

## **APPG on Mental Health Inquiry into the Five Year Forward View for Mental Health**

The British Association for Counselling and Psychotherapy (BACP) is the leading professional body for counselling and psychotherapy in the UK, with over 46,000 members. Our members work across the professional disciplines in the fields of counselling and psychotherapy and are based in a range of settings, including the NHS, schools and colleges and the third sector, providing therapy to clients with a wide range of presenting issues.

We would like to thank the All Party Parliamentary Group for holding this inquiry into the Five Year Forward View for Mental Health (5YFV) and for giving stakeholders, such as ourselves, the opportunity to comment.

### **1. Where has the Five Year Forward View for Mental Health made the biggest impacts and where could they go further?**

The aims of the 5YFV focus on sensible areas, however the ambition, pace of change and reporting of progress has fallen short of what we would recommend. The key areas we would like to see the 5YFV go further on are:

#### **Delivering choice of evidence-based psychological therapies to clients**

Not all psychological interventions are suitable for all people or for all problems and research shows that a choice of evidence based psychological therapies is both beneficial to the client's outcomes (*Lindheim et al, 2014*) and improves the quality of the therapeutic relationship between client and practitioner.

We believe that when accessing psychological therapy services people should be offered a full and informed choice of all evidence based psychological therapies.

The principle of choice and joint decision making between clients and practitioners is enshrined through the NHS Mandate (HM Gov, 2018) and in theory the IAPT programme makes a range of high intensity evidence based interventions available to clients, including Counselling for Depression, CBT, IPT (interpersonal therapy), DIT (dynamic interpersonal therapy) and couples therapy.

However, many IAPT services don't provide all the recommended interventions instead offering a limited choice, most commonly CBT. The 5YFV was an opportunity to address this disparity in choice.

#### **Increasing access to psychological therapies**

Increasing the numbers of people who could benefit from psychological therapies accessing them is a worthy ambition, however the intention to increase access from 15.8% to 25% over five years lacks ambition. What about the 3 in 4 adults with common mental health conditions remaining who are not targeted by the 5YFV but who may benefit from psychological therapies? What is the plan for those people, what comes next?

## **Developing the workforce to deliver choice and to meet need**

To support the implementation of the 5YFV an additional 3,000 high intensity therapists are to be trained by 2020/21. This commitment was a clear opportunity to deliver enhanced choice to clients and we would recommend that all future expansions of the NHS psychological therapies workforce seeks to address the imbalance between practitioners of different modalities, to ensure that choice becomes a reality for clients.

To assist with achieving this we would recommend that NHS England and Health Education England look to the existing highly trained, but underutilised, counselling workforce comprising our membership.

The small amount of upskilling or retraining required for BACP counsellors to work within IAPT could be done at a much lower cost and within a much quicker timeframe than training a new workforce.

## **2. What should any new mental health strategy post 2021 focus on?**

We believe that the areas of focus beyond the 5YFV should be:

- Timely access to appropriate mental health support is vital and therefore we recommend an ambition for the NHS in England to ensure a full range of evidence-based psychological therapies is accessible to all people who need them within 28 days of requesting a referral, shorter for someone in a mental health crisis.
- A commitment that all IAPT recommended evidence-based psychological therapies are available through every service as well as ensuring clients have choice over which intervention they receive and are provided with clear information for on what their choices are and mean.
- An ambition to make psychological therapies available to 100% of people with common mental health conditions with a renewed campaign to educate the public on what psychological therapies are and to reduce stigma around accessing them.
- Plans for workforce development that would deliver the ambitions above and take account of the existing trained, but underused, workforce within the counselling professions.
- Focus on reducing stigma and increasing access to psychological therapies for older people with mental health problems.
- Focus on the development of long-term psychotherapy services for people with more complex and enduring mental health problems.

## **3. How can we better scrutinise the implementation of the Five Year Forward View for Mental Health and what role can the public,**

**Government, policy makers, Arm's Length Bodies (ALBs) and parliamentarians play?**

We are now in the third year of the 5YFV, however progress reports and transparency around its implementation are essentially non-existent.

Scrutinising the implementation of major policy initiatives isn't just the remit of parliamentarians, although of course they have a key role to play, it's a crucial role of stakeholders as well. We recommend that transparent and public annual reports are published, including clear schedule for implementation, assessments on progress towards implementation and actions plans for areas where progress is behind schedule to ensure targets aren't missed.

We also recommend that the Health and Social Care Select Committee conducts an inquiry into the 5YFV, focusing on how it is contributing towards the delivery of choice of psychological therapies for the public, if it is increasing access to services for people with common mental health conditions and its overall progress towards the delivery of its key aims.

**For further information on any of the points raised please contact the Matt Smith-Lilley, Policy and Public Affairs Officer via [publicaffairs@bacp.co.uk](mailto:publicaffairs@bacp.co.uk).**

**References:**

HM Gov (2018) The Government's Mandate to NHS England for 2018-19.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/691998/nhse-mandate-2018-19.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/691998/nhse-mandate-2018-19.pdf) [accessed 14 June 2018]

Lindheim, O, Charles, B, Trentacosta, C and McLear, C (2014) Client Preferences Affect Treatment Satisfaction, Completion, and Clinical Outcomes: a meta-analysis. *Clinical Psychology Review*, Vol.34, pp 506-517