

Have psychological services withstood the test of NHS reform?



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There have been so much attention on the NHS recently, it has been hard to keep abreast of all the emerging stories in the press. Only this month was the publication of a report on the NHS under the Coalition Government (Ham et al, 2015) by the think tank, The King's Fund, whose principal conclusion was that:

"Historians will not be kind in their assessment of the Coalition Government's record on NHS reform. The first three years were monopolised on major organisational changes when the NHS should have been concentrating on growing financial pressures"

Within both the diabetes world and the mental health world, we have seen the impact of these many changes. We frequently meet obstacles when trying to get a true strategic alignment with the provider bodies and the commissioners. This has put a strain on all of us responding to care needs.

It has been suggested by political leaders that mental health is the "greatest unaddressed challenge of our age". It is particularly challenging because even the term "mental health problem" covers such a huge spectrum of presentations. However, we are still seeing the services in the NHS being shrunk and we are not able to guarantee that our patients will receive a quality service.

Recently there has been a focus on the notion of "parity of esteem", which can be defined as valuing mental health equally with physical health. It seems unlikely that if someone had a physical health problem requiring longer-term and more intensive treatment, they could "fall through the net" quite as easily as people requiring longer-term psychotherapy. If a person with cancer had to wait up to a year for treatment, it would be wrong. If then, their treatment was limited to 6 doses of radiotherapy, regardless of the pace of recovery, there would be disbelief. And, if one treatment did not work and a clinician was to say "there is no more we can do", there would be

outrage. Unfortunately, substitute the word "cancer" with "mental health problems" and that too often describes the experience of people in distress in the NHS in 2015. To make parity of esteem between mental and physical health a reality we have a long way to go. It is important that all healthcare professionals are educated about mental health.

You may question what this has to do with diabetes? As diabetes practitioners, we have been screaming out for more psychological services to help people with diabetes deal with the complexities of living with diabetes. We recognise that where we have these services they work very well and have a positive effect on outcome (Nash, 2013).

The recent report by the British Psychoanalytic Council & UK Council for Psychotherapy (2015) provided troubling statistics:

- 57% of practitioners said client waiting times have increased over the last year.
- 52% report fewer psychotherapy services being commissioned in the last year.
- 77% report an increase in the number of complex cases they are expected to deal with.
- 63% said the therapy offered by the NHS is too short for their needs.

It was over 10 years ago that these services were introduced and I would have presumed then that psychological therapies would be part and parcel of today's diabetes care. Sadly, despite the known benefits, these services are still lacking and those that exist are under threat.

Even in straitened times, the NHS must live up to its ideals – a comprehensive service, based on clinical need, not on the ability to pay. This applies as much to mental health as any other area of our health service (British Psychoanalytic Council and UK Council for Psychotherapy 2015).

To provide truly excellent diabetes care we need to safeguard our psychological services and ensure our commissioners and NHS managers understand the unquestionable importance of these services. ■

British Psychoanalytic Council & UK Council for Psychotherapy (2015) *Addressing the deterioration in public psychotherapy provision*. Available at: <http://bit.ly/1zAI0ii> (accessed 25.02.15)

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Nash J (2013) *Diabetes and wellbeing: Managing the psychological and emotional challenges of diabetes type 1 and 2*. John Wiley & Son Ltd, Oxford