PARLIAMENT STREET partnership in policy A QUANTITATIVE ANALYSIS OF COMMUNITY MENTAL **HEALTH PROVISION IN ENGLAND DURING COVID-19** AND THE SUBSEQUENT IMPACT ON THE POLICE BY DANNY BOWMAN, HEAD OF CAMPAIGNS

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Abstract

The Covid-19 pandemic has impacted every part of our lives including our ability to access healthcare interventions. One of the most impacted areas of healthcare has been mental health, leaving many individuals experiencing psychological difficulties without access to appropriate interventions. There could be many consequences to this including an increased need for support once the pandemic is over, leaving services overstretched. The impact of overstretched services could mean that non-traditional forms of support may be needed to deal with the likely increase in mental health need.

This research paper aims to examine the accessibility of community mental health provision at the height of the pandemic (April 2020) and investigates how the level of access to services may have affected the number of mental health incidents that English police forces were dealing with during the same period. It also aims to provide a useful quantitative analysis of the impact of Covid-19 on the availability of mental health provision and the subsequent impact on other public services.

By analysing collected data for these two indicators, this research paper aims to uncover key local, regional and national trends on the availability of mental health support during the pandemic and provide a thorough quantitative investigation into the relationship between the accessibility to mental health provision and police time spent on supporting individuals experiencing psychological distress.

This research paper also aims to provide vital knowledge and insight on the level of impact across England which could be useful when decisions are made on the allocation of resources to mental health services once this pandemic is over.

Introduction

The global community is facing the largest public health crisis in over 100 years in the form of Covid-19. The Coronavirus is a newly discovered infectious disease which is thought to have originated from the Wuhan province of China (WHO, 2020). The virus poses an exponential threat to the health of billions of citizens with the current estimate of infection projected at just over 21 million globally and around 267,000 in England. Unfortunately, around 760,000 of these cases globally and just under 42,000 in England have led to the loss of human-life as of 15th August 2020 (John Hopkins University and Medicine, 2020). This virus continues to have a substantial impact on the physical health of citizens across the world; however, we must also acknowledge the likely psychological impact of this virus. There is a multitude of direct and indirect risks posed from this virus to the psychological health of citizens.

From the direct experiences of trauma caused by a life-threatening battle with the virus, to unimaginable grief felt by thousands of families who have lost loved ones. To the indirect consequences of the virus such as anxiety generated through the constant reporting of death tolls, vicarious trauma faced by health and social care professionals, feelings of loneliness caused by the isolationism of lockdown measures to control the virus, to fear and depression experienced by those worried about how the virus will affect their livelihoods. Whether direct or indirect, the psychological impact of this virus will need to be addressed through comprehensive and well-coordinated plans on a domestic and international basis.

In England, the psychological impact of the virus is only beginning to be uncovered with a variety of research projects looking into this area. Several news reports have already outlined the likely increase in depression, anxiety and PTSD within the general population stressing the need for services to be able to offer quick and efficient care to those that need it. Within a recent report by the Telegraph Online (2020), Clare Murdoch, NHS national director for mental health outlined the NHS's approach to dealing with the increase in need by training more staff in psychological therapies and encouraging former staff to return to the frontline to help in the effort of combating the psychological impact of this virus. Whilst I commend this fact, it is also important to reflect and evaluate the response of mental health and other public services during the height of the pandemic. This will enable lessons to be learned for future reference and locate where extra resources may be needed to combat the likely increase in need.

These findings may show that many individuals experiencing psychological difficulties were unable to access appropriate mental health provision, leading to their condition worsening and needing more specialist care because of it. They may also show that the lack of availability of mental health provision in the community led to more people accessing non-traditional forms of support such as the police. The aims of this paper are to provide a foundational insight into the question of access to mental health provision during the pandemic, whilst also considering the subsequent impact on other public services such as the police on a local, regional and national basis.

Methodology

The aim of this research was to provide an analysis of the impact of Covid-19 on access to mental health provision at the height of lockdown whilst also considering the mental health impact on other public services. This was achieved by collecting and analysing data acquired through the Freedom of Information Act on access to community mental health care and police mental health incidents at the start of lockdown (April 2020). By undertaking this approach, this research was able to acknowledge the local, regional and national impact of the Covid-19 virus on access to mental health care and the subsequent effect on the total number of police mental health incidents.

In examining the impact of Covid-19 on mental health services in England, this research places emphasis upon referral rates to community mental health teams. We compared referral rates to community mental health teams on a local, regional and national basis by collecting data from April 2019 and April 2020 through the Freedom of Information Act. By comparing the two datasets against each other we were able to examine whether there had been any significant changes. In taking this approach this research was able to consider the impact of the Covid-19 period on the ability of local NHS trusts to provide access to vital community mental health provision during the height of the pandemic. By collecting the data in this way, we were able to place individual mental health trusts into regional groupings. This allowed the research to examine the impact of Covid-19 on access to community mental health provision on a regional basis, and from these groupings widen our investigation further by analysing the data on a North, South and Midlands basis allowing a comprehensive investigation into any disparities between the geographical sub-groups.

The second part of this research aimed to examine the subsequent impact of access to community mental health provision on other public services. The public service of focus was English police forces, collecting data on the number of mental health incidents they had experienced during the same period. This was achieved by collecting data on police mental health incidents during the height of lockdown (April 2020) through the Freedom of Information Act. Further analysis was then undertaken breaking the data up into area and regional groupings to examine whether there were disparities in impact between the geographical sub-groups.

The research concluded by bringing together and comparing the data on community mental health provision and police mental health incidents during the height of lockdown to understand if there was any significant correlation between the two on a local, regional or national level.

It is hoped that this research will provide an insight into the impact on access to community mental health provision during the Covid-19 period and how that may have affected the total number of mental health incidents dealt with by English police forces. Furthermore, that it will help in the identification of local and regional areas that have experienced the largest impact on access to their community mental health services and increases in police mental health incidents. Through the identification of these areas, decision-makers will be able to make more informed judgements when deciding where resources should be placed to support the likely increase in mental health need once the crisis is over.

Research Findings and Discussion

This section will show the research findings on the impact of the Covid-19 period on access to community mental health provision and the total number of police mental health incidents dealt with by English police forces during the same period. Through analysing these findings this section will provide a discussion on some of the key findings from the research on a local, regional and national basis.

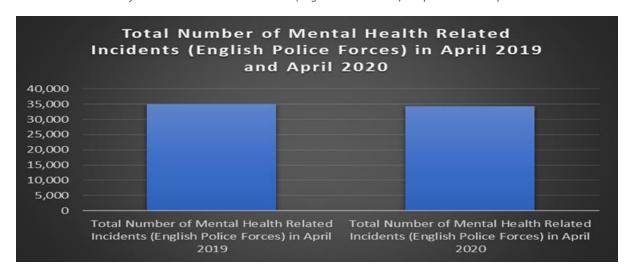
Impact of Covid-19 on Mental Health Related Incidents Dealt with by the Police

Key Findings

- The total number of recorded police mental health incidents remained steady throughout the height of lockdown (April 2020) only falling by 2.1%.
- The South experienced a much higher decrease of 4.2% in mental health incidents compared to the North and the Midlands that only saw reductions of 0.1% and 0.2%.
- Police forces in the East Midlands, North West, South West and Yorkshire and Humber saw increases in mental health incidents of between 10.2% and 22.7%.
- The highest increase in mental health incidents was experienced by Northamptonshire Police at 102.3%.

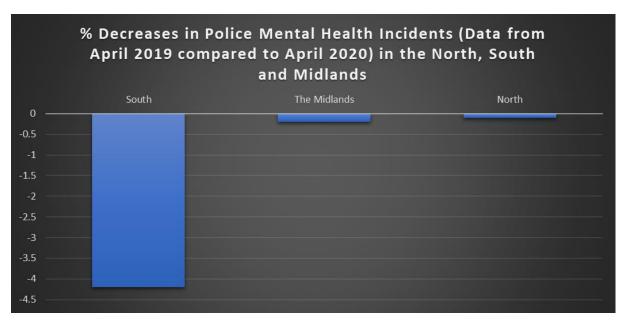
The impact of Covid-19 on mental health related incidents dealt with by the police varies across England. The total number of mental health related incidents nationally has remained relatively unchanged in 2020 compared with 2019. This is quite surprising when considering the time period in which the research was conducted. The data provided is for the time period of the 1st April to the 30th April which was at the height of lockdown. At this time people were expected only to go outside for food, health or work reasons (only if the individual can't work from home) and other draconian measures such as not being able to meet with people outside of your own household. You would expect at this time that there would be a substantial reduction in the number of mental health related incidents that the police were dealing with. However, there was only a slight reduction of 2.1% in mental health incidents in 2020 compared to 2019 (See Chart 1).

Chart 1 Total Number of Mental Health Related Incidents (English Police Forces) in April 2019 and April 2020



As noted, mental health incidents remained relatively steady even at the height of the lockdown. When breaking the data down into Northern, Southern and Midland's police forces we can see that there have been slight reductions across the country. However, these reductions have not been equal, with Southern police forces experiencing an overall decrease of 4.2%, whilst the Midlands and the North experienced much smaller reductions of 0.2% and 0.1% (See Chart 2).

Chart 2 % Decreases in Police Mental Health Incidents (Data from April 2019 compared to April 2020) in the North, South and Midlands



On a regional level, there has been a mixed picture with some regions police forces experiencing an overall increase in mental health incidents whilst others have experienced a fall. The highest regional increase was experienced by East Midland's police forces at 22.7%,

followed by police forces in the North West at 13%, South West at 12.5% and Yorkshire and Humber at 10.9%. Other regions experienced a decline in the number of mental health incidents during the height of lockdown. In the West Midlands region, police forces saw a reduction of -29.7%, followed by North Eastern police forces at -24.9%, South Eastern at -11.6%, London at -5% and the East of England at -4.6%.

The data provides an interesting insight into the extent in which each individual region's mental health was impacted by the lockdown and the pandemic in general. However, further consideration of this data will have to be made against regional referral rates.

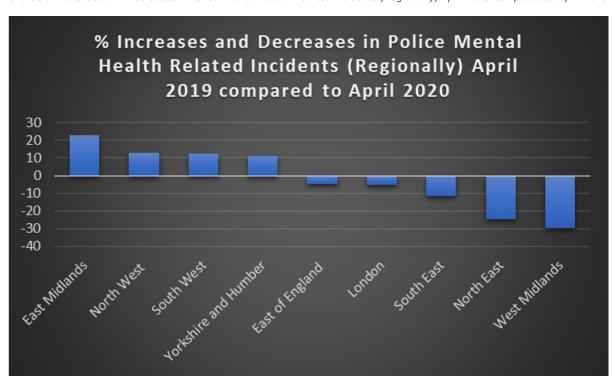
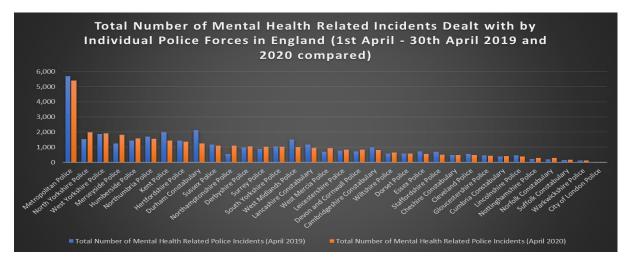


Chart 3 % Increases and Decreases in Police Mental Health Related Incidents (Regionally) April 2019 compared to April 2020

The individual data for police forces in England shows that 52.9% of police forces experienced an increase in mental health incidents during April 2020 compared to the same time in 2019. The highest percentage increase was experienced by Northamptonshire Police at 102.3% followed by Norfolk Police at 53.6% and City of London Police at 50%. The largest reductions in police incidents were experienced by Durham Constabulary at -40.9% followed by West Midlands Police at -33.3% and Staffordshire at -29.3%.

Chart 4 Total Number of Mental Health Related Incidents Dealt with by Individual Police Forces in England (1st April - 30th April 2019 and 2020 compared)



The data suggests a range of statistically significant findings including a disparity in the increases and decreases in police mental health incidents between the North and the Midlands, and the South. Although there have been decreases in mental health incidents generally across England, the North and the Midlands saw only a small reduction compared to the South. When considering the data from a regional perspective, we can see that Northern and Midlands police forces were more likely to have experienced increases in police mental health incidents compared to Southern regions. Out of the 20 police forces that experienced an increase in mental health incidents, 60% of them were from the North or the Midlands compared to only 40% from the South.

To further examine this hypothesis that there has been a higher mental health impact on the North and the Midlands compared to the South, this research collected and considered data on community mental health care referrals at the same time of lockdown.

The aim of this collection was to examine whether Northern and Midlands NHS trusts had experienced a higher decrease on their referral rates for community mental health care than that of Southern trusts between April 2019 and April 2020. If Northern and Midlands based NHS trusts experienced a higher reduction in referral rates compared to Southern trusts, this could show that the impact of Covid-19 on mental health provision in this area was higher than that of the South. Secondly, it could provide an explanation for the lower decreases in police mental health incidents in the North and the Midlands compared to the South due to people with mental health problems being unable to access more traditional forms of support.

Impact of Covid-19 on Community Mental Health Referrals

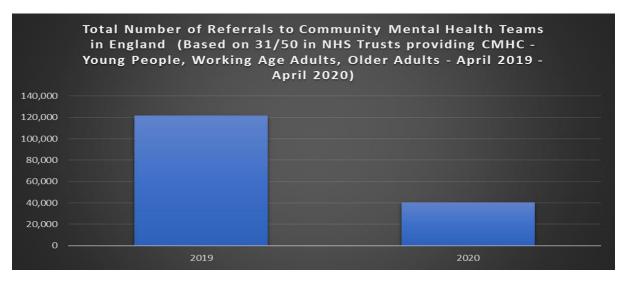
Key Findings

- There was a decrease in community mental health referral rates of -66.5% in April 2020 compared to April 2019 in England.
- The highest decreases in community mental health referral rates on a regional basis were experienced by Yorkshire and Humber NHS trusts with a reduction of -80.8%.
- NHS trusts in the North experienced the highest decrease in community mental health referrals at -77.6% compared to -60.1% in the Midlands and -57.4% in the South.
- From the (31/51) responding NHS trusts, 93.5% saw a decrease in referral rates to community mental health services in April 2020 compared to April 2019.

This part of the research collected data from 36/51 NHS trusts that provide community mental health care. We sent out Freedom of Information requests to all 51 NHS trusts that provide this type of service, receiving 36 useable responses. We asked for data on the total number of referrals for community mental health care (For Adult and Older Adult Services) in April 2019 and April 2020. The data collected subsequently enabled an analysis of the impact of Covid-19 in service user's ability to access community mental health care across England. It also allowed consideration of whether there had been a disproportionate reduction in referrals to community mental health services in Northern and Midlands NHS trusts compared to those in the South.

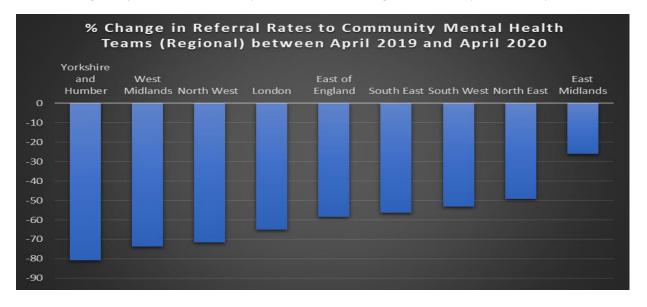
On a national basis, there was a substantial drop in the total number of referrals to community mental health care during April 2020 compared to April 2019. The total number of referrals fell from 121,692 to 40,682, a fall of approximately 66.5% on the same time in 2019.

Chart 5 Total Number of Referrals to Community Mental Health Teams in England (Based on 31/50 NHS Trusts providing CMHC - Young People, Working Age Adults, Older Adults - April 2019 - April 2020)



On a regional basis, the highest decreases in referrals were experienced by NHS trusts in Yorkshire and Humber who recorded a fall of -80.8%, followed by the West Midlands at -73.7% and the North West at -71.5%.

Chart 6 % Change in Referral Rates to Community Mental Health Teams (Regional) between April 2019 and April 2020

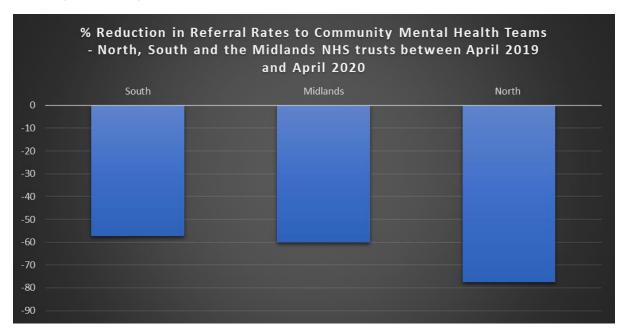


These results are somewhat in the line with the findings from the police section of this report with Yorkshire and Humber and North West police forces seeing increasing levels of mental health incidents and falling rates of referrals. You could argue based on these two regions that the fall in referral rates have led to the increase in police mental health incidents. However, we must be cautious when making these assumptions as regions such as the East Midlands which recorded a large increase in police mental health incidents, also experienced the lowest fall in referrals at -26.1%. The West Midlands comparatively experienced a substantial fall in police

mental health incidents but subsequently suffered one of the highest falls in referral rates to community mental health care. It would be fair to say that these results are not conclusive enough to link the fall in referral rates to an increase in police incidents at least on a regional basis.

Although, when examining NHS trusts on a North, South and Midlands basis there are strong similarities to the results found in the police data. The total reduction in referral rates to community mental health teams during the height of lockdown was much higher in Northern England NHS trusts and in the Midlands compared to South. The research has found that Northern NHS trusts experienced a fall of -77.6% in referrals to community mental health teams compared to Southern trusts at -57.4%.

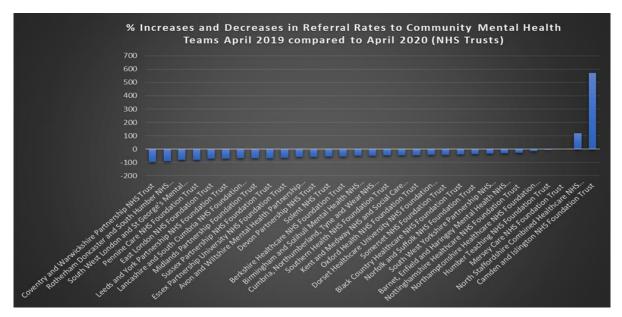
Chart 7 % Reduction in Referral Rates to Community Mental Health Teams - North, South and the Midlands NHS trusts between April 2019 and April 2020



When considering the findings of the NHS trust referral rates against the police data in this context, you could argue that higher reductions in referral rates to community mental health teams in Northern NHS trusts are linked to the higher rates of police mental health incidents during lockdown. As noted in the police section, Southern police forces experienced a much higher decrease in police mental health incidents during the height of lockdown compared to the Midlands and the North. This could be explained by the lower reductions in referral rates to community mental health teams during lockdown allowing less people experiencing psychiatric disorders to be without appropriate mental health interventions during this period (April 2020).

Overall, of the NHS trusts that responded to our request for information (31/51), 93.5% of them had experienced a decrease in April 2020 compared to April 2019 in the total number of mental health referrals to community mental health teams. The average % decrease in community mental health referrals for NHS trusts compared to April 2019 (not including those NHS trusts that saw an increase) was -52.2%. The NHS trust that experienced the highest overall reduction in referral rates was Coventry and Warwickshire Partnership NHS Trust at -97.1% followed by Rotherham Doncaster and South Humber NHS Foundation Trust at -91.1% and South West London and St George's Mental Health NHS Trust who saw a reduction of -81.5%. There were some outliers in the data collected including Camden and Islington NHS Foundation Trust who experienced an increase of 570.4% and North Staffordshire Combined Healthcare NHS Trust who witnessed a rise of 119.6%. Further investigation will need to take place to further understand why these trusts experienced such a drastic increase in community mental health referrals at the height of lockdown.





The individual NHS trust data showed no significant regional trends in overall referral rates, neither did it correlate with any of the individual data on police mental health incidents. However, what we can confirm from this data is that rather expectedly most NHS trusts saw substantial decreases in referrals to community mental health services. This could mean that people who required mental health support were either unable to access it due to referrals not taking place, or unwilling to access it due to fear of the virus. Either way this illustrates the

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Conclusion

The Covid-19 pandemic is likely to have had a substantial impact on the availability of mental health provision in England. This will undoubtedly have led to some people experiencing poor mental health being unable to access the care and support they needed at a time of great concern. The subsequent side-effect of this is that individuals experiencing poor mental health attempted to access or encounter non-traditional forms of support including the police.

This foundational piece of research aimed to outline how mental health services have coped on a local, regional and national basis and establish the subsequent impact on other public services, in this case the police. It is our hope that this piece of investigative work will be a useful resource when formulating and implementing plans to support people experiencing mental health problems after the pandemic is over.

When considering the collected data on both, police mental health incidents and community mental health referrals disparities between the South, Midlands and the North were uncovered.

The key overall finding from this research was the difference in impact between the North, South and Midlands when considering the availability of community mental health care and the subsequent impact on other public services. The research established that Southern police forces saw a much higher drop in police mental health incidents during the height of lockdown compared to Northern and Midlands forces who saw relatively similar rates to that of April 2019. Furthermore, when considering the impact on community mental health referrals during the height of Covid-19 (April 2020), Southern NHS trusts experienced a substantially smaller reduction in referral rates compared to the Midlands and Northern NHS trusts. This illustrates a clear disparity in impact across England, both in reduction in referral rates to community mental health care and police mental health incidents. Whilst Southern NHS trusts experienced a smaller decrease in mental health referrals, they also saw a much more positive reduction in the total number of mental health incidents that their police forces were dealing with in April 2020 compared to April 2019. Whilst in the North and the Midlands, much higher reductions in referral rates to community mental health care was occupied by a much smaller reduction in the number of police mental health incidents.

As we continue to make our way through the Covid-19 pandemic, this finding must be strongly taken into consideration when formulating strategies and distributing resources across the NHS mental health system in the coming months. There is a strong likelihood that the need for mental health support will increase post Covid-19 and decision-makers must deliver equity of

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For access to full NHS and police mental health datasets included in this report please contact – danny.bowman@parliamentstreet.org