importance of environments, services and amenities that maximise independence and opportunities for older people to participate and contribute as equal, active citizens. Services will be attuned to the needs and wishes of individuals and communities and will actively promote equality. Inequalities for black and minority ethnic groups in access to and experience of mental health care will have disappeared.
Stigma and understanding

In 2020 the stigma attached to mental health will have declined dramatically. People will know that mental health problems can affect anyone, at any time, and they will also understand that these problems have causes and can be treated, just like physical illnesses. People will know some of the signs to look out for in themselves and in their friends and families and will have a better understanding of how an interplay of several factors can lead to psychological, social and physical difficulties. They will know that treatments give most chance of recovery if help is sought early. They will know that people who have had, or have, mental health problems are no different from people with a physical health problem; with the right amount of practical and emotional support from friends, family, colleagues and employers, they can live independently, enjoy a fulfilling family life, participate fully in their community, earn their living and contribute to society. People will know how to access support and information so they too can play their part in supporting others with mental health problems. Families and carers will be welcomed as partners by services and will be listened to and supported by professionals.

High-quality care for all

In 2020 services to treat and care for people with mental health problems, including personality disorder, will be accessible to all who need them, will be based on the best available evidence, and will be aimed at regaining hope and recovery of psychological and social functioning and good physical health. The effectiveness and acceptability of services will be assessed frequently, against indicators agreed between individual clinicians and their patients, and used to help the service user plan their next steps towards recovery, as well as to monitor their progress. Recovery-based services will ensure that people unable to work because of mental health problems will have opportunities to take part in meaningful activities and to contribute to and participate in society.

No health without mental health

In 2020 people with mental health problems will no longer be at greater risk of physical ill health than the rest of the population. For example, rates of smoking, obesity, cardiovascular disease and diabetes will have reduced to levels closer to those of the general population.

We know there is an association between poverty and mental and physical health inequalities in some groups and communities. In 2020 this interaction will be better understood and addressed. Local and national programmes to improve employment, housing, education, transport and health services will be based on a good understanding of the needs, assets and special characteristics of each community. Local and national government will take into account the impact of all policies and programmes on the mental health of individuals and communities, and seek to redress social inequalities.

Mental health is everyone’s business. In 2020 mental health will be seen as an important asset for our society, one in which we all have an investment and to which we all – individuals, employers, the third and statutory sectors, local authorities, the health services and all government departments – have an important contribution to make.
Introduction and executive summary

This document forms a crucial part of the consultation on a new cross-government vision for mental health and well-being in England for 2010 onwards – a consultation that began in late 2007. While it describes some clear principles and ideas that have emerged during those discussions, it is not a complete and final text. There are a number of important questions still to be resolved and the response to those and the rest of our proposals will have a strong influence on the final version. All the aspirations expressed in New Horizons should be seen in the context of the financial constraints that the Department of Health and the National Health Service will face over the next three to five years.

New Horizons will form a programme of action to advance the twin aims of:

• improving the mental health and well-being of the population
• improving the quality and accessibility of services for people with poor mental health.

The programme takes a life-course approach, from laying down the foundations of good mental health in childhood through to maintaining mental resilience into older age; from prevention of mental health problems, through effective treatment to recovery.

This consultation document forms an important part of the New Horizons programme. It sets out:

• the continued high profile of mental health as a Department of Health priority
• an agreed set of key values and principles for the NHS, local authorities and other government departments to guide service design and delivery
• what we have learnt from the National Service Framework (NSF) and its implementation over the past 10 years.¹, ²

It seeks, through consultation, to discover:

• how these improvements can be maintained and developed further in a new era of devolved systems and World Class Commissioning,³ and in the current economic climate
• how we can use the new emphasis on personalisation, choice, quality and empowerment to improve access to services and reduce inequalities in outcomes
• how we can use our experience of partnership working and multi-disciplinary approaches to extend our work to tackling the causes of mental health problems still higher upstream, at primary prevention level
• where the opportunities for innovation are
• how good mental health and well-being can become a priority across government.
Building on the National Service Framework for Mental Health

In the 10 years since the NSF was published, mental health services have seen many improvements. The World Health Organization, reviewing mental health care in European countries, concluded recently that services in England are increasingly seen across Europe as the model to follow. The key changes have been:

- reform of community care – over 700 assertive outreach, crisis resolution and early intervention teams have been set up. National and local evaluations have demonstrated reduced hospital admissions, improved service user and carer satisfaction, and reduced costs (see Better mental health care for adults, section 4)
- suicide prevention – the suicide rate has fallen to the lowest on record, and one of the lowest in Europe. Following a 25-year rise, suicide in young men has fallen for the past seven years; and suicide in mental health inpatients is down by 30 per cent
- additional resources – from 1999 to 2008, increases have occurred in several staff groups – psychiatrists (46 per cent), mental health nurses (24 per cent) and clinical psychologists (61 per cent). Over the same period investment in mental health has increased by over £2 billion.7,8
- inpatient care – many inpatient units have been rebuilt or refurbished to a modern design, informed by the views of staff and patients; at least 70 per cent of inpatient beds are now in single rooms; wards are smoke-free – a sign of greater attention to physical health
- modern treatments – the use of modern antipsychotic and antidepressant drugs has greatly increased in response to patient preference. The availability of psychological therapies is now being expanded11
- patient opinion – the national patient survey shows that 79 per cent of patients receiving treatment in the community view their care as good, very good or excellent. Around 90 per cent report positive views of how they are treated by staff, for example being listened to and treated with respect.12

Separately, as part of the National Service Framework for Children, Young People and Maternity Services, a CAMHS (Child and Adolescent Mental Health Services) Standard was published in 2004.
Through Public Service Agreement 12 (to improve the health and well-being of children and young people), the Government is committed to improving the mental and emotional health and well-being of children and young people. The independent CAMHS review made recommendations to improve children and young people's mental health and psychological well-being. The National Advisory Council is advising Government on implementing the recommendations and will hold Government to account on delivery.

An amended Mental Health Act came into effect in 2007. It introduces:

• a power to require patients in the community who are at high risk to receive treatment (supervised community treatment)
• removal of the ‘treatability test’ for patients with personality disorders; these patients can now be treated under the Act if appropriate therapies are available
• an explicit requirement for treatment to have a therapeutic purpose
• a duty on mental health trusts to provide age-appropriate accommodation for people under 18 who require hospital admission
• a duty on trusts to provide specialist advocacy support for patients detained under the Act.

Building on these developments means maintaining the momentum of reform, improving access to and the quality of services for all adults of all ages, extending policy and practice to include prevention, promoting mental health and building mental resilience and well-being.

**What is mental health?**

Good mental health is more than the absence or management of mental health problems; it is the foundation for well-being and effective functioning both for individuals and their communities.

Mental well-being is about our ability to cope with life’s problems and make the most of life’s opportunities; it is about feeling good and functioning well, as individuals and collectively.

Mental health problems generally refer to difficulties we may experience with our mental health that affect us in our everyday lives. Mental health problems can affect the way we feel, the way we think and the way we function. Mental health problems include conditions described as personality disorders and also dementia. They can be mild or serious, fleeting or long-lasting.

Mental illness refers to more serious mental health problems that often require treatment in specialist services. Someone with a serious mental illness may have long periods when they are well and are able to manage their illness. Many people with mild and serious mental health problems are able to live productive, fulfilling lives.

Someone can have a mental health problem and still enjoy good mental well-being, just as people with a physical illness or long-term disability can live a productive life and enjoy good well-being. Equally, someone can have poor mental well-being, but have no clinically identifiable mental health problem.
No health without mental health

Building mental resilience in individuals, families and communities is everyone’s business. Mental well-being is fundamental to a person’s quality of life. It is linked to good physical health and many other benefits, for individuals and communities. These include better cognitive and physical functioning, increased productivity, better interpersonal relationships, longer life expectancy and greater capacity to deal with stress and adversity.14

Communities and environments that support mental well-being are good for all of us, including people with mental health problems.14, 15

The causes of mental ill health are complex but their impact can be reduced by intervening quickly and effectively when people are showing early signs of problems. This can be done by identifying and providing appropriate support to those at higher risk of mental health problems, and by the provision of timely and good quality services when people do become unwell. There is also increasing evidence of the importance of resilience as the foundation on which is built the capacity of individuals and communities to cope with and support each other through life’s adversities.14, 15

As set out in the NHS Constitution, promoting mental well-being is at the very heart of the NHS.16

‘The NHS belongs to the people. It is there to improve our health and well-being, supporting us to keep mentally and physically well, to get better when we are ill and, when we cannot fully recover, to stay as well as we can to the end of our lives. It works at the limit of science – bringing the highest levels of human knowledge and skill to save lives and improve health. It touches our lives at times of basic human need, when care and compassion are what matters most.’

Why New Horizons?

In 1999 the Government published the National Service Framework for Mental Health. Much progress has been made and has transformed the experience of many people affected by severe mental health problems.

New Horizons aims to build on these foundations by setting out the next stage in the Government’s strategy for improving mental health in England. It will take a cross-government approach and looks to the wider health service, local authorities, employers, education and criminal justice agencies to play their part in achieving its aims. We should not see mental health as the responsibility solely of the Department of Health or mental health services. New Horizons also recognises the potential for reducing the burden and long-term consequences of mental health problems by setting out a framework for early intervention and promoting well-being across society.
New Horizons aims to:

• take forward what we have learned in the lifetime of the NSF about what works, and broaden our scope to include all groups in society, including children and young people and older people

• build on the principles and values set out in the NHS Constitution

• support the delivery of the NHS Next Stage Review (the Darzi report) and its vision of local commissioners working with providers, the public and service users to devise local approaches to mental health and mental health care

• use the growing understanding of the wider determinants and social consequences of mental health problems and mental well-being to influence priorities in other parts of central and local government

• reinforce commitment to key mental health policy aims, including delivering race equality and improving access to psychological therapies.

A public mental health framework

In addition to supporting the continued transformation of specialist services for people with mental health problems, New Horizons sets out the Government’s commitment to promoting whole population mental health and well-being.

A public mental health framework has been developed to support this work (see Figure 1).

The framework can be adapted at local or regional levels to facilitate partnership working. It draws on established public health, ecological and psychological principles. It identifies the root causes of poor mental health to identify the key risk factors and at-risk groups on which we need to focus to address inequalities in health. It also sets out the evidence base for interventions and promising approaches that can be adapted to suit different settings.

The public health framework for mental health supports and is supported by the Department of Health’s overall approach for promoting health and well-being, outlined in Figure 2.
The vision
To create flourishing and connected communities through the promotion of well-being and resilience and the reduction of inequalities.
Figure 2: An approach to tackling mental health problems and risky behaviours, such as smoking and obesity

We aim to be comprehensive and strategic in our approach, and to get the balance right between ‘state’ and ‘no state’.

We have developed an approach with four areas of activity, as action on many fronts is needed to tackle problems such as obesity, smoking and alcohol misuse.

- Informing and supporting people to make healthier and more responsive choices
- Creating an environment in which the healthier and more responsible choice is the easier choice
- Identifying, advising and treating those at risk
- A delivery system that effectively prioritises and delivers action to reduce harmful behaviours

The continuing need to improve mental health services

Mental health problems are extremely common: one in six adults will have a mental health problem at any one time, and for half of these people the problem will last longer than a year. For some people, mental health problems last for many years, particularly if inadequately treated.

The social and financial costs of mental health problems are immense. The burden on individuals, families, communities and society as a whole includes the psychological distress, the impact on physical health, the social consequences of mental health problems, and the financial and economic costs.

The NHS spends 14 per cent of its annual budget on mental health services. Recent estimates put the full economic cost at around £77 billion, mostly due to lost productivity.

Improving mental health brings benefits to individuals and society and we know a great deal about what works. There is a clear association between good mental health and better outcomes across a number of domains: years of life, physical health, educational achievement, criminality and employment status.

There is now increasing evidence that investment in particular interventions – in psychological therapies, for example, and tackling childhood conduct disorder – can produce much greater savings over time.
Mental health, equality and human rights

‘The circumstances in which people are born, live, work and age are the fundamental drivers of health and health inequity.’

There are inequalities in mental health, inequalities in experience of mental health care and inequalities that arise from having a mental health problem. Government and public services share a duty – moral and legal – not just to avoid widening these damaging and divisive fault-lines but to act to reduce them. New Horizons is mindful of that duty.

The links between poverty, social deprivation and mental health problems are clear. There is also a strong association between income inequality – relative poverty – and poor mental well-being and health. People with mental health problems tend to have fewer qualifications, find it harder to get work, have lower incomes, may well be homeless and are more likely to live in areas of high socio-economic deprivation. Fifteen per cent of children in the lowest socio-economic group develop mental health problems, compared with just 5 per cent of children in the highest. Life for many in black and minority ethnic communities can be more difficult than for the majority population, and that too is reflected in the incidence of mental health problems.

Women are more likely to experience common mental health problems such as depression and anxiety – around 20 per cent of women at any one time compared with about 12.5 per cent of men. Men, however, have higher rates of suicide and addictions. There is emerging evidence that lesbian, gay, bisexual and transgender people are at higher risk of some mental health problems and that services for older people are lagging behind those for younger adults.

Physical health affects our mental health, and vice versa. The most mentally healthy people also have the lowest rates of cardiovascular disease. Conversely, people with a physical illness are more likely to develop a mental health problem – an estimated 70 per cent of general hospital beds are occupied by older people, of whom up to a half are assessed as suffering from cognitive problems and a third with depression.

People with severe mental health problems die younger than other people. Some studies have shown that on average it is 25 years earlier. Such people also develop illnesses such as strokes and coronary heart disease before the age of 55 more often. They can also find it harder to access screening services and other primary care services.
Many of the root causes of inequality are beyond the direct control of the health and social care sectors, and some present continuing challenges to Government as a whole. That is not to say that we are powerless to intervene – on the contrary, New Horizons aims to show how the NHS, social services and partners across government can respond to these challenges and work towards a healthier, fairer and more equal society.

The approach to consultation

This document draws on a large body of work, including information from a number of engagement and listening events held across the country and involving a great number of different stakeholders. It builds on the ‘visions’ for mental health produced by the Strategic Health Authority Clinical Pathway Groups and has been enriched by many other reports, reviews and studies. These include the Future Vision Coalition discussion paper A Future Vision for Mental Health (published July 2009); Moving Forwards, the Next Stage Review Mental Health Care Pathway Group report and the SHA vision reports; the Health Care Commission’s national study of older people’s mental health services, Equality in Later Life; the forthcoming cross-government Ageing Strategy, due to be published in 2009; the Healthy Lives, Brighter Futures strategy for children and young people’s health; the first ever cross-government National Mental Health and Employment Strategy, due to be published in 2009; and Mental Capital and Well-being, the report of the Foresight Project.

Guide to sections

1. Guiding values
Mental health is about equality and social justice. In this section we describe the underpinning values that will guide a high-quality mental health service that both takes a lead on promoting and protecting mental health across all age groups and provides safe, effective, equitable and acceptable treatments to people with mental health problems.

2. Laying the foundations
This section outlines approaches to promoting positive mental health among infants, children and young people in order to lay sound foundations for mental health and well-being into adulthood and older age.

3. Transition from adolescence to adulthood
Transition from childhood to adulthood presents multiple challenges for mental health and well-being. Here we explore approaches to improving services and support for young people at this critical time.

4. Better mental health and well-being for adults
How we care for and are able to safeguard our mental health and well-being is central to our adult lives. This section outlines what we can do, as individuals and as a society, to improve the mental well-being of all adults.
5. Better mental health care for adults
This section builds on the achievements of the NSF towards high-quality, inclusive mental health care for adults with mental health problems. It describes care pathways that respect the autonomy and dignity of individuals, families and carers and that support recovery.

6. Older adults
The sections on better mental well-being and mental health care apply to all adults of all ages. This section describes additional approaches to promoting the mental health and well-being of older adults and to providing high-quality, non-discriminatory mental health care.

7. How we will get there
In this final section we outline the levers and enablers that will ensure we have a high-quality mental health service and a public mental health framework that supports mental well-being across all communities and all ages.

Consultation questions and how to respond
Finally, we are keen to hear your views on a number of issues. At the back of this document we outline important questions, the answers to which will help shape New Horizons. Please see page 121.
## References


7. Mental Health Strategies [www.mentalhealthstrategies.co.uk](www.mentalhealthstrategies.co.uk)

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