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Introduction

King's Health Partners is an Academic Health Sciences Centre where research, education and clinical practice are brought together for the benefit of patients across South East London. Our partner organisations are:

- King's College London.
- Guy's and St Thomas' NHS Foundation Trust.
- King's College Hospital NHS Foundation Trust.
- South London and Maudsley NHS Foundation Trust.

King's Health Partners is working to improve people's health and their experience of receiving treatment and care. One of the things we are focussing on is how our services support people's physical and mental wellbeing. We recognise that physical and mental wellbeing are often treated separately within services and that this is not always the best way to do things.

We are developing a programme of work to address this issue. To help develop our programme, we wanted to find out from our stakeholders what the key areas of concern were. We held discussions with people in a variety of settings.

Summary of what people told us

1. Those who commission, manage or deliver services need to take a holistic approach with consideration of people's culture, spiritual life and community as well as physical and mental wellbeing. People's wider social and economic circumstances also impact on wellbeing and should be considered in understanding health needs.
2. Currently mental health services do not always adequately consider people's physical wellbeing. At the same time physical health services may not consider people's emotional or mental wellbeing.
3. A focus on prevention through information & awareness raising would support communities to stay well.
4. Collaboration between all parties is vital. Healthcare systems, organisations and services can have cultural or practical barriers which prevent people from moving smoothly through a consistently available system, getting the right help at the right time.
5. People who use services have a role in improving the system.
6. The separation of services for young people, adults and older adults can impact on continuity of care or access to services in a timely way and primary

care and secondary care need to work more closely together. Community groups and organisations are part of the system.

7. Problems with sharing information within and across organisations about people's health can impede or delay access to the right service.
8. To improve systems, services and staff need to talk to each other more.
9. Good listening by health practitioners is the key to people getting the best and most appropriate service.
10. People who use health services should not be judged.
11. Staff need time and capacity to understand the whole system, to share and learn across teams.
12. Staff, whether working in physical or mental health need to be supported and trained to take a holistic approach to people they are working with.
13. Staff need to be comfortable and open around making mistakes and sharing learning.
14. We need to consider the impact of long term or combinations of medication on people's physical and mental wellbeing.
15. Lack of joined up working can lead to duplication of assessments and tests, people falling through the gaps and symptoms not being addressed.

Background

We want to make sure that the lessons from research are used more swiftly, effectively and systematically to improve healthcare services for people with physical and mental health care problems.

When mental and physical health problems are combined, people are less able to manage their conditions properly and their health outcomes become worse. Despite this connection, many local health services still separate care into physical and mental and often fail to share patient information.

Patients and service users are passed between different parts of the NHS without the right connections being made. On many occasions, healthcare professionals are not aware that their patient has multiple conditions.

Evidence shows that by joining up physical and mental healthcare, we can help someone to manage their different conditions, improve their health outcomes, and even prevent unnecessary health problems for some people by identifying risk early.

There are many different ways that NHS services are already trying to address this problem, but we need to turn best practice into common practice:

- By assessing all patients for common mental and physical health conditions in all care settings, the right support or treatment can be identified as soon as possible.
- Staff working together in multidisciplinary teams across primary, secondary and community care can make sure that our services are delivered in a way that best meets your needs.

Just by everybody taking the time to ask someone how others are feeling physically and emotionally, we can start to make a big difference to the care provided.

King's Health Partners believe that, by raising awareness and understanding of the connections between mental and physical health and how they should be managed, we should all be better equipped to get the care we need, in the right place, allowing us to live longer and healthier lives.

Between November 2016 and January 2017, we talked to people to help us design and shape some proposals to develop a more coordinated and integrated approach to physical and mental healthcare. We are aiming to have a set of final proposals by early January 2017.

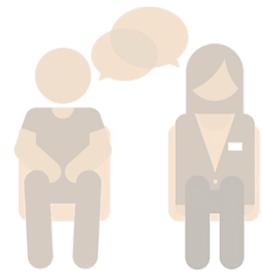
Aims

Using the question

“What one thing could services do to better support your physical and mental health?”

we aimed to gain a better understanding about what matters most to people when getting support around their physical and mental health. This feedback helped us to design our proposals.

Discussions



During November & December 2016, we held discussions in the following forums:

	Approximate number of participants
Service user & Carer advisory groups at South London & Maudsley NHS Foundation Trust	10
Southwark Clinical Commissioning Group /Council Health and Wellbeing Strategy Events	50
Bromley and Lewisham Healthwatch Self Care Event	40
South London & Maudsley NHS Foundation Trust Equality Partnership Time Event, Croydon	30
Physical Health workshop for mental health inpatient services	34
Public Stakeholder Event to help develop the Mind/Body programme	30

Using the question as a starting point, discussions were facilitated by King’s Health Partners staff members alongside members of the South London & Maudsley Service User Involvement Register.

Feedback from the discussions were collated and reviewed.

People told us

Approach

Those who commission, manage or deliver services need to take a holistic approach.

- *"look at physical & mental health together"*

A holistic approach includes understanding people's culture, spiritual life and community as well as both physical and mental wellbeing. These all impact on a person's wellbeing.

- *"Shouldn't forget spirit – not just mind and body"*

People's wider social and economic circumstances also impact on wellbeing and should be considered in understanding health needs.

- *"Prevent social problems. Social care/welfare support can reduce stress & keep people out of hospital..... People want a holistic overview with the family, then broaden out to social issues such as housing... We need to understand how society creates mental ill health.... Remember outside issues affect mental health and those with mental health affect the health of families.... Homelessness and the vicious cycle of mental health"*

Currently mental health services do not always adequately consider people's physical wellbeing. At the same time physical health services may not consider people's emotional or mental wellbeing. Physical health practitioners may not take physical health symptoms seriously once they know that a person uses mental health services.

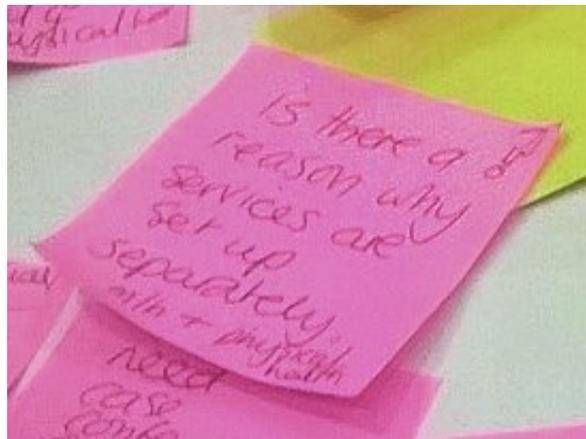
- *"Make it easy for people with mental health problems to get physical health checks"*

A focus on prevention through information & awareness raising would support communities to stay well

- *"focus on early interventions..... the need for coping strategies for the young/elderly.....need for early intervention & spotting underlying causes e.g.: learning disabilities are often missed.... "*

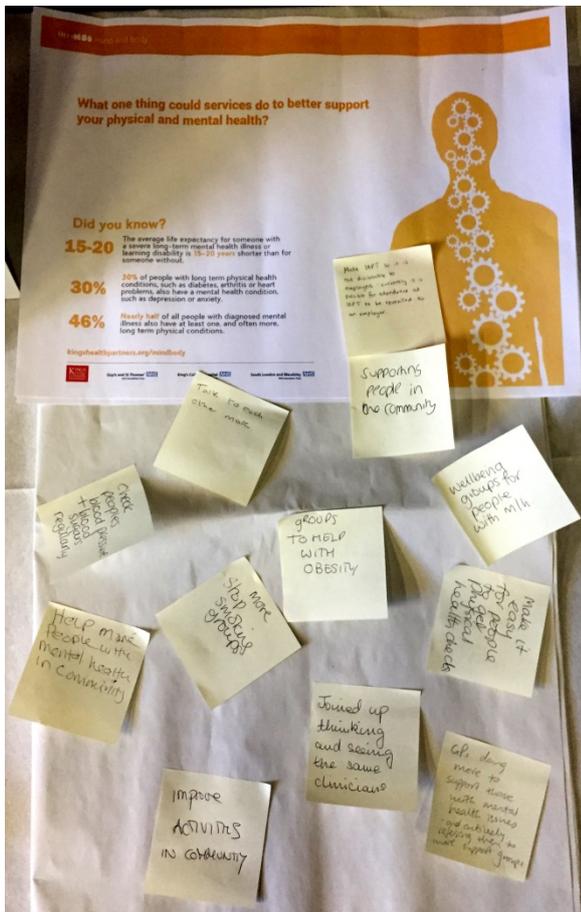
Ideas/suggestions:

- *More work in schools around mental wellbeing*



- Promoting and sharing good practice, using media to provide combined mental and physical health care messages
- Health TV

Collaboration and integration



Collaboration between all parties is vital. Healthcare systems, organisations and services can have cultural or practical barriers which prevent people from moving smoothly through a consistently available system, getting the right help at the right time.

- *“everyone should be heard, agencies and people.....”*

People who use the services have a role in improving the system

- *“us/them between clinicians and patients/service users..... use people with lived experience”*

the separation of services for young people, adults and older adults can impact on continuity of care or access to services in a timely way

- *“End the separation of children/young peoples and adults services”*

Primary Care and secondary care need to work more closely together

- *“multi-disciplinary social care/primary care teams need mental health input... people with mental health in the community. GP deals with 90% of mental health plus physical health, things break down when people go into hospital for physical health”*

Community groups and organisations are part of the system

- *“Should work with communities as they are what matters to people Voluntary sector organisations are not adequately funded or integrated into the pathway but support people with very complex circumstances and social, physical and mental health issues..... faith communities need support to help people with mental health problems.”*

Ideas/suggestions:

- GP surgeries to have a person to discuss the impact of long term conditions including mental wellbeing
- Audit of all services available in the community and share list, educate and identify which accept self-referrals
- A process manual across physical and mental health and a reference library to support staff to deliver joined up care

Communication and information sharing

Problems with sharing information within and across organisations about people's health can impede or delay access to the right service

- "Join up records, including access for carer..... parallel referral letters for clinicians and patients to avoid delays... trust over-sharing information"

To improve systems, services and staff need to talk to each other more.

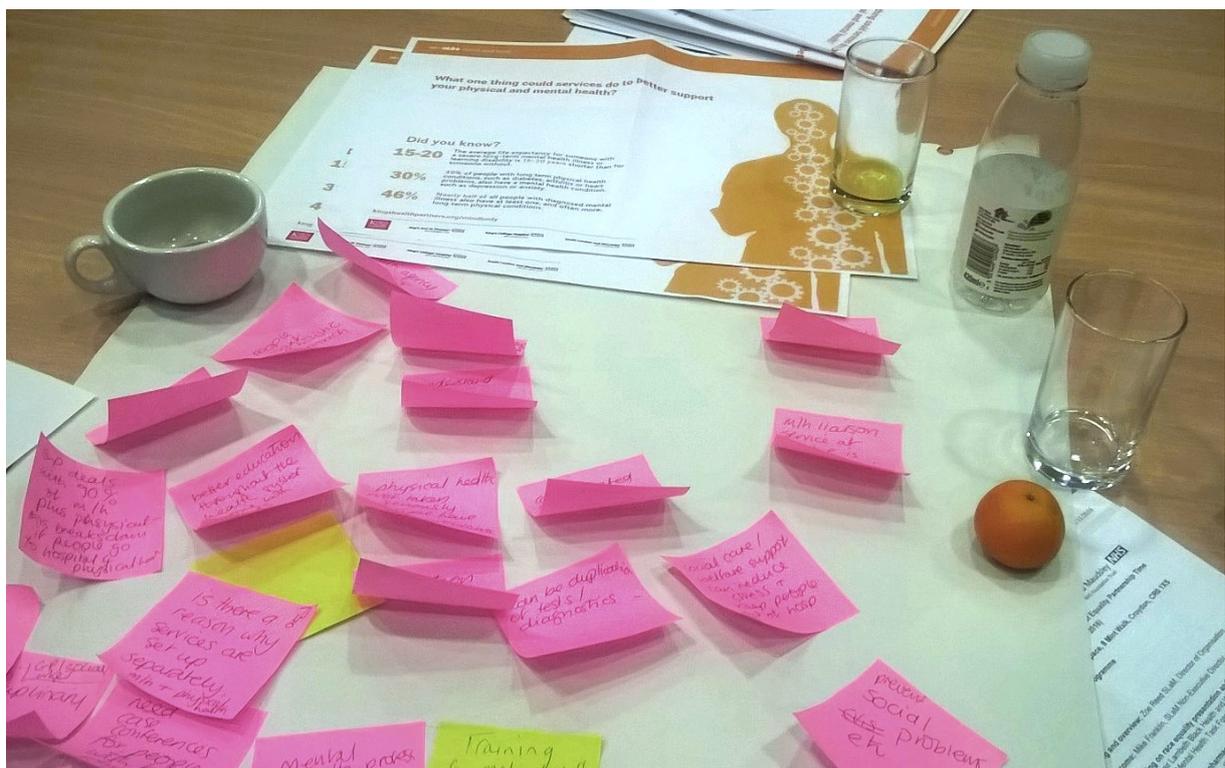
- "staff are short on time, no space to be more innovative or joined up.... lack of awareness between professions"

Good listening by health practitioners is key to people getting the best and most appropriate service.

- "communication skills are key – there are problems with health professionals not listening..... active & open listening..... need to see patient as the expert"

Ideas/suggestions:

- Client/patient protocol to share information



Having staff with the right skills

People who use health services should not be judged:

- *“Resolve stigma of mental health in medical profession..... Preventing stigma connection... Don't judge people's differences – e.g. learning difficulties – we are all human beings and should be treated as such”*



Staff need time and capacity to understand the whole system, to share and learn across teams.

- *“Better education across the health system,*

Staff, whether working in physical or mental health need to be supported and trained to take a holistic approach to people they are working with.

- *“the staff nurses to be more confident in managing common physical health ailments and know when it's appropriate to seek medical advice” (mental health unit) Training for medical staff on common mental health problems and standard screening for mental health issues need for greater generalist skills to avoid 'refer-on' Getting the diagnosis right is so important – need the skills to do this”*

Staff need to be comfortable and open around making mistakes and sharing learning

Ideas/suggestions:

- *A review of current training for health care staff*

Treatment & care

We need to consider the impact of long term or combinations of medication on people's physical and mental wellbeing

- *“not always appropriate over-prescribing.... harmful combinations... Drug side effects are so important when it comes to medication and cause so many physical health problems..... Consider the impact of long term medication – for both physical & mental health on people's physical and mental health.... Medication for mental health can cause physical health problems.... Involve people in medication and explain what it is in ways the service client will understand..... Avoid stereotyping and judgment for the side effects of medication”*

Lack of joined up working can lead to duplication of assessments and tests, people falling through the gaps and symptoms not being addressed.

- *“need for pathway of support before & after therapy..... need to address lack of continuity of care.....*

Ideas & suggestions:

- *We need case conferences for people with both physical and mental health needs*
- *Improve on smoking cessation – e.g. not storing cigarettes on all wards*
- *More stop smoking groups*
- *Groups to help with obesity*
- *Wellbeing groups for people with mental health problems*
- *GP’s doing more to support those with mental health issues and actively referring them to support groups.*
- *There are apps for different conditions*

Things that are working well:

- *Expert Patient Programmes are good*
- *GP Social Prescribing is helpful*

Next steps

Subject to confirmation of funding, we will move into programme implementation from spring 2017, running through to spring 2022. During the 5 year programme, we will continue our patient and public engagement, and work through co-production, to ensure programme implementation still reflects the views and needs of patients, carers/families and staff.

Contact

For more information about this work and to be kept informed, please contact:

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