

# Overview of Stepping Forward to 2020/21: The Mental Health Workforce Plan for England

**Neil McLauchlan**  
**Local Director (North West)**



Developing people  
for health and  
healthcare

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# National Context

Mental Health is one of four clinical priority areas set out in the Five Year Forward View (FYFV), and the Mental Health Delivery Plan (MHDP), investing £1 billion to deliver evidence based care to one million more people by 2020. FYFV Mental Health Priorities:

- Children and young people's mental health
- Perinatal mental health
- Adult mental health: common mental health problems
- Adult mental health: community, acute and crisis care
- Adult mental health: secure care pathway
- Health and justice
- Suicide prevention

# Purpose

Following the publication of The *Five Year Forward View for Mental Health*, the Government has committed to a more proactive and preventative approach to mental health by investing £1bn1 in:

- Improved access to services at an earlier stage
- Services accessible at the right time
- Services delivered in a more integrated way
- Embedding mental health services into the NHS

# Key Deliverables

We need to get to all STPs delivering their share of...

70,000 more **children** will access evidence based mental health care interventions

Intensive home treatment will be available in every part of England as an alternative to hospital.

**Older People**

No acute hospital is without all-age mental health liaison services, and at least 50% are meeting the 'core 24' service standard

**Older People**

At least 30,000 more women each year can access evidence-based specialist perinatal mental health care

10% reduction in suicide and all areas to have multi-agency suicide prevention plans in place by 2017

**Older People**

Increase access to evidence-based psychological therapies to reach 25% of need, helping 600,000 more people per year

**Older People**

The number of people with SMI who can access evidence based Individual Placement and Support (IPS) will have doubled

280,000 people with SMI will have access to evidence based physical health checks and interventions

**Older People**

60% people experiencing a first episode of psychosis will access NICE concordant care within 2 weeks including **children**

Inappropriate out of area placements (OAPs) will have been eliminated for adult acute mental health care

New models of care for tertiary MH will deliver quality care close to home reduced inpatient spend, increased community provision including for **children** and young people

There will be the right number of CAMHS T4 beds in the right place reducing the number of inappropriate out of area placements for **children** and young people

# Current MH Workforce

*Health Education England*

- The NHS currently funds over 214000 posts to provide specialist mental health services in England. Just over 20,000 of these are vacancies
- Approximately 194,000 people are substantively employed by the NHS to care for people who need mental health services
- In addition, attrition rates for all mental health staff are rising, the number of people leaving Mental Health Trusts has risen from 10.5% in 2012/13 to 13.6% in 2015/16 (compared to 8.6% in secondary physical care services). This means that the NHS loses more than 10,000 mental health staff each year

# Workforce Strategy focused on the following workforces

1. Mental Health nursing workforce
2. Medical workforce
3. Wider workforce (psychology and psychological therapies – including adult IAPT, Occupational Therapy and other Allied Health Professions, and new roles)

## **The Mental Health nursing workforce**

- With 67,800 posts in 2016, highest number of qualified staff.
- The number of posts for qualified nurses available has fallen in recent years. In 2016 it was nearly 12% below the 2009 level, in contrast to nursing as a whole which has grown over the same period

## **The Mental Health medical workforce**

- Currently 11,400 medical posts in mental health services of which 5,400 are consultants).
- Of these 1,400 (12%) are vacant including 700 (13%) consultants.
- Although the medical workforce in mental health has grown in recent years, there has been lower growth in the numbers of psychiatrists employed relative to the wider medical workforce

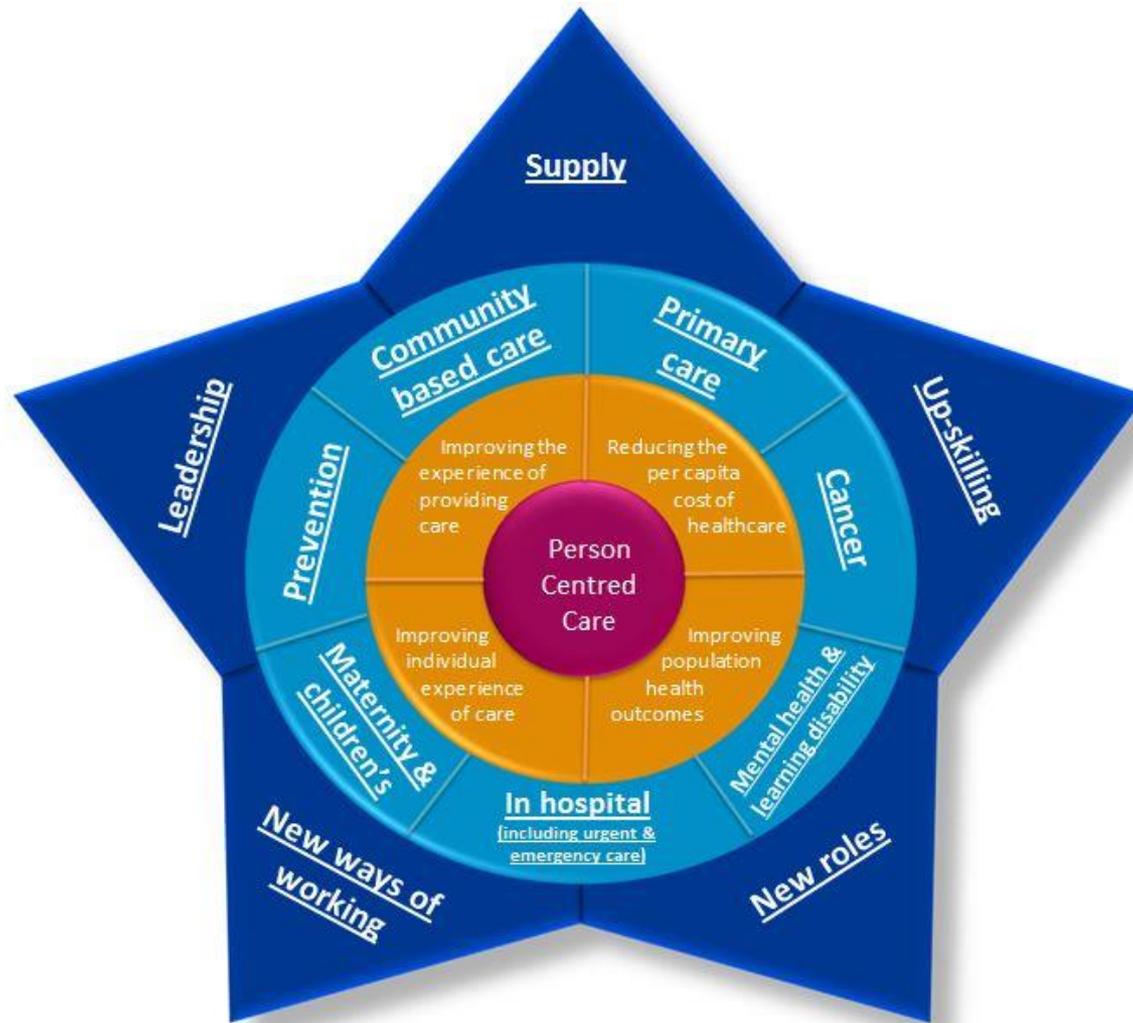
## **The Psychology and psychological therapy workforce**

- There are 10,000 clinical psychologists (registered with HCPC), most of whom primarily undertake NHS work
- Smaller numbers of counselling psychologists (1,900) and forensic psychologists (800)8.
- There are approximately 29,000 psychological therapists working across the health and wellbeing system (all sectors)
- 7000 IAPT therapists (including 1990 PWP and 4000 HIT)
- The *Five Year Forward View for Mental Health* requires significant expansion of the psychology and psychological therapies workforce to deliver greater access to psychological healthcare – up to 4500 new therapists including 3000 in primary care.

## **Occupational Therapy**

- There are currently 38,000 Occupational Therapists (registered with HCPC). Whilst it is not possible to know how many of these are working within mental health services, it represents a significant part of the total, and it is a key and expanding workforce which is growing.

# The STAR



# Workforce Transformation

Additional 5000 clinical staff including

- nursing associates
- physician associates
- Telephone triage staff
- Advanced Clinical Practitioners

Other roles including:

- Early intervention workers
- MH promotion and prevention training for public health workforce
- Increasing retention
- Increase MH skills in physical care workforce and vice versa
- MH Clinical Pharmacists

# The NHS Needs to focus more on:

- Providing more person-centred care.
- More on retaining our existing staff.
- Investing in the skills and development of existing staff.
- Expanding the number of staff in mental health services.
- Supporting staff to work flexibly across boundaries and in increasingly integrated settings.

## How we will get there: agreed actions

1. Producing good mental health
2. Identifying and responding as soon as possible to MH and physical health problems
3. Retaining and supporting our existing staff
4. Release more time for staff to deliver care
5. Return to Practice
6. International recruitment
7. New skills, roles and ways of working

1. Expanding pool of future staff
2. Attracting people to work in MH
3. Increase numbers of applicants to training
4. Supporting and retaining trainees
5. Better intelligence about the MH workforce
6. Compendium of best practice
7. Robust Workforce Plans