

Mental Health

Introduction

The term Mental Health covers a broad range of conditions, illnesses as well as encompassing positive mental health and wellbeing. The WHO definition of mental health is

“...state of wellbeing in which the individual realises his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community”.

Mental health problems affect around one in four people ranging from depression and anxiety to more rare conditions such as schizophrenia and bipolar disorder. Maintaining good mental health is important and impacts on physical health as well as many other aspects of people's lives.

Whilst mental health problems are relatively common, they are often hidden as stigma is still a concern which means many people are not accessing the services they need.

In order to improve the mental health of the population we need to focus on the wider determinants of good mental health.

Main Issues

The estimated prevalence of common mental health disorders, this will include depression and anxiety disorders, for those aged 16 years and above in Hartlepool is 19.3%.

Estimated prevalence of common mental disorders: % of population aged 16 & over 2017

Percentage point - per 100

Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	–	7,609,582	16.9*	16.2	18.0
North East region	–	395,580	18.2*	17.4	19.5
Middlesbrough	–	21,881	19.6*	18.4	21.3
Sunderland	–	44,107	19.3*	18.3	20.7
Hartlepool	–	14,488	19.3*	18.2	20.8
Gateshead	–	32,114	19.2*	18.2	20.7
South Tyneside	–	23,537	19.1*	18.1	20.5
Newcastle upon Tyne	–	46,207	18.9*	17.9	20.5
County Durham	–	79,279	18.3*	17.4	19.6
Redcar and Cleveland	–	20,183	18.1*	17.2	19.4
Darlington	–	15,026	17.4*	16.6	18.6
North Tyneside	–	29,082	17.3*	16.5	18.5
Stockton-on-Tees	–	26,825	17.0*	16.2	18.3
Northumberland	–	42,851	16.1*	15.4	17.2

Source: APMS

This is the third highest level in the north east, and above both the regional and England averages. For those aged 65 years and above the prevalence estimate is 12.0%, which is the 2nd highest in the north east region.

Estimated prevalence of common mental disorders: % of population aged 65 & over 2017

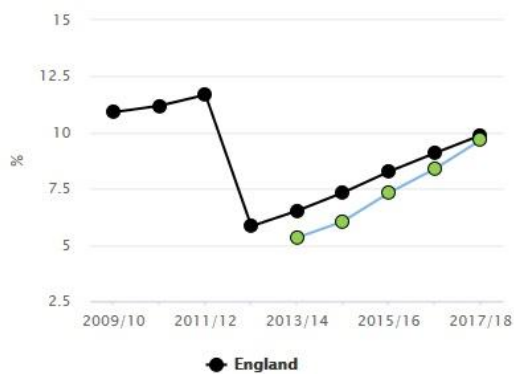
Percentage point - per 100

Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	–	1,027,792	10.2*	9.1	11.9
North East region	–	58,266	11.3*	9.9	13.3
Sunderland	–	6,412	12.1*	10.5	14.3
Hartlepool	–	2,128	12.0*	10.3	14.5
South Tyneside	–	3,557	12.0*	10.4	14.3
Gateshead	–	4,624	11.8*	10.3	14.1
Middlesbrough	–	2,663	11.8*	10.2	14.2
County Durham	–	12,428	11.6*	10.2	13.7
Newcastle upon Tyne	–	4,917	11.5*	10.0	13.7
Redcar and Cleveland	–	3,430	11.4*	10.1	13.5
Darlington	–	2,280	10.7*	9.5	12.5
North Tyneside	–	4,315	10.7*	9.5	12.4
Stockton-on-Tees	–	3,669	10.5*	9.3	12.2
Northumberland	–	7,845	10.3*	9.2	11.9

Source: APMS

This is again above both the regional and England averages.

Looking specifically at depression, the recorded prevalence in Hartlepool has remained better than the national average across its five year recording period.

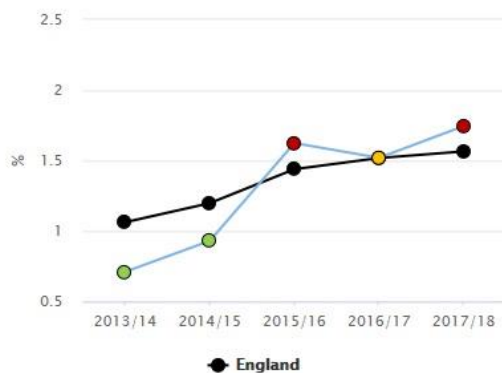


Recent trend: ↑

Period	Hartlepool				North East region	England
	Count	Value	Lower CI	Upper CI		
2009/10	-	-	-	-	-	10.9%
2010/11	-	-	-	-	-	11.2%
2011/12	-	-	-	-	-	11.7%
2012/13	-	-	-	-	-	5.8%
2013/14	4,017	5.3%	5.2%	5.5%	7.2%*	6.5%
2014/15	4,580	6.1%	5.9%	6.2%	8.1%	7.3%
2015/16	5,551	7.3%	7.1%	7.5%	9.1%	8.3%
2016/17	6,367	8.4%	8.2%	8.6%	10.0%	9.1%
2017/18	7,366	9.7%	9.5%	9.9%	11.0%	9.9%

Source: Quality and Outcomes Framework (QOF), NHS Digital

However the gap between Hartlepool and the England average has fallen year on year from 1.2% in 2014/15 to 0.2% in 2017/18. At the same time the rate of new depression registrations in Hartlepool has moved from a position of superiority to the England average to one of inferiority.



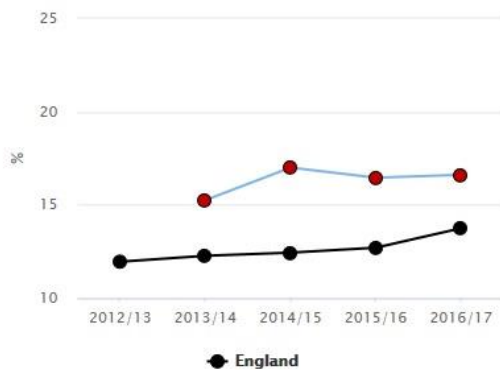
Recent trend: ↑

Period	Hartlepool				North East region	England
	Count	Value	Lower CI	Upper CI		
2013/14	536	0.7%	0.7%	0.8%	1.1%*	1.1%
2014/15	704	0.9%	0.9%	1.0%	1.3%*	1.2%
2015/16	1,233	1.6%	1.5%	1.7%	1.6%*	1.4%
2016/17	1,154	1.5%*	1.4%	1.6%	1.6%*	1.5%*
2017/18	1,330	1.7%	1.7%	1.8%	1.7%	1.6%

Source: Quality and Outcomes Framework (QOF), NHS Digital

New registrations in 2013/14 were at 0.7% of GP practice registers, which was 0.4% below both the England and north east regional averages. By 2017/18 this had increased to 1.7%, which is the same as the north east regional average and 0.1% above the England average.

The annual GP Patient Survey (GPPS) has consistently shown that response in Hartlepool demonstrate a higher than average level of depression and anxiety in patients.



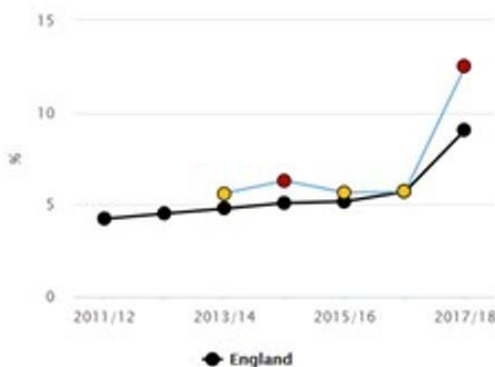
Recent trend: -

Period	Hartlepool				North East region	England
	Count	Value	Lower CI	Upper CI		
2012/13	-	-	-	-	-	12.0%
2013/14	225	15.3%	13.5%	17.2%	-	12.3%
2014/15	241	17.0%	15.1%	19.0%	-	12.4%
2015/16	226	16.5%	14.6%	18.5%	-	12.7%
2016/17	203	16.6%*	14.6%	18.8%	-	13.7%

Source: GP Patient Survey (NHS England) <https://gp-patient.co.uk/>

Across the four year reporting period Hartlepool has maintained a gap of at least 3% above the England average, peaking in 2014/15 where Hartlepool was 4.7% above the England average.

The GPPS has also shown a spike in those reporting long term mental health problems in 2017/18.



Recent trend: ↑

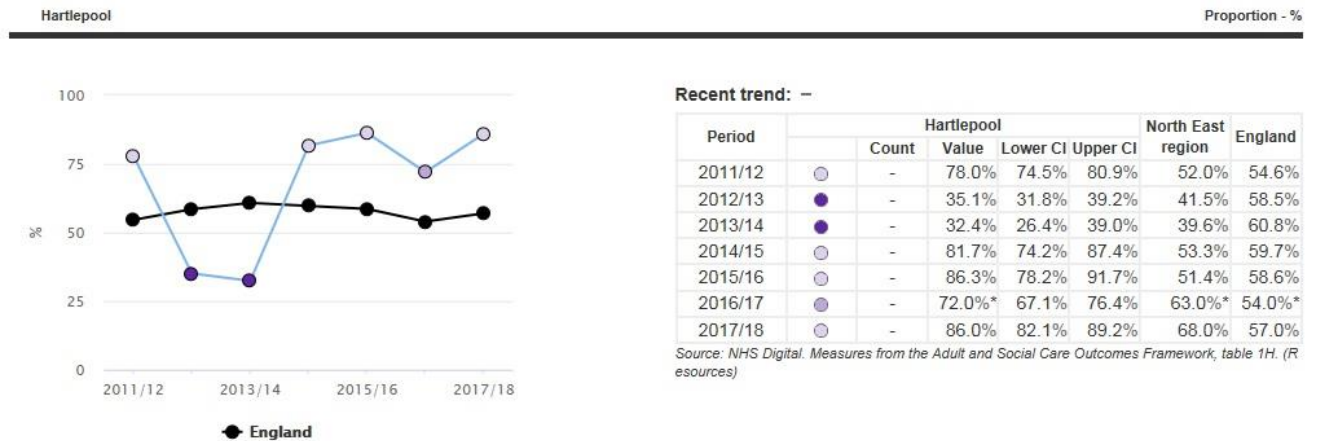
Period	Hartlepool				North East region	England
	Count	Value	Lower CI	Upper CI		
2011/12	-	-	-	-	-	4.2%
2012/13	-	-	-	-	-	4.5%
2013/14	79	5.6%	4.5%	6.9%	6.0%*	4.8%
2014/15	87	6.3%	5.1%	7.7%	6.5%*	5.1%
2015/16	74	5.7%	4.5%	7.1%	6.6%*	5.2%
2016/17	67	5.7%	4.5%	7.2%	7.4%*	5.7%
2017/18	133	12.5%*	10.6%	14.6%	11.2%*	9.1%

Source: DH, GP patient survey

Hartlepool's level of reported long term mental health problems increased by 119% from the 2016/17 level of 5.7% to the 2017/18 level of 12.5%. This was preceded by a four year period where the largest increase was 0.7%. Hartlepool's increase in 2017/18 sees it have the 5th highest level in England.

For those people in contact with secondary mental health services, Hartlepool has the 4th highest level of stable accommodation in England. Hartlepool had a stable accommodation rate of 86.0% for those in contact with secondary mental health services in 2017/18. This is the 4th consecutive year where Hartlepool's rate has been at least 72%. This however was preceded by two years where rates fell as low as 32.4%.

Adults in contact with secondary mental health services who live in stable and appropriate accommodation (Persons)



From the low point in 2013/14 to the 2017/18 level, there has been an increase of 165%.

Hartlepool also has the smallest gap in both the north east and England for employment rates between those in contact with secondary mental health services and the overall employment rate.

Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate

2017/18 Gap - Percentage points

Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	-	-	68.2	68.0	68.4
North East region	-	-	62.0	61.0	63.0
Hartlepool	-	-	51.1	46.6	55.6
Middlesbrough	-	-	58.3	54.8	61.8
Stockton-on-Tees	-	-	59.2	55.1	63.3
County Durham	-	-	60.2	56.9	63.5
Redcar and Cleveland	-	-	61.0	56.5	65.5
Newcastle upon Tyne	-	-	62.4	58.9	65.9
South Tyneside	-	-	63.6	59.6	67.6
Sunderland	-	-	64.8	61.2	68.4
Northumberland	-	-	64.9	61.3	68.5
Darlington	-	-	65.8	61.6	70.0
North Tyneside	-	-	67.9	64.1	71.7
Gateshead	-	-	68.8	65.1	72.5

Source: ONS Annual Population Survey and NHS Digital

Current Services

Mental health stepped care referral pathway			HARTLEPOOL COMMUNITY SERVICE PROVISION
5	<p>SPECIALISED - MH- unable to remain at home due to MH needs /impact on safety. Urgent care, Severe Mental Health Crisis, Acute Mental Health need. Risk to life/others, severe self-neglect, trauma, Acute MH need.</p>	<p>INTERVENTIONS & RESOURCES Inpatient care, combined treatments, Home intensive treatment, Crisis intervention to discharge home. Mental Health Act detention.</p>	<p>CARE PROVIDER(s) Crisis/home treatment Inpatient services (via crisis) Rehabilitation Service (via IMHS) MHAA/AMHP, Res/Nursing Care (via MH Panel)</p>
4	<p>SPECIALIST - MH functioning severely impacted in several areas Complex, severe or treatment with significant risks severe self-neglect, suicidal, Deliberate Self Harm, Eating Disorder, Autism, Personality Disorders, Psychosis, Trauma, Dual diagnosis.</p>	<p>INTERVENTIONS & RESOURCES Psychiatric assessment, case management (including Social Care), longer term monitoring, Community Treatment Orders; complex psychological interventions, Mental Health & Mental Capacity Act. NICE - Clinical Pathways, After Care (s117MHA)</p>	<p>SUPPORT PROVIDER (s) (Step 3+) Identified referral route Tees Esk & Wear Valley NHS FT, Access, EIP, Crisis, Home Treatment, Affective, Psychosis services. Crisis/home treatment (inc self refer)</p>
3	<p>TARGETTED SUPPORT - MH impacts on functioning in several areas Moderate mental health needs, assessment of mental health. Disruptive, traumatic life events, relationship issues, chronic physical health issues; Moderate depression, anxiety disorders, Post Trauma, Obsessive Compulsion, mild bulimia, substance misuse.</p>	<p>INTERVENTIONS & RESOURCES Cognitive Behavioural Therapy, Counselling, Recovery Coordination, Psycho Social Interventions, Direct Payments, Harm reduction, Multi Agency Support</p>	<p>SUPPORT PROVIDER(s) (Step 2+) Hartlepool Borough Council, GPs, Primary Care, MIND, Alliance, Starfish, Thirteen Housing, Creative Support</p>
2	<p>FACILITATED SELF HELP - MH need has some impact on functioning Mild to moderate depression, mild anxiety disorders, panic, sleep problems, phobias.</p>	<p>INTERVENTIONS & RESOURCES Guided self-help, brief psychological interventions, Beautiful Minds Directory, Reablement, Medication via GP counselling for depression, interpersonal therapy, facilitated self help, bereavement counselling, Advocacy. Recovery Colleges.</p>	<p>SUPPORT PROVIDER (Step1+) GPs, Primary Care, NHS Choices, Pharmacies, MIND, Alliance, Starfish, Creative Support, Hartlepool Advocacy Hub.</p>
1	<p>SELF DIRECTED SUPPORT -MH has little or no impact on functioning Recognition of symptoms; low mood, anxiety, stress, anger, isolation, community support, physical ill health</p>	<p>INTERVENTIONS & RESOURCES Confidence building, Life and living skills, Mindfulness, sensory and relaxation techniques, Lifestyle support, community advisors, voices for choices, peer support, improving confidence, improving self esteem, mental health supported employment service</p>	<p>SUPPORT PROVIDER(s) Adult Education, Community Hubs, Be Crafty, Hartlepool Now, MIND, Step Forward Tees Valley, Hartlepool Carers</p>

Support Services for stepped care model (examples)

5. Approved Mental Health Professionals (HCPC registration, significant experience working with people with mental ill health.

Completion of AMHP module. Ongoing CPD to retain AMHP status. Severe and enduring Mental Health

Best Interest Assessors (HCPC registration, significant experience working with people with complex conditions.

Completion of the BIA training and ongoing legal updates to retain BIA status.
Complex and severe conditions

4. **Registered Social Workers** (HCPC registration experience of working with people with complex presentations)

Multi agency work with complex people and co morbid mental health and or substance misuse.





3 **Registered Social Workers** (HCPC) including Social Care Officers - supporting people with moderate mental ill health. Preventing escalating

needs

2. **Social Care Officers** supporting people with mild to moderate mental ill health. Facilitation to support to appointments relating to Mental Wellbeing.

1. **Community Hubs Officer** assist and signpost hub visitors to relevant services including welfare and access to a range of health-improving initiatives.

Future Intentions

Hartlepool Mental Health joint Plan 2019-2021	
 <p>Mental Health First Aid</p>	<ul style="list-style-type: none"> • Tackling Social Isolation and Loneliness. • The Development of a Wellbeing Hub and Café. • Children & Young People, educating the public • Transport and safe places.
 <p>Psychological Therapies</p>	<ul style="list-style-type: none"> • Single Point of Access into Mental Health Services. • GP Time to talk, raising awareness of primary care services.
 <p>Intensive home based family support</p>	<ul style="list-style-type: none"> • Improving the timeliness of access to Mental Health services. • Tackling stigma and understanding what is good Mental Health
 <p>Access to care in a crisis</p>	<ul style="list-style-type: none"> • Access to local respite and crisis beds • A shift from Crisis Care to Prevention and Early Intervention

Signs and symptoms



Too much sleep or trouble sleeping



Trouble focussing or having racing thoughts



Changes in appetite



Isolating yourself from others or losing interest in things you once enjoyed



Irritability or having a short temper