

Report prepared for
Department of Health

2011/12

National Survey

of Investment

in Adult Mental Health Services

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1. EXECUTIVE SUMMARY

This is the eleventh annual report presenting the results of the finance mapping exercise. It provides details of the level of investment in mental health services for working age adults (aged 18-64) in England for 2011/12 and compares it with the reported results in previous years.

The data was less detailed in the first year of collection 2001/02 and some services were defined or grouped differently. This does not affect the highest level analysis e.g. total investment in year, but it does impact more detailed comparative analysis with later years. Consequently comparisons at service group level commence from 2002/03.

Previous years' information has been adjusted by the GDP Deflator Figures for 31st March 2012 published by HM Treasury to adjust past investment to constant prices.

A key issue with this year's survey is that the overall proportion of investment which had to be estimated from earlier year's figures rose slightly to 13.8% from 13.7% in 2010/11. Although 86.2% is still a sufficient basis for a reliable national estimate, the proportion of missing data was particularly high in three SHAs – 45.9% reported in the worst case. This means that some SHA data needs to be regarded as approximate and we cannot be confident about the growth rates.

1.1 Key Findings

The adult mental health analysis provides the following overall key findings:

- Total investment in adult mental health services in 2011/12 (reported investment plus estimated unreported investment) was £6.629 billion or £198.3 per head of weighted working age population.
- Total investment increased from £6.550 billion in 2010/11 to £6.629 billion which is a 1.2% cash increase and a real decrease of -1.0%.
- Since 2001/02, the total investment, after allowing for inflation, has increased by 59% in real terms (see Figure 4). At 2011/12 prices, £4.162 billion was spent in 2001/02 and £6.629 billion in 2011/12.
- The percentage of investment reported in direct services (as opposed to overhead or capital costs) is now at its highest recorded level of 82.9% compared to 81.9% in 2010/11.
- Secure Services and Psychiatric Intensive Care Unit (PICU) services remain the largest single area of spend accounting for 19% of expenditure on direct services.

- The reported investment in the three traditional priority areas (Crisis Resolution, Early Intervention and Assertive Outreach) overall has fallen for the first time by £29.3 million. Only Early Intervention reported increased investment.
- The activities carried out by the priority teams implies an increase in productivity since the overall percentage fall in activity was less than the fall in investment (see Figure 9).
- Investment in psychological therapies increased significantly in real terms by 6.0% over the monies in 2010/11 and now forms 7.0% of direct services investment nationally.
- There was effectively no change between 2010/11 and 2011/12 in the proportionate spend on the services provided by the non-statutory sector (25.84% in 2010/11 to 25.90% in 2011/12).

The analysis revealed the following about the investment between SHAs (noting uncertainty about the quality of some SHA data).

- Five SHAs either maintained their investment in real terms or reported modest increases in investment ranging from 0.1% to 4.6%. Five reported reduced investment of up to -5.3% (London, North East, South Central, West Midlands and Yorkshire and Humber).
- London lost its position as the highest weighted investment per head SHA to the South West. Weighted investment in adult mental health services in the South West was £207.7 per head compared to the national average of £198.3 per head.
- The amount invested per weighted head varies among SHAs by between 4.8% above, and -8.7% below the national average (£198.3).

The level of unreported investment in 2011/12 (13.8%) is very marginally higher than in previous years. This is not always easy to identify as there is no certainty that particular services commissioned in one year will remain unchanged in following years.

On the other hand, this is balanced by our success in obtaining returns from some areas who did not submit in recent years, which increases the accuracy of our estimates made of the value of missing data.

Our approach in quantifying this unreported data is outlined in Appendix Two but is basically to identify unreported data, cross reference it to previous years returns and increase it for inflation using HM Treasury GDP Deflator figures.

Assuming that missing data has increased in the latest year in line with inflation is a reasonable assumption given the lack of missing returns. However, it is only an assumption and if the proportion of missing data is substantial, say a quarter or more, the estimated increase becomes approximate. If we have been specifically advised that a service has been decommissioned, we have not included investment for that service in the figures for 2011/12.

1.2 Acknowledgements and Thanks

The data and information in this report could not be prepared without the dedicated contribution of those people involved with Local Implementation Teams, Provider and Commissioning organisations, in both NHS and Local Authorities, who have worked hard, in what has been difficult circumstances, to help produce what is probably the most comprehensive and detailed annual guide to investment in mental health services nationally.

The author Tony Ingham at Mental Health Strategies would like to record his appreciation of the support and hard work of all these people as it has been vital to the completion of this review.

2. BACKGROUND, SCOPE AND PROCESS

2.1 Background

Financial mapping data has been collected annually since 2001/02 as part of an annual process on behalf of the Department of Health (DH).

The overall aim is to establish:

- the level of investment in mental health services planned for each financial year for adults of working age and older people in England as a whole.
- the level and nature of investment in the above mental health services for the populations of SHAS, LITs and PCTs within England, and
- the level and nature of mental health investment by statutory sector commissioners within England.

The analysis in this report covers services for working age adults. The analysis is derived from the detailed financial files completed by PCTs, Mental Health Trusts and Local Authorities and then submitted to Mental Health Strategies (MHS) by Local Implementation Teams (LITs). A separate report covers services for older adults.

There are specific reports sent to each LIT that cover details of their investment in services for both working age adults and older adults.

2.2 Scope

The scope of the Finance Mapping exercise for Working Age Adults is shown below.

	Commissioned by		Provided
	PCTs	Local Auth	By
	✓	✓	
MH Trusts			✓
Directly Providing PCTs			✓
Local Authorities			✓
Non Statutory sector			✓

2.3 Process

Organisations were asked to submit investment figures for working age adult services on the basis of expected outturn (or actual outturn figures if available) for 2011/12. Consequently reported investment may not exactly match the actual outturn figures reflected in each Organisation's annual accounts and makes no reference to programme budgeting, which the DH Mental Health Division do not require for the Annual Review and which until now provides a far less detailed analysis of mental health investment.

LIT leads carried out a co-ordination role and forwarded returns to Mental Health Strategies for validation and analysis. High level reviews of each submission were carried out and any specific questions about the quality and accuracy of some of the information provided were discussed with each LIT or provider/commissioner representative and agreed changes incorporated into revised submissions.

The HM Treasury GDP inflation rates of 31st March 2012 have been used in assessing the real change in investment reflected in the annual comparisons.

There has also been an estimate of the value of investment not included in individual submissions, as in previous years, and details of this estimated cost of, and the methodology used for, unreported investment are set out in Section 2 and Appendix Two.

There have been no significant changes to the methodology or collection process.

2.4 Coverage of Data Returns

The number of LITs in England has reduced slightly to 144 compared to 146 in 2010/11. There has been an overall reasonable response rate by NHS and Local Authority commissioners in adult mental health services, despite the difficult and challenging circumstances faced by participating organisations. As noted already and set out in more detail in Appendix Two, response rates for West Midlands and South Central SHAs were low.

As in 2010/11, the lowest response rate was from organisations in the West Midlands.

Data quality for adult services continues to be reasonable considering the exercise coincided with organisational and staff movements leading to some difficulties.

There were inevitably some issues of data quality with information provided due to the number of LITs and individuals involved. These occurred as a result of changes in local commissioning arrangements, the people undertaking this work as well as local interpretation of the guidance made available to support this process. Whilst most organisations supplied returns on time, many others provided their figures late and in a piecemeal fashion.

There is a significant improvement in the quality of information where Local LIT Leads played an active role. This result benefits both the LITs and National reports.

3. NATIONAL ANALYSIS

3.1 Scope for detailed analysis

We have concentrated on comparing detailed 2011/12 results with those of 2002/03 and later years since data for 2001/02 were defined or grouped differently. The investment comprises either reported expenditure or estimates of unreported spend. The sum of the two comprises the total investment.

3.2 Guide to this section

The national analysis section can be broadly split into two parts.

The first part provides a high level picture of national investment and includes:

- Total reported investment by year
- Unreported Investment
- Total Real Resources – including uplifts for Inflation.
- Profile of investment according to direct, indirect, overhead costs and capital charges

The second part offers a more detailed picture of investment within direct services by group and key priority areas and includes a comparison of investment according to Strategic Health Authority by:-

- Commissioner and Provider type
- Priority Services Investment
- Psychological Therapies and Direct Payments
- National Direct Services Investment

3.3 Total Annual Investment in Adult Mental Health

Very few data collections are ever 100% complete and consequently any comprehensive picture of investment will include both reported data and estimates of expenditure that is unreported. Financial mapping is no different.

A summary of total resources in adult mental health services incorporating estimates of unreported information is shown in Figure 1.

Figure 1: Total investment in adult mental health services

Cash Investment in £' Billions					
Year	Reported Investment	Estimated Unreported	Total Investment	Annual Increase	% Cash Increase
2001/02	3.129	0.125	3.254		
2002/03	3.489	0.220	3.709	0.455	14.0%
2003/04	3.910	0.033	3.943	0.234	6.3%
2004/05	4.474	0.046	4.520	0.577	14.6%
2005/06	4.679	0.225	4.904	0.384	8.5%
2006/07	4.991	0.172	5.163	0.259	5.3%
2007/08	5.512	0.018	5.530	0.367	7.1%
2008/09	5.849	0.043	5.892	0.362	6.5%
2009/10	6.001	0.322	6.323	0.431	7.3%
2010/11	5.655	0.895	6.550	0.227	3.6%
2011/12	5.717	0.912	6.629	0.078	1.2%

The above identifies annual increases in total cash investment in previous years ranging between 1.2% between 2010/11 and 2011/12, to a maximum of 14.6% between 2003/04 and 2004/05.

For the last 3 years since 2008/09, the total cash investment increased by £0.736 billion (12.5%).

Total investment rose by £78 million (1.2%) between 2010/11 and 2011/12 before any adjustment in inflation.

The inclusion of unreported investment in the total amount enables an accurate comparison of national levels of investment from year to year. When reporting total investment levels on a national basis use the figures in Figure 1 or Figure 4, dependant on whether inflation is being taken into account.

3.4 Unreported Investment

The estimated level of unreported investment for 2011/12, expressed as a percentage of the total investment is 13.8% compared with 13.7% in 2010/11.

Of the estimated unreported investment, 5.9% of the 14.2% was due to some West Midlands LITs not submitting data.

The value of the unreported investment has been based on previous years' returns plus inflation as described in Appendix 2. The trend in estimated investment from 2001/02 to 2011/12 is shown in Figure 2.

Figure 2: Estimate of 'unreported' investment (see also Appendix Two for the methodology of its calculation)

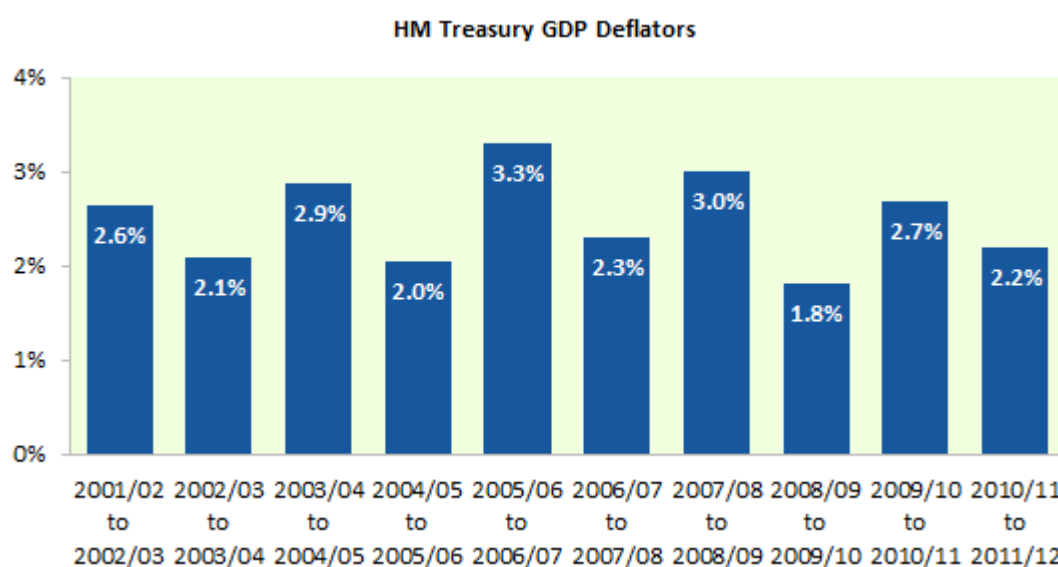
Year	Estimated Unreported Investment (£) Billions	Missing data as % of Total
2001/02	0.125	3.8%
2002/03	0.220	5.9%
2003/04	0.033	0.8%
2004/05	0.046	1.0%
2005/06	0.225	4.6%
2006/07	0.172	3.3%
2007/08	0.018	0.3%
2008/09	0.043	0.7%
2009/10	0.322	5.1%
2010/11	0.895	13.7%
2011/12	0.912	13.8%

3.5 Total Real Resources in Adult Mental Health

Each year's total investment has been recalculated to the pay and price levels prevailing in 2011/12 in order to identify real increases in annual investment.

The annual HM Treasury GDP percentages used are those updated on 31st March 2012. The GDP deflators used are set out in Figure 3.

Figure 3: Inflation uplifts 2001/02 to 2011/12



Applying the HM Treasury GDP percentage uplifts in Figure 3 to the total investment in Figure 2 shows real increases in investment since 2001/02 as shown in Figure 4.

Figure 4: Total Real Investment in Adult Mental Health services 2001/02 to 2011/12 (at 2011/12 pay and price levels)

Real Term Investment in £'Billions					
Year	Reported Investment	Estimated Unreported Investment	Total Investment	Annual Increase	% Increase
2001/02	4.002	0.160	4.162		
2002/03	4.348	0.274	4.622	0.460	11.1%
2003/04	4.773	0.040	4.814	0.191	4.1%
2004/05	5.309	0.055	5.364	0.550	11.4%
2005/06	5.442	0.262	5.703	0.339	6.3%
2006/07	5.618	0.194	5.812	0.108	1.9%
2007/08	6.066	0.019	6.085	0.274	4.7%
2008/09	6.249	0.046	6.295	0.210	3.4%
2009/10	6.298	0.338	6.636	0.341	5.4%
2010/11	5.780	0.914	6.694	0.058	0.9%
2011/12	5.717	0.912	6.629	-0.066	-1.0%
Increase in the 10 years 2001/02 to 2011/12			2.467		59.3%

The biggest annual increase was in 2004/05 (11.4%) whilst the investment after inflation for 2011/12 nationally fell by -1.0%.

The overall real increase in total investment since 2001/02 is £2.467 billion or 59.3% after adjusting for inflation.

It is important to understand what the sums in Figures 1 and 4 are telling us and also what they are not telling us. Cash investment has certainly risen between 2010/11 and 2011/12 but real term investment has not kept pace with inflation and fell by -1.0%.

What it does not tell us are the reasons for that difference. There may be many reasons behind this. In the course of validation of the returns, when we queried major changes in investment, some of the reasons offered included

- Monies saved by bringing services previously provided by the Non Statutory sector, back into “in house NHS provision”
- Monies saved by using Non Statutory providers instead of “in house” as they offered lower unit costs

We do not have sufficient feedback on which to base general conclusions, neither is expenditure on its own adequate to measure how effectively services and care are, or are not delivered. This is beyond the scope of Financial Mapping but readers are advised to note the above points.

3.6 Overall Use of Investment

The total investment is analysed in three groupings – direct costs, indirect costs/overheads and capital charges. The overall percentage split between these cost categories each year is shown in Figure 5.

This shows an increase of 5.9% (from 77% to 82.9%) in the proportions of investment reported as spent on direct services since 2001/02. The increase in the three years since 2008/09 is 2.0%.

Out of a total of £6.628 billion in 2011/12, the amount reported spent on direct services was 82.9% or £5.497 billion.

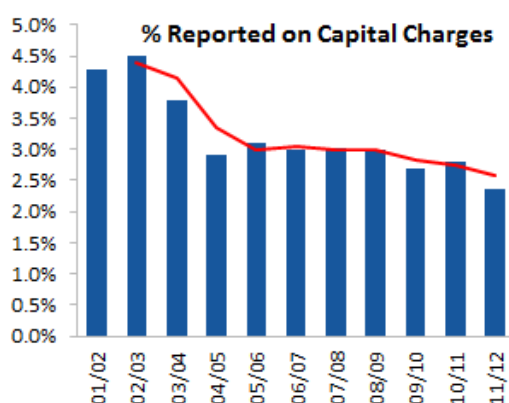
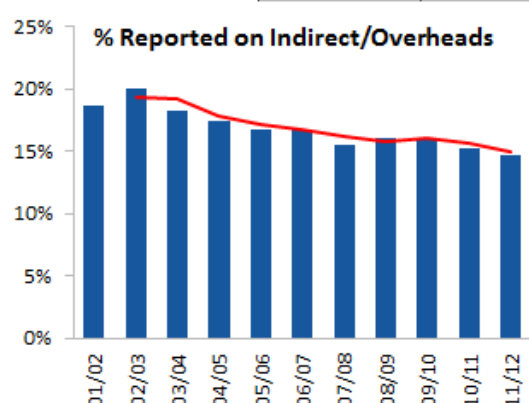
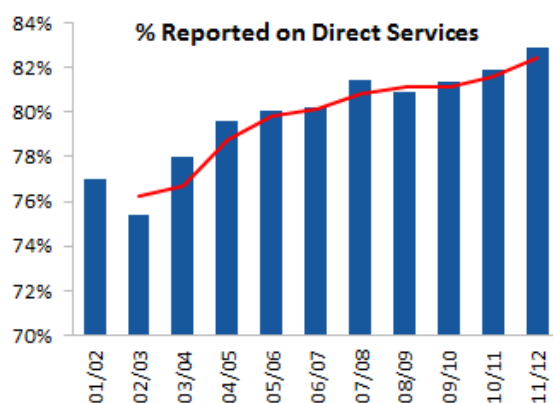
The proportion reported spent on direct services has increased by 1.0% since 2010/11 with consistent increases since 2002/03 apart from a dip in 2008/09. The same period has shown mostly downward trends on the non direct services components.

Figure 5: Overall cost profile combined chart and table

% Reported Spend by Cost Area				% Change over previous year		
Financial Year	Direct	Indirect/ Overheads	Capital Charges	Change in % Direct	Change in % Indirect/Oheads	Change in % Capital Charges
2001/02	77.0%	18.7%	4.3%			
2002/03	75.4%	20.1%	4.5%	-1.6%	1.4%	0.2%
2003/04	78.0%	18.2%	3.8%	2.6%	-1.9%	-0.7%
2004/05	79.6%	17.5%	2.9%	1.6%	-0.7%	-0.9%
2005/06	80.1%	16.8%	3.1%	0.5%	-0.7%	0.2%
2006/07	80.3%	16.7%	3.0%	0.2%	-0.1%	-0.1%
2007/08	81.4%	15.6%	3.0%	1.2%	-1.2%	0.0%
2008/09	80.9%	16.1%	3.0%	-0.5%	0.5%	0.0%
2009/10	81.3%	16.0%	2.7%	0.4%	-0.1%	-0.3%
2010/11	81.9%	15.3%	2.8%	0.6%	-0.7%	0.1%
2011/12	82.9%	14.7%	2.4%	1.0%	-0.6%	-0.4%
% Change over						
Last 10 years	5.9%	-4.0%	-1.9%	<i>Above % reported figures rounded to nearest 1 decimal point for presentation purposes</i>		
Last 3 years	2.0%	-1.4%	-0.6%			
Last 1 year	1.0%	-0.6%	-0.4%			

These changes in percentages may be due to combinations of specific examples of improved quality of information submitted, as well as substantive change in the overall level of investment in direct service provision.

The percentages reported annually are shown on the next page with a two year trend line.



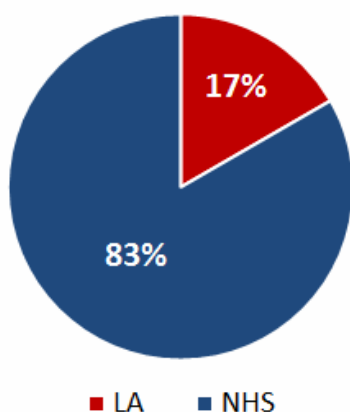
The **RED** line represents a two year trend line

3.7 Overall Commissioner and Provider Analysis

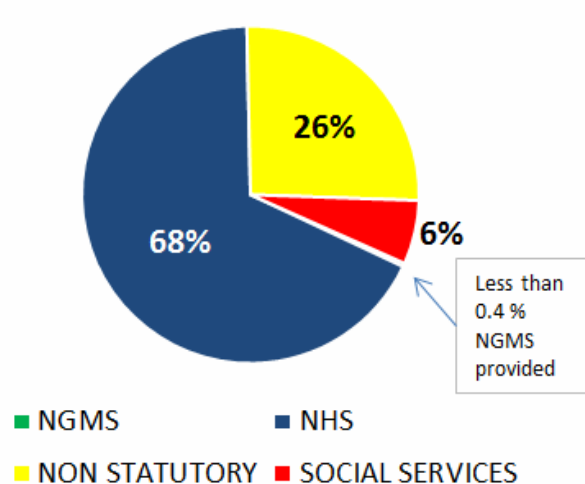
We can identify the type of organisation that both commissions and directly provides adult mental health services and the national picture is shown in Figure 6 below.

Figure 6a: National commissioner and provider type analysis

Who Commissions Adult Services



Who Provides Adult Services



Note: For presentation purposes, percentages have been rounded up

This year 2011/12 has seen a 1% increase in the overall percentage share of investment commissioned by the NHS compared with 2010/11. The figures for this year and last are shown at right.

Commissioner Type Share			
	2010/11	2011/12	Change
LA	17.5%	16.7%	-0.9%
NHS	82.5%	83.3%	0.9%

Figure 6a and the following table shows that the amount of work undertaken by non statutory providers fell slightly as did that by the NGMS providers within the NHS.

Provider Type	2010/11	2011/12	Change
NGMS	0.35%	0.34%	-0.01%
NHS	67.10%	67.65%	0.55%
NON STATUTORY	25.84%	25.90%	0.06%
SOCIAL SERVICES	6.71%	6.11%	-0.60%

There are a small amount of services provided by the Non General Medical Services (NGMS) sector (0.34%) comprising services delivered by the General Medical Services sector but funded from mainstream PCT resource allocations. NHS Providers directly provided 67.7% of the adult services by value, an increase of 0.55% over last year. Direct provision, as opposed to direct commissioning, by social services fell by 0.60%.

Analyses of commissioner and provider investment by SHA can be seen in Appendices 6 and 7. However, if we look at the direct services which comprises the vast bulk of investment we can clearly identify the largest areas of investment and who commissions what.

Figure 6b: National commissioner analysis of Direct Services

Service Group in Descending Value order	Total Spend	Commissioner Type Share	
Secure Services and PICU	1,056,309.14		
Clinical Services	971,705.10		
Community Mental Health Teams	756,124.49		
Continuing Care	644,231.56		
Access & Crisis Services	588,402.00		
Accommodation	527,780.26		
Psychological Therapy Services (IAPT)	213,363.32		
Psychological Therapy Services (Non IAPT)	172,244.06		
Employment/Day/Resource Centres	131,650.85		
Home Support Services	110,083.03		
Other community and hospital professional teams	89,376.11		
Services for Mentally Disordered Offenders	72,394.48		
Support Services	66,374.87		
Personality Disorder Services	35,892.17		
Direct Payment	30,525.16		
Carer's Services	26,865.22		
Mental Health Promotion Services	3,297.49		
Total Reported Investment in £'000s	£5,496,619		

3.8 Priority Services Investment

The three key modernisation services identified as priority developments in the mental health National Service Framework and National Health Service Plan were:

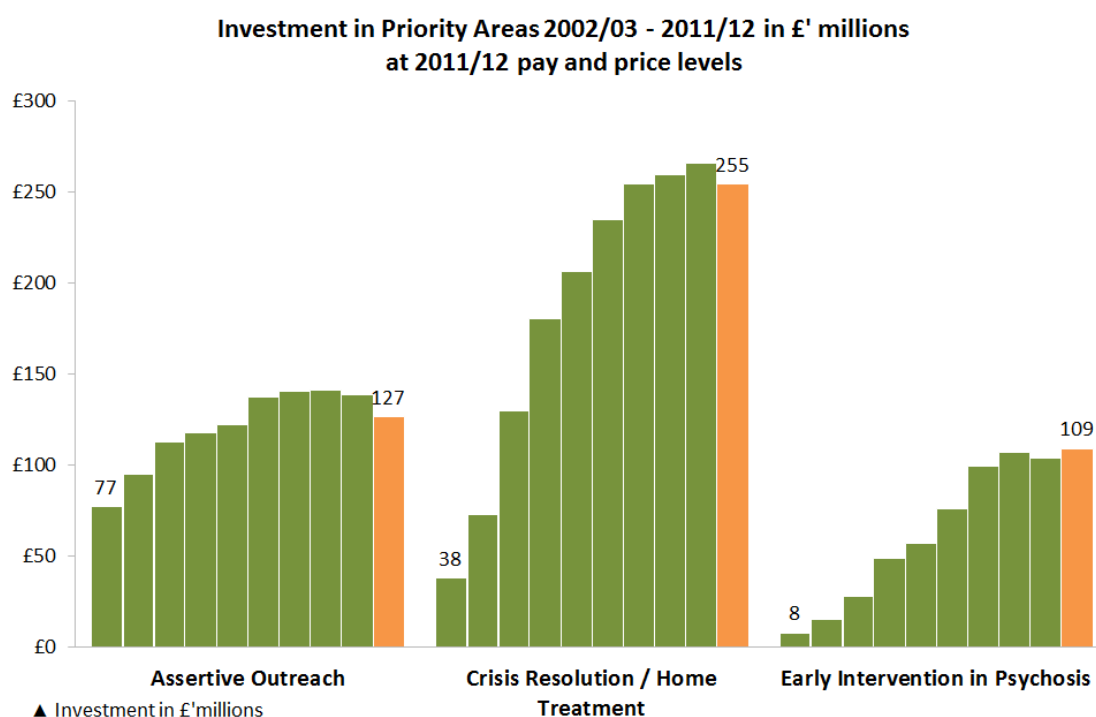
- Assertive Outreach
- Crisis Resolution/Home Treatment, and
- Early Intervention in Psychosis.

Levels of the reported investment in these service areas from 2002/03 onwards are shown in Figures 7 and 8.

Note that investment for 2002/03 to 2008/09 shown in Figures 7 and 8 are based on reported data and do not include estimates of any missing data. The figures for 2009/10 to 2011/12 include both reported and estimated investment. Since the levels of missing data in 2002/03 to 2008/09 were minimal, Figures 7 and 8 should still reasonably reflect the actual investment figures over the years.

Figure 7 charts the investment figures whilst Figure 8 tables the investment amounts and shows the real changes in investment per year after inflation has been taken into account.

Figure 7: Reported investment in priority areas 2002/03 to 2010/12



The investment in real terms after inflation is shown in Figure 8. This shows each year's reported investment per year at 2011/12 pay and prices illustrating how this has changed over the years.

Figure 8: Table of Real Term investment in priority service areas 2002/03 to 2011/12

Real Term Investment at 2011/12 levels

	Assertive Outreach	Crisis Resolution / Home Treatment	Early Intervention in Psychosis	Total in £ millions	% real increase per year	Actual Increase
2002/03	77.5	38.2	8.0	123.6		
2003/04	95.5	73.2	15.7	184.4	49%	60.8
2004/05	112.9	130.3	28.1	271.3	47%	86.9
2005/06	118.0	180.5	48.7	347.2	28%	75.9
2006/07	122.2	206.5	57.4	386.1	11%	38.9
2007/08	137.5	235.2	76.1	448.8	16%	62.8
2008/09	140.8	254.8	99.5	495.2	10%	46.3
2009/10	141.1	259.9	107.3	518.4	5%	23.2
2010/11	138.6	266.1	104.1	520.0	0%	1.6
2011/12	126.8	254.6	109.3	490.7	-6%	-29.3

Real term increase 2002/03 to 2011/12 in £' millions

367.1

Significant increases in investment occurred in the earlier years and the annual percentage increase had declined to 5% by 2009/10. Investment is now declining in two of the three traditional priority areas with the exception of early intervention in psychosis. The percentage decrease since 2010/11 was -6.0% and reported investment in these specialist mental health teams overall has declined by £29.3 million in the last year.

Relationship between Priority Investment and Activity

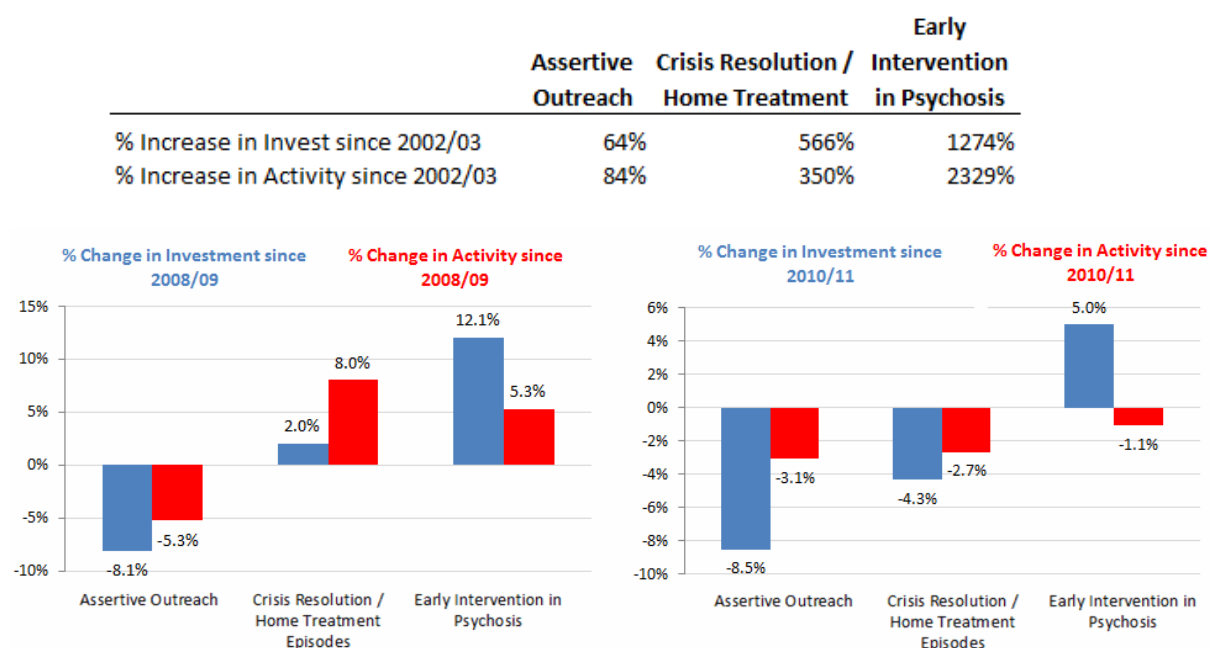
Matching investment figures with similar figures on activity is complicated due to the way in which the activity figures are collected. Whilst complete year figures for crisis resolution/home treatment are available, data on assertive outreach and early intervention in psychosis are collected as a snapshot in time at the end of March – the first as the number of home treatments (not patients seen) and the second as the number of patients currently being seen.

These figures do however provide a broad indication of trends since 2002/03 and the source figures can be seen in Appendix 5.

Figure 9 comprises one table and two charts which compare the rises in investment and activity using figures from the Health and Social Care Information Centre supplied by Primary Care Trusts with a specific focus upon the last three years and since last year.

The table in Figure 9 shows the change since 2002/03 whilst the charts compare the position since 2008/09 and 2010/11.

Figure 9: Comparative Changes in Priority Services Investment and Activity since 2002/03



Some caution is required when drawing conclusions from these figures since only one of the three priority areas (crisis resolution) uses complete year figures¹.

That said,

- Assertive outreach services increased by 64% in investment and 84% in activity - a 20% greater activity over investment since 2002/03. Over the last three and one year periods, although real term investment fell, activity levels fell by much smaller percentages.

These drops in assertive outreach investment and activity are not criticisms as these services are working to capacity and have in effect met their national plans (to treat 20,000 patients at any given time).

- The increase in crisis resolution home treatment since 2002/03 is much smaller than the increase in investment although increases in activity over the three years since 2008/09 far outstripped increases in investment.

Crisis resolution investment in the last year since 2010/11 dropped by -4.3%, but activity fell by only -2.7%

- The increased activity in early intervention caseload since 2002/03 is nearly double the increase in investment. Figures for the past year since 2010/11

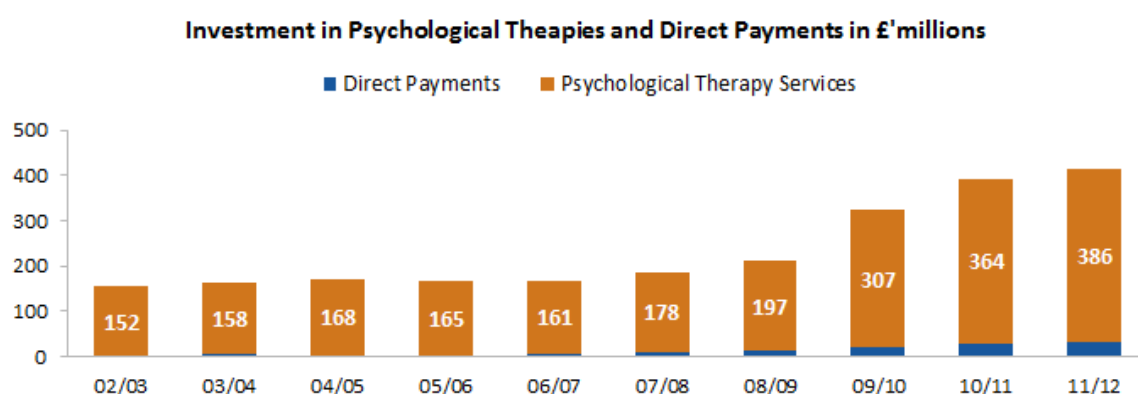
¹ Crisis Resolution Team data capture the numbers of home treatments provided over the full year. Early intervention engage with patients over three years The reported figures are for total EI caseload at the end of a given year. Assertive Outreach teams engage with patients that are hard to engage often with chaotic lifestyles. Data shows the number of people on caseload at the end of the year.

suggest that activity has failed to keep pace with increases in investment with a small decrease in reported activity since 2010/11.

3.9 Psychological Therapies and Direct Payments

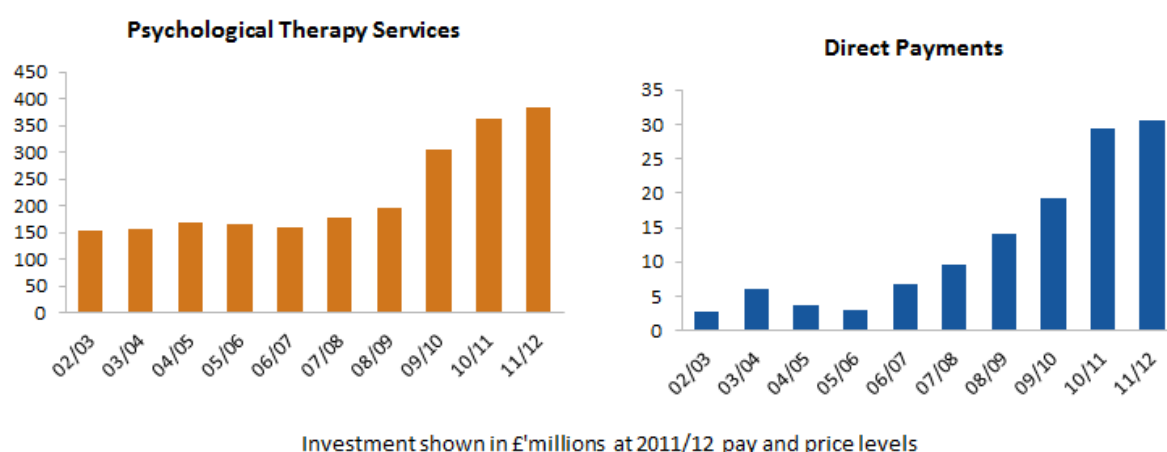
Improving access to psychological therapies for the recovery of patients with depression and anxiety is a top government priority as is improving patient choice. Direct payment to individuals is one way of facilitating greater choice. Information on these two separate areas are shown in Figures 10 and 11.

Figure 10: Investment in Psychological Therapies and Direct Payments since 2002/03



Annual investments in these two services are separately shown in the two charts comprising Figure 11.

Figure 11: Separate Investment in Psychological Therapies and Direct Payments



Investment in psychological therapies (PT) increased in real terms by 6.0% (8.4% in cash terms) over 2010/11 to £386 million whilst the real terms monies reported spent on direct payments rose by 3.5% (5.8% in cash terms) to about £31 million.

Both PT and direct payments have experienced an increase in investment against an overall background of minimal change in investment in many areas.

The number of people receiving PT under the Improving Access to Psychological Therapies (IAPT) programme, (measured by the people entering treatment) continues to increase.

People receiving Psychological Therapies via IAPT

Quarter	
Q3 2010/11	92,682
Q4 2010/11	116,735
Q1 2011/12	120,844
Q2 2011/12	126,949

3.10 Overall Profile of Direct Services Investment

The finance mapping analyses adult mental health investment across sixteen service categories that are consistent with the service mapping definitions, and also across three broad cost groups (i.e. direct, indirect/overheads and capital charges).

It is possible to carry out analysis in greater depth within the sixteen service categories e.g. Psychiatric Intensive Care Units within the Secure Services and PICU service category.

The biggest areas of investment have consistently been:

- Secure Services and PICU
- Clinical services
- Community Mental Health Teams (CMHTs)
- Continuing Care
- Access & Crisis Services

The specific services included within the above areas are listed in Appendix Three, including the aggregate level of investment for each. The analysis in Figure 12 covers investment since 2002/03 in direct services only. The local apportionment of indirect costs/overheads will differ between organisations but this is minimised when analysing at a national level; it may still account for some of the changes identified in the following table.

Figure 12a: Investment in direct service categories (at 2011/12 pay and price levels)

Direct Service Categories	2011/12 Investment	% Direct
Secure Services and PICU	1,056	19%
Clinical Services	972	18%
CMHTs	756	14%
Continuing Care	644	12%
Access & Crisis Services	588	11%
Accommodation	528	10%
Psychological Therapy Services	386	7%
Employment/Day/Resource Centres	132	2%
Home Support Services	110	2%
Others	325	6%
Total Direct Services Investment in £'000s	5,497	100%

The orange bars to the right hand side show each category's percentage of the reported 2011/12 direct services investment. e.g. Secure Services and PICU services represented 19% of the total £5,497 billion reported invested in direct services in 2011/12

Note: PICU = Psychiatric Intensive Care Units

The growth of investment for each year is shown in Figure 12b.

Figure 12b: Growth of investment in direct service categories (at 2011/12 pay and price levels)

Direct Service Categories	2002 /2003	2003 /2004	2004 /2005	2005 /2006	2006 /2007	2007 /2008	2008 /2009	2009 /2010	2010 /2011	2011 /2012
Secure Services and PICU	402	523	700	768	804	946	967	970	1039	1056
Clinical Services	807	895	990	974	916	970	924	879	973	972
CMHTs	563	585	643	639	661	734	732	730	755	756
Continuing Care	398	419	456	447	490	548	609	594	634	644
Access & Crisis Services	217	280	356	429	453	526	580	570	607	588
Accommodation	337	408	413	421	428	472	447	485	531	528
Psychological Therapy Services	152	158	168	165	161	178	197	307	364	386
Employment/Day/Resource Centres	175	189	176	175	171	165	163	163	157	132
Home Support Services	67	77	122	106	111	119	124	116	116	110
Other Community & Hospital Professionals	54	52	76	100	84	112	121	98	94	89
Services for MDOs	35	59	49	44	56	55	58	62	59	72
Support Services	50	47	49	50	51	57	61	66	73	66
Personality Disorder Services	0	1	5	12	18	17	23	31	29	36
Direct Payments	3	6	4	3	7	10	14	19	29	31
Carers' Services	11	16	20	22	22	25	29	28	27	27
Mental Health Promotion	3	3	3	4	3	5	4	3	3	3
Total Direct Services	3,276	3,718	4,229	4,359	4,435	4,939	5,056	5,123	5,490	5,497
% Real increase over previous year		13.5%	13.7%	3.1%	1.7%	11.4%	2.4%	1.3%	7.2%	0.1%

Investment on the new IAPT services within the Psychological Therapies group was collected for the first time in 2009/10.

Note: PICU = Psychiatric Intensive Care Units; MDOs = Mentally Disordered Offenders

Readers should note that in Figure 12b, the investment figures for 2010/11 onwards are based on the combined reported and estimated value of the unreported investment, unlike figures prior to 2010/11 which are based on reported investment only.

This means that the difference between 2009/10 and 2010/11 would inflate the real change in investment between these two years. This is a consequence of the larger degree of estimated investment in that year's data due principally to the lower return rates from the West Midlands area.








Nevertheless, Figure 12b, (due to the much lower levels of estimated investment in the other years), should provide a reasonable picture of how investment has changed since 2002/03.

The overall real growth in total investment in direct services, (using the HMP Treasury GDP Deflators - see Figure 3) between 2002/03 and 2011/12 is around 67.8% but the actual increases in specific service categories vary widely.

Although analysis is possible back to 2002/03, more recent years are of greater interest. We looked at the change since 2002/03 (9 years), since 2008/09 (3 years) and the last year since 2010/11.

The percentage real change in investment of the seven highest spending services over the past nine, three and the last year since 2010/11 are shown in Figure 12c.

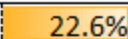
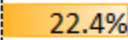

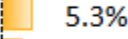
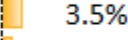
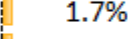
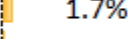
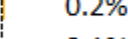
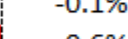
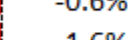
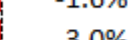
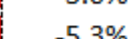
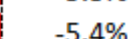
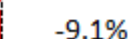
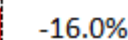

Figure 12c: Percentage change in Highest Spending Services (at 2011/12 pay and price levels)

		% Change		
		Last 9 years	Last 3 years	Last year
	Access and Crisis Services	171%	1.4%	-3.0%
	Secure Services and PICU	162%	9.2%	1.7%
	Psychological Therapies	154%	95.4%	6.0%
	Continuing Care	62%	5.8%	1.7%
	Accommodation	57%	18.0%	-0.6%
	CMHTs	34%	3.2%	0.2%
	Clinical Services	20%	5.2%	-0.1%

All of the sixteen direct service groups have seen an increase in real term investment since 2002/03. Psychological therapies in 2011/12 rose by 6.0% over its 2010/11 investment level (8.4% in cash terms).

Looking at the change since 2010/11 in Figure 12b, the percentage change in investment by direct services is shown in Figure 12d.

Figure 12d: Percentage change in Direct Services Investment (at 2011/12 pay and price levels)

Service Group	% Increase 2010/11 to 2011/12	
Personality Disorder Services		22.6%
Services for MDOs		22.4%
Psychological Therapy Services		6.0%
Mental Health Promotion		5.3%
Direct Payments		3.5%
Secure Services and PICU		1.7%
Continuing Care		1.7%
CMHTs		0.2%
Clinical Services		-0.1%
Accommodation		-0.6%
Carers' Services		-1.6%
Access & Crisis Services		-3.0%
Home Support Services		-5.3%
Other Community & Hospital Professionals		-5.4%
Support Services		-9.1%
Employment/Day/Resource Centres		-16.0%

Although the largest increases in total investment since 2002/03 remain Secure Services and PICU (£654.1m) and Access and Crisis (£371.0m), increased investment in psychological therapies since 2002/03 (£233.5m) is not far behind.

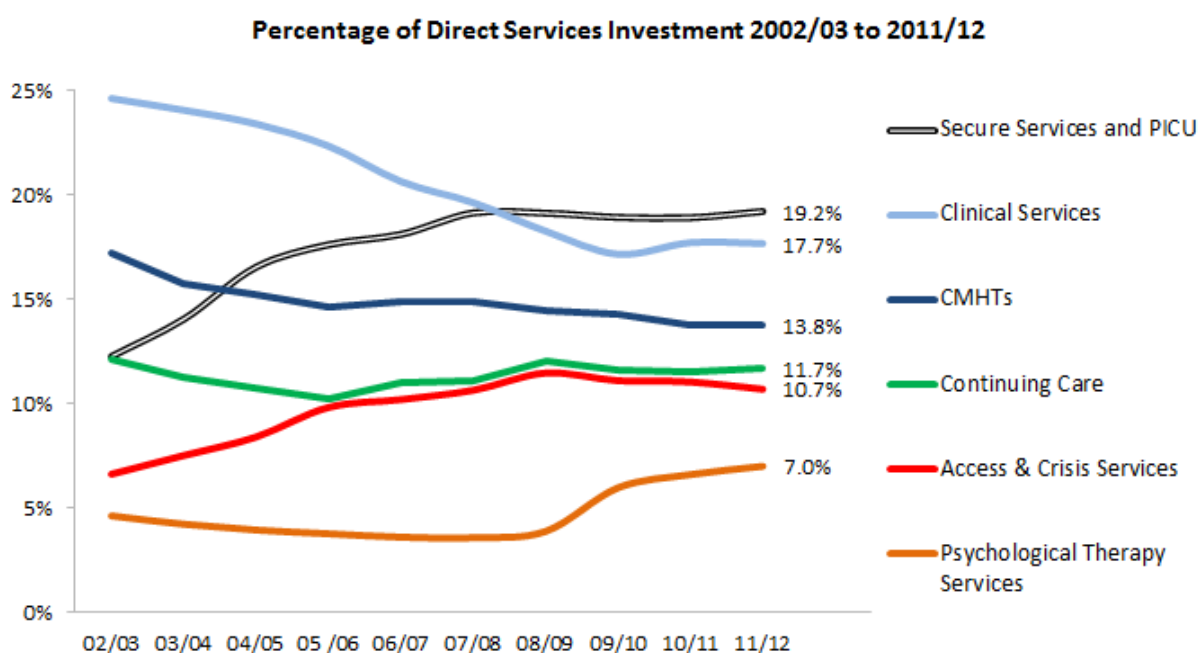
The areas reporting the largest real increases in the three years since 2008/09 have been:

Psychological Therapies	£188.2m
Secure Services and PICU	£88.8m and
Accommodation	£80.0m

This needs to be seen alongside movements in each service group's share of the year's direct investment.

Figure 13 tracks the proportion of direct services investment in seven specific service groups chosen for being the biggest investment areas or emerging areas of interest.

Figure 13: Percentage of Direct Services investment since 2002/03



Nationally increased investment in access and crisis services has been mirrored by a reduction in the relative position of clinical services and CMHTs.

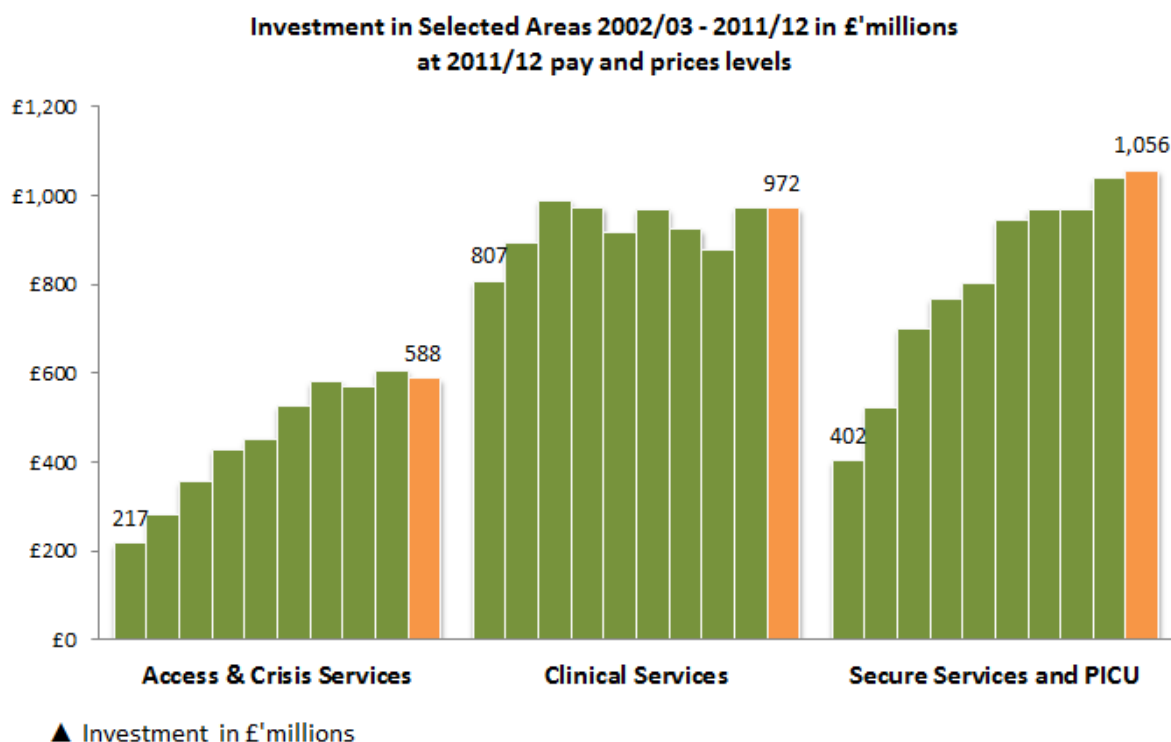
The clinical services group comprises the seven service types (including adult acute inpatient services) listed in Appendix Three.

The percentage of reported expenditure on continuing care has stabilised over the last three years. Investment in day services has now fallen to less than 3% whilst psychological therapies has now risen to 7.0% of direct investment.

Investment in Clinical Services (£972m) has again been exceeded this year by spend on Secure Services and PICU services (£1056m); this now accounts for over 19% of total investment in direct services compared with 12% in 2002/03.

It is worth reflecting briefly on the monies spent on clinical services and Secure Services and PICU services relative to that spent on access and crisis services, has changed over the years. Figure 14 compares these figures.

Figure 14 Reported Investment in selected areas 2002/03 to 2011/12



If we look at the ranking of highest spending areas for 2011/12

- Access and crisis services remains the fifth highest spending area in 2011/12
- Clinical services remains the second highest spending area
- Secure Services and PICU is still the highest area of spend for 2011/12.

Other points to note apart from the above three service areas are:

- The last three years collections have seen a dramatic rise in investment in psychological therapies which now account for 7.0% of total investment
- Investment in home support services has nearly doubled since 2002/03 to 2008/09 but fell slightly in 2009/10 and in 2011/12
- Direct payments have more than doubled in real terms since 2008/09, from £14 million to £31 million in 2011/12 or 59% increase.

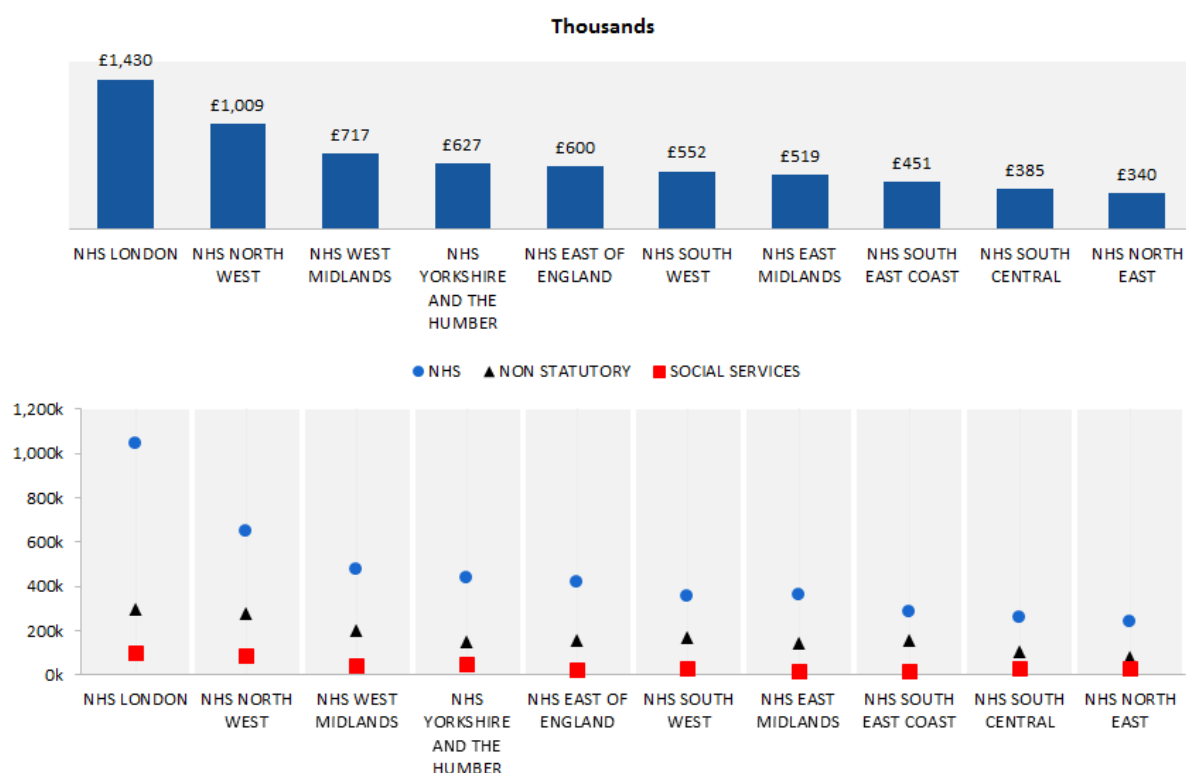
4. GEOGRAPHICAL ANALYSIS

4.1 Overall Geographic Use of Investment

The distribution of investment varies around the country, as does the relative proportions delivered by the key provider types. These are NHS providers, the Non Statutory sector and Local Authority Social Services departments.

Figure 15 illustrates where the investment is geographically spent. The lower part shows the relative amounts directly delivered by the key provider types.

Figure 15: Overall Geographical Investment and Provider Charts



Most NHS provision is by specialist mental health trusts, but some is funded from GMS funding but actually delivered by NHS Non GMS providers. Such provision is known as NGMS (see Appendix Eight page 51).

Due to the small provider share by NGMS providers, such provision has been included in the overall NHS provider type within the lower part of Figure 15.

4.2 Changes in SHA Investment 2010/11 to 2011/12

Percentage changes within each Strategic Health Authority are summarised in Figure 16 which is based on the combined reported and estimated unreported investment for each year. Both years are expressed at 2011/12 rates.

Figure 16: SHA Investment and real term percentage changes 2010/11 to 2011/12

TOTAL CHANGE IN SHA INVESTMENT in £'000s			
SHA	2010/11 at 2011/12 rates	2011/12	% Real terms Change
NHS East Midlands	496,003	518,723	4.6%
NHS East of England	598,979	599,646	0.1%
NHS London	1,492,409	1,429,536	-4.2%
NHS North East	348,487	339,574	-2.6%
NHS North West	996,962	1,008,797	1.2%
NHS South Central	407,143	385,437	-5.3%
NHS South East Coast	445,606	450,696	1.1%
NHS South West	547,096	551,930	0.9%
NHS West Midlands	731,743	717,463	-2.0%
NHS Yorkshire and the Humber	629,822	626,768	-0.5%
TOTAL	6,694,249	6,628,571	-1.0%

Five SHAs either maintained their investment in real terms, or reported small increases ranging from 0.1% to 4.6%. Five SHAs showed real decreases in investment from 2010/11.

■ South Central	(-5.3%)
■ London	(-4.2%)
■ North East	(-2.6%)
■ West Midlands	(-2.0%) and
■ Yorkshire and the Humber	(-0.5%)

4.3 Differences in Weighted Investment per Head between SHAs






















A key benchmark however remains the level of investment per head of weighted working age population. The weighting factor adjusts the actual adult population to take account of relative mental health need within each LIT; it already reflects the higher cost of staff in areas such as London thus facilitating direct comparison. The crude 18-64 population based upon the mid year estimates for 2009 kindly provided by the Office of National Statistics is weighted by:

- a market forces factor
- an emergency ambulance cost adjustment, and
- the mental health need index.

The weighted population thus takes into account mental health need and financial factors necessary to enable a fair comparison between high and low cost areas.

Figure 17 identifies for each Strategic Health Authority planned investment per head of weighted working age population in adult mental health services for 2011/12 using the combined reported and estimated unreported investment for each Strategic Health Authority divided by its weighted population. This methodology is consistent with that adopted in previous years.

Figure 17: SHA investment per Head of Weighted Working Age Population

SHA	Total Investment 2011/12 in £'000s	Overall Investment per Head in £'s
NHS South West	551,930 	£207.7 
NHS London	1,429,536 	£207.1 
NHS South East Coast	450,696 	£203.3 
NHS West Midlands	717,463 	£202.7 
NHS North West	1,008,797 	£201.6 
NHS East of England	599,646 	£197.1 
NHS South Central	385,437 	£192.4 
NHS East Midlands	518,723 	£189.2 
NHS North East	339,574 	£182.2 
NHS Yorkshire and the Humber	626,768 	£180.9 
TOTAL	6,628,571	£198.3 
	Median of SHA	£199.4

The average figure for England this year is £198.3 per head whilst the weighted SHA investment per head of weighted population ranged from £180.9 to £207.7. The median figure for the Strategic Health Authorities comes to £199.4.

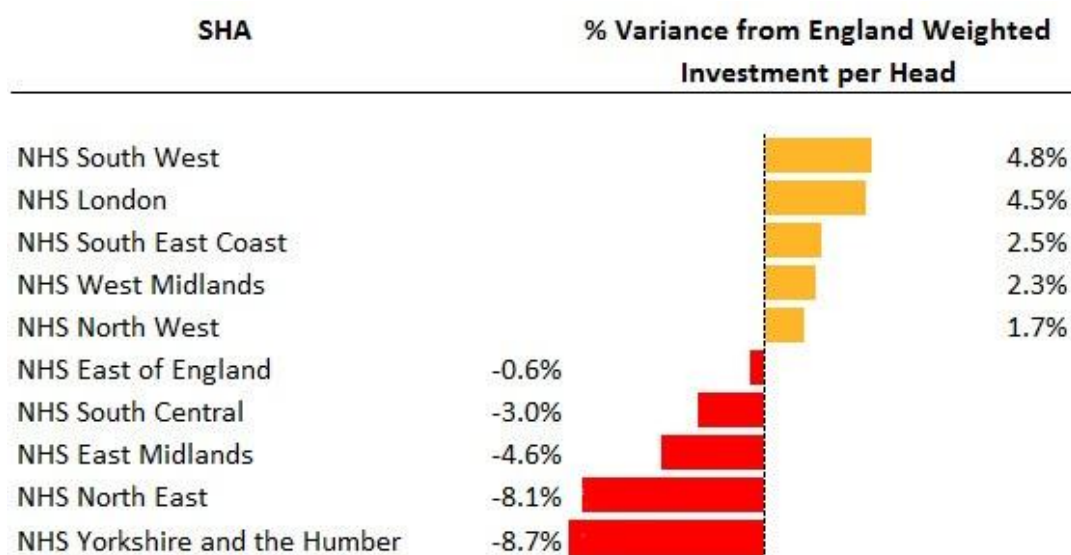
Five SHAs – West Midlands, South West, London, South East Coast and the North West spent above the national average of £198.3 and the remaining five SHAs invest below the national average.

The above results are interesting in that for the first time, London has not reported the highest investment per weighted head. London SHA reported investing less than it did last year.

This information about the weighted population and overall weighted investment per head for each SHA is mapped graphically at Appendix Six.

The percentage differences from the national average in weighted investment per head range from +4.8% to -8.7% as shown in Figure 18 with South West investing 4.8% more per head than the national average.

Figure 18 - % SHA Variance from England Weighted Investment per Head



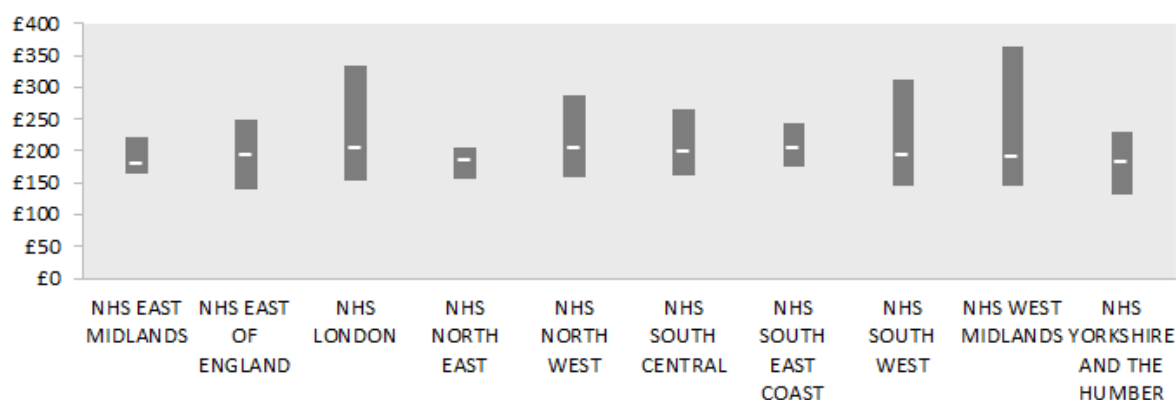
4.3 Differences in Weighted Investment within SHAs

The figures in Figures 17 and 18 give only an overview and a greater insight is gained by comparing the differences between the LITs *within* each SHA.

To illustrate this point, we have examined three important areas of investment using weighted investment per head as the measure. The three areas are:

- Overall Adult weighted investment per head as shown in Figure 19
- Secure services investment per head as shown in Figure 20
- Psychological therapies per head as displayed in Figure 21.

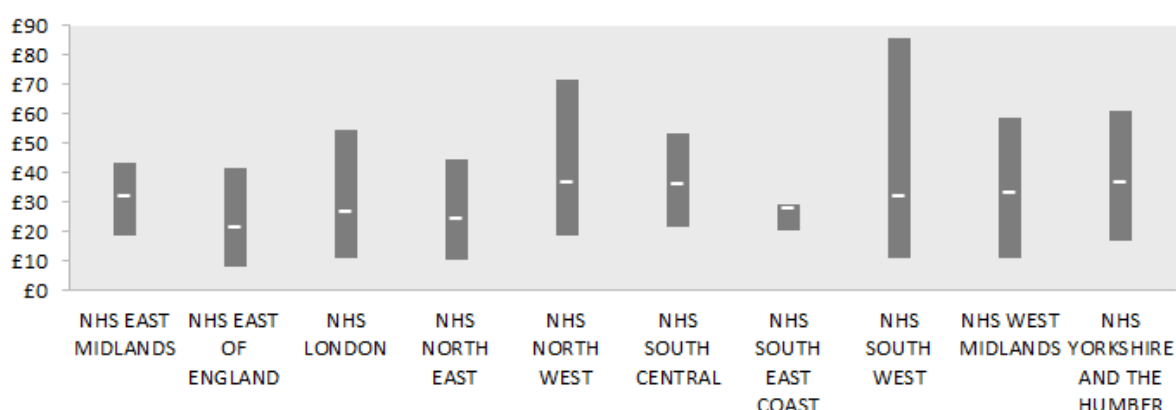
Figure 19: Overall Investment Differences by LIT within SHAs



The length of the bars indicates the range of weighted investment within the SHA and the horizontal bar the median level of weighted investment. This reveals that the widest differences in 2011/12 occurred in West Midlands, followed by London and then the South West.

The largest area of adult investment is in Secure Services and PICU services. The differences in secure investment between the LITs within each SHA is shown in Figure 20.

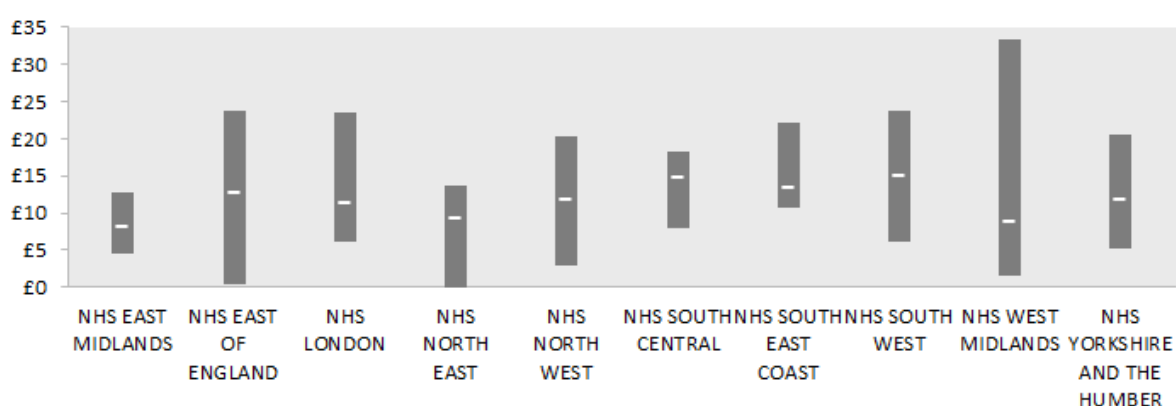
Figure 20: Secure Investment differences by LIT within SHAs



For secure services, the greatest differences occur in the South West, followed by the North West then the West Midlands. Note that these figures of weighted investment per head EXCLUDE high secure services.

Investment in psychological therapies is regarded as increasingly important. Consequently, the relative investment in the total of psychological therapies (both IAPT and non IAPT) is displayed in Figure 21.

Figure 21: Psychological Therapies Investment differences by LIT within SHAs



Comparing SHAs, there is a wider variety of investment per weighted head for psychological therapies between the LITs of the SHAs as can be seen by looking at the median line (marked as a white horizontal line).

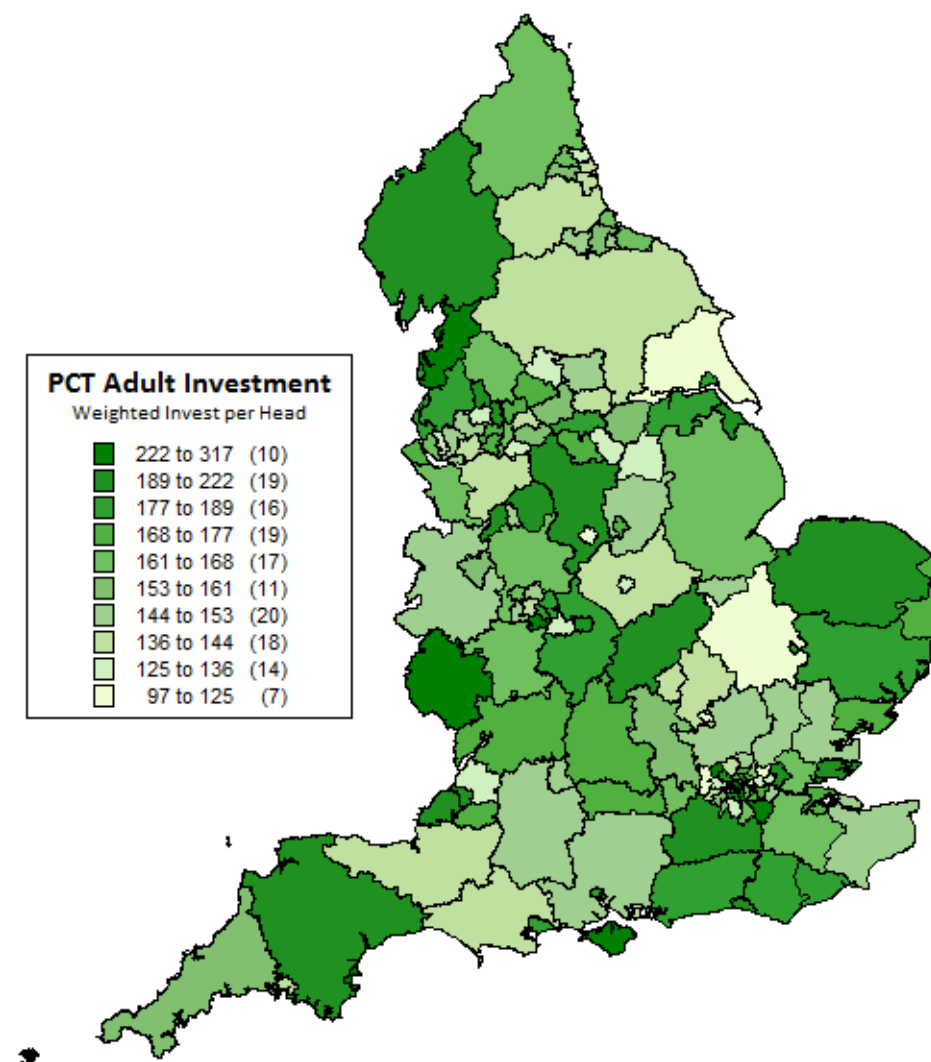
Looking at the differences between the LITs *within* the individual SHAs, it is the West Midlands who report the greatest variation (shown by the length of the gray bar).

The next SHAs with greatest differences in psychological therapies are East of England then the North West.

4.4 Differences in Weighted Investment between PCTs

Variation in spending across PCTs by weighted investment are clearly displayed when PCT investment nationally is mapped as illustrated in Figures 22-24 – looking at the data from different angles².

Figure 22: Map of PCT Adult Investment per Weighted Head



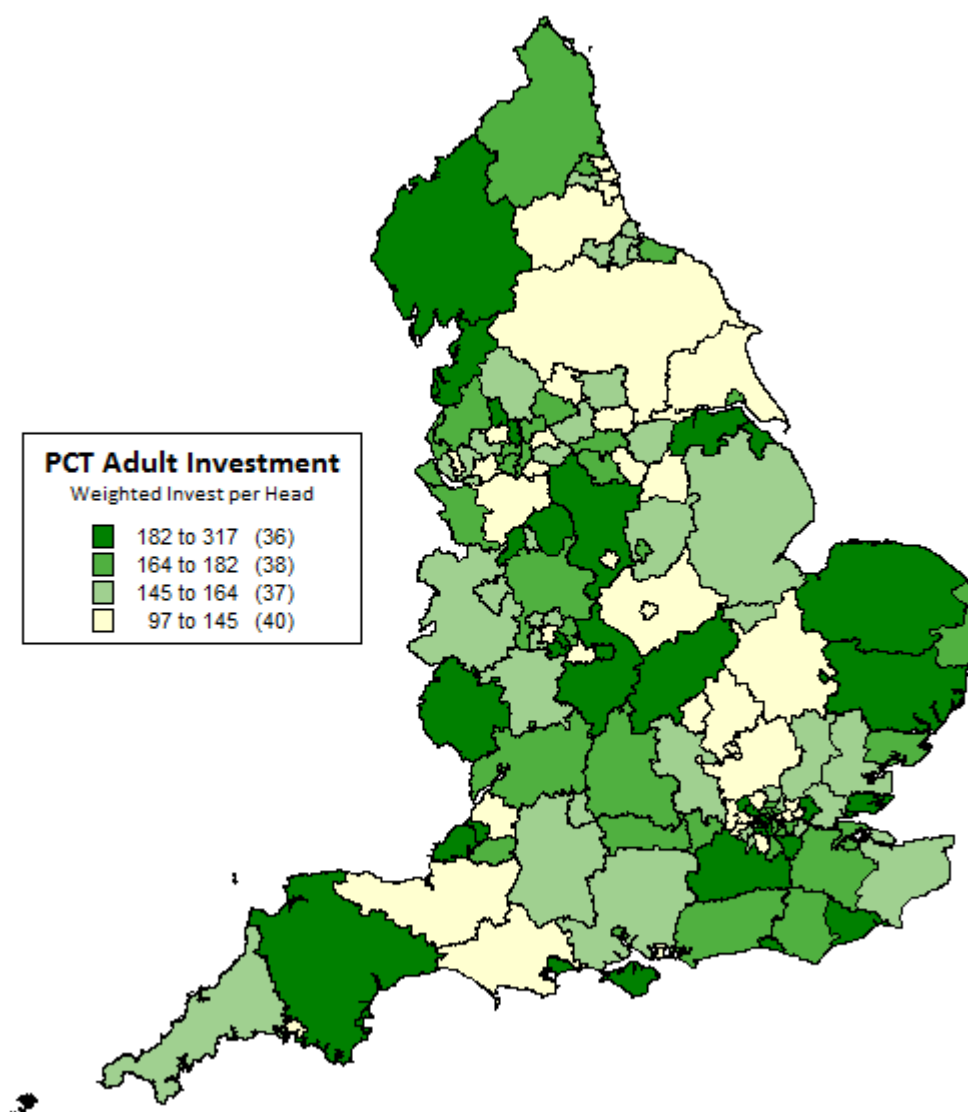
The above map shows the investment broken down by "Natural Breaks" which uses the average of each range to distribute the data more evenly across the ranges. It distributes the values so that the average of each range is as close as possible to each of the range values in that range. This ensures that the ranges are well-represented by their averages, and that data values within each of the ranges are fairly close together.

² The figures in brackets in the map indicate the number of PCTs.

Although Figure 22 focuses on PCT commissioned investment only, and is thus a different measure to that in Figure 17, it does demonstrate the varying investment levels nationally and within Strategic Health Authorities.

Examining the same figures but displaying them in four groups we in effect, get a Quartile picture where the darkest shading represents the top 25% of PCTs who invest the most by value per weighted head. Conversely the lightest shading identifies the 25% of PCTs who reported investing the least amount per head. See Figure 23.

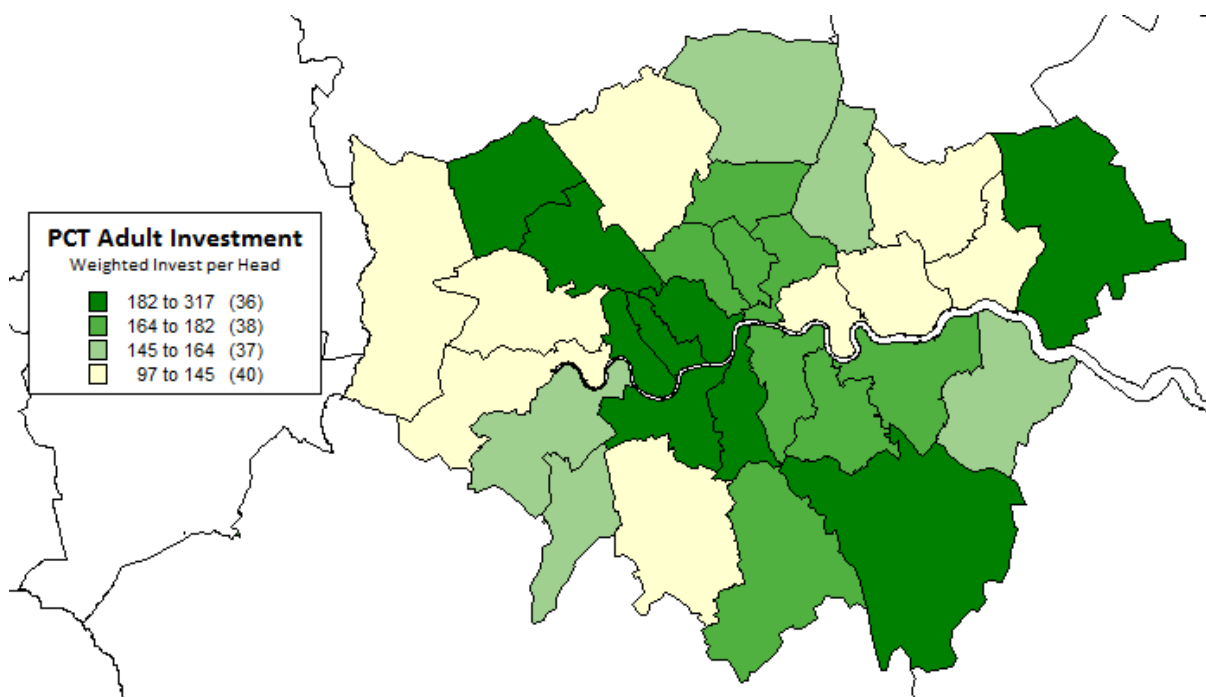
Figure 23: Quartile Map of PCT Adult Investment per Weighted Head



The next figure continues this picture but focuses in on the London area showing clearly the areas of the greatest and least investment.

Figure 24 shows the London PCTs shaded as to which quartile they fall into, with regard to weighted investment per head.

Figure 24: Quartile map of London PCTs Adult Investment per Weighted Head



PCT re-organisation where staff may be reporting on behalf of multiple London PCTs may have led to the situation where some London PCTs have reported particularly low weighted investment per head figures. This report analyses the figures as reported.

5. CONCLUSIONS

Overall the real increase in investment in working age adult mental health services in the ten year period between 2001/02 and 2011/12 is £2.467 billion or 59.3%.

The information available from financial mapping can help with understanding the services to which mental health investment is being directed and is the basis for informed action; it is a key component of good management.

Individual organisations which have such informed knowledge will find it easier to identify how they compare to others and thus plan for the future to deliver service improvements. Nationally the Financial Mapping exercise facilitates effective monitoring of progress towards current aims and targets, and the development of appropriate new ones.

The period 2010/11 to 2011/12 has seen a reported cash increase nationally in adult mental health investment of 1.2% equivalent to -1.0%, after taking account of inflation. This varies regionally though and demonstrates that despite financial pressures, many commissioners have continued to maintain the position of national mental health services relative to other services.

For the first time investment in key priority services, Assertive Outreach, Early Intervention and Crisis Resolution has shown a decrease of 5% over the year 2010/11. However investment by Early Intervention Teams rose by 5%. 37% more people benefited from psychological therapy services over the last four quarters to June 2012, funding has increased by 8.4% in cash terms (6.0% after inflation) over 2010/11 to a total of £386 million.

Five Strategic Health Authorities (SHAs) reported real falls in investment –after taking inflation into account with the largest drop being reported in the South Central region (-5.3%) closely followed by London whose investment after inflation has been taken into account by -4.2%. We have insufficient information to explain the reasons why investment has changed other than the efficiency savings that NHS organisations have to achieve. The returns show that there remain areas to be addressed. The most prominent of these is the difference in investment per weighted head between SHAs.

This shows that while the variances from the English average may be narrowing there are still inequalities in expenditure per head. The challenge that commissioners must address is to reduce health inequalities, improve services and ensure value for money.

Robust information is a key element of ensuring that these three objectives are achieved. The data collected in financial mapping provides this together with a clear basis for prioritisation of local objectives. It will allow better benchmarking and monitoring of progress against national and local priorities.

Organisations should use this document together with the individual LIT reports, to evaluate current arrangements to help them in this task. We hope that this report will help stimulate debate between all of the stakeholders, increase transparency on adult mental health investment and contribute towards maximum benefit to patients.

APPENDIX ONE

CHANGES TO THE FINANCE MAPPING PROCESS FOR 2011/12

There have not been any major changes in finance mapping between 2010/11 and 2011/12. The information requested, together with the format in which it is required, is consistent with previous years. Guidance notes that are available on the Mental Health Strategies (MHS) web site were reviewed and updated to provide information and advice for those completing the returns. Support and advice was also available from MHS to answer specific queries raised by people during the completion of this information.

We extended the original deadline for returns, in recognition of the demands on organisations finance departments.

Apart from cosmetic changes to the Excel files and enhanced guidance notes, the changes involved:

- Some simplification of the medium secure services by merging of local medium secure and regional medium secure services into a single combined medium secure services category
- Additional service category of DWP funded Individual Placement Scheme
- Updated names for Mental Health Trusts who acquired Foundation Trust status and PCTs whose preferred name changed
- Some minor updating of the weighted populations used to compare the relative financial investment between areas

APPENDIX TWO

METHODOLOGY FOR ESTIMATING VALUE OF UNREPORTED INVESTMENT

1. This year's collection has not been as complete as in previous years and has been undertaken during challenging and sometimes difficult circumstances.
2. Our estimate of the unreported investment by value for 2011/12 is tabled below.

Percentage by Value		
SHA	Reported	Estimated
NHS EAST MIDLANDS	99.5%	0.5%
NHS EAST OF ENGLAND	83.0%	17.0%
NHS LONDON	89.3%	10.7%
NHS NORTH EAST	99.0%	1.0%
NHS NORTH WEST	94.5%	5.5%
NHS SOUTH CENTRAL	76.5%	23.5%
NHS SOUTH EAST COAST	90.9%	9.1%
NHS SOUTH WEST	92.6%	7.4%
NHS WEST MIDLANDS	45.9%	54.1%
NHS YORKSHIRE AND THE HUMBER	94.5%	5.5%
Total	86.2%	13.8%

3. Some SHAs provided largely complete updated returns for 2011/12. Others particularly West Midlands and to a lesser degree South Central did not.
4. Several West Midlands LITs did not submit returns (or submitted partial returns) with only 45.9% of the total investment being reported which is similar to the 40% reported in 2010/11. However, this is outweighed by the success in obtaining reported investment figures for 2011/12 from a number of major West Midlands NHS Trusts such as Birmingham and Solihull Mental Health NHS Foundation Trust.
5. Although the percentage of reported investment in the West Midlands is not significantly higher than last year, the 2011/12 estimates for the SHA are more recent and should therefore actually provide a better picture of West Midlands investment compared to 2010/11.
6. The following LITs reported that they would not be submitting any returns this year – Bromley, Dudley, North Essex.
7. The reasons for the lower proportion of reported investment in South Central were the minimal returns from East Berkshire and the incomplete NHS returns from West Berkshire LIT.
8. The basis of these estimates have been the previous investment reported as part of financial mapping, uplifted for inflation using HM Treasury GDP rates. This is the methodology used in line with DH Financial policy.

9. Missing investment is not always easy to identify and estimate correctly as there is no certainty that particular services which are commissioned in one particular year, will have continued to be unchanged in following years.

Consequently, our approach has been to identify whether a particular service or group of services has not been reported, and if it was reported in the previous year; to take that previous years amount and add inflation using the latest GDP percentage to arrive at an estimated unreported "missing" investment Figure for 2011/12. If we have been specifically advised that a service has been discontinued, we have not included investment for that service in the figures for 2011/12.

10. The national report requires any estimate of unreported data to be included in order to provide a comprehensive picture.

APPENDIX THREE

DETAILED 2011/12 INVESTMENT IN SERVICE AREAS

ENGLAND WORKING AGE ADULTS SUMMARY 2011/12

Total Investment in Working Age Adults in £'000s = £6,628,570.71

	Investment in £'000s	% of Direct Investment	% of Total Investment
Access & Crisis Services	£588,402.00	10.70%	8.88%
A&E Mental Health Liaison Service	£28,290.39	0.51%	
Access & Crisis Services - any other services	£31,174.41	0.57%	
Assertive Outreach Team	£126,821.40	2.31%	
ASW Service	£11,193.68	0.20%	
Crisis Accommodation	£10,619.08	0.19%	
Crisis Resolution Home Treatment Team	£254,594.77	4.63%	
Early Intervention in Psychosis Service	£109,276.84	1.99%	
Emergency Clinics / Walk-in Clinic	£655.52	0.01%	
Emergency Duty Team	£9,766.18	0.18%	
Homeless Mental Health Service	£6,009.73	0.11%	
Accommodation	£527,780.26	9.60%	7.96%
Accommodation - any other services	£22,958.32	0.42%	
Adult/family Placement Scheme	£5,634.75	0.10%	
Board and Lodgings Scheme	£1,996.57	0.04%	
Hostel	£8,292.08	0.15%	
Local Authority and Registered Residential Care Home	£354,067.78	6.44%	
Staffed Group Home	£18,601.70	0.34%	
Supported Housing	£113,004.47	2.06%	
Unstaffed Group Home	£3,224.59	0.06%	
Carer's Services	£26,865.22	0.49%	0.41%
Carers' Support Group	£2,598.74	0.05%	
Carers' Support Service	£13,998.04	0.25%	
Carers' Support Workers	£4,315.93	0.08%	
Self-help, Mutual Aid Group for Carers	£652.79	0.01%	
Short-term Breaks/Respite Care Service	£5,299.72	0.10%	
Clinical Services	£971,705.10	17.68%	14.66%
Acute Inpatient Unit/Ward	£654,576.76	11.91%	
Clinical Services - any other services	£43,402.14	0.79%	
NHS Day Care Facility	£22,738.90	0.41%	
Psychiatric Liaison Service - Gen Med, Surg & Palliative Care	£9,758.43	0.18%	
Psychiatric Outpatient Clinics	£82,668.77	1.50%	
Specialist mental health services	£158,560.10	2.88%	
Community Mental Health Teams	£756,124.49	13.76%	11.41%
Community Mental Health Team	£756,124.49	13.76%	
Continuing Care	£644,231.56	11.72%	9.72%
24 Hour Nurse Staffed Care	£110,236.22	2.01%	
24 Hour Staffed Care - Non NHS Registered Nursing Home	£149,613.27	2.72%	
Continuing Care - any other services	£91,318.44	1.66%	
Rehabilitation or Continuing Care Team	£59,867.94	1.09%	
Residential Rehabilitation Unit	£233,195.69	4.24%	
Direct Payment	£30,525.16	0.56%	0.46%
Direct Payments	£30,525.16	0.56%	
Employment/Day/Resource Centres	£131,650.85	2.40%	1.99%
Day Centres/Resource Centre/Drop-in	£98,409.38	1.79%	
Education and Leisure Opportunity	£4,570.51	0.08%	
Employment Scheme	£26,700.00	0.49%	
Individual Placement Scheme (DWP Funded)	£2.00	0.00%	
Women-only community day services	£1,968.96	0.04%	
Home Support Services	£110,083.03	2.00%	1.66%
Home/Community Support Service	£72,983.66	1.33%	
Housing support	£37,099.37	0.67%	

	Investment in £'000s	% of Direct Investment	% of Total Investment
Mental Health Promotion Services	£3,297.49	0.06%	0.05%
Mental health promotion	£3,297.49	0.06%	
Other community and hospital professionals	£89,376.11	1.63%	1.35%
CDW workers	£7,237.23	0.13%	
Gateway workers	£4,432.01	0.08%	
Other community and/or hospital professional team/specialist	£20,426.45	0.37%	
Primary care mental health worker	£44,604.72	0.81%	
STaR workers	£12,675.71	0.23%	
Personality Disorder Services	£35,892.17	0.65%	0.54%
Personality disorder service	£35,892.17	0.65%	
Psychological Therapy Services (IAPT)	£213,363.32	3.88%	3.22%
IAPT Employment Support	£9,767.15	0.18%	
IAPT High Intensity Therapy	£123,645.32	2.25%	
IAPT Low Intensity Therapy	£79,950.86	1.45%	
Psychological Therapy Services (Non IAPT)	£172,244.06	3.13%	2.60%
Psychology Therapies and Counselling Services	£119,423.22	2.17%	
Psychology Therapy Services - any other services	£12,513.83	0.23%	
Specialist Psychotherapy Service	£32,649.82	0.59%	
Voluntary/Private Counselling and/or Psychotherapy Service	£7,657.20	0.14%	
Secure Services and PICU	£1,056,309.14	19.22%	15.94%
Low Secure Service	£422,462.54	7.69%	
Medium Secure Service	£485,219.96	8.83%	
Psychiatric Intensive Care Unit	£136,394.60	2.48%	
Secure Services and PICU - any other services	£12,232.04	0.22%	
Services for Mentally Disordered Offenders	£72,394.48	1.32%	1.09%
Community Forensic Service	£25,511.01	0.46%	
Criminal Justice Liaison and Diversion Service	£7,713.01	0.14%	
Mentally Disordered Offenders - any other services	£7,846.36	0.14%	
Prison Psychiatric Inreach Service	£31,324.10	0.57%	
Support Services	£66,374.87	1.21%	1.00%
Advice and Information Services	£10,136.44	0.18%	
Advocacy Services	£20,143.60	0.37%	
Befriending and Volunteering Schemes	£4,387.07	0.08%	
Patient Advice and Liaison Service PALS	£2,838.43	0.05%	
Self-help and Mutual Aid Group	£4,084.99	0.07%	
Service User Groups	£5,387.43	0.10%	
Staff-facilitated Support Groups	£3,291.11	0.06%	
Support Services - any other services	£16,105.80	0.29%	
Grand Total for Direct Costs	£5,496,619.31	100.00%	82.92%
Capital Charges	£157,466.35		2.38%
CAPITAL CHARGES - ADULTS	£157,466.35		
Indirect costs and overheads	£974,485.05		8.88%
INDIRECT COSTS AND OVERHEADS - ADULTS	£974,485.05		
Grand Total for Adult Investment	£6,628,570.71	100.00%	100.00%

The length of the coloured horizontal bars indicates the relative percentage of total direct investment for that individual direct service type.

e.g. Crisis Resolution Home Treatment Team valued at £254,594.77K was 4.63% of the Grand Total £5,496,619.31K Direct Costs. The Access and Crisis Service Group of which it is a part amounted to 10.70% of the Grand Total for Direct Costs and 8.88% of the Grand Total of Working Age Adult Investment.

APPENDIX FOUR

DIFFERENCE IN REAL INVESTMENT 2010/11 TO 2011/12 FOR KEY PRIORITY AREAS BY SHA

CHANGES IN INVESTMENT 2010/11 TO 2011/12 FOR KEY PRIORITY AREAS BY SHA

This appendix compares the change in investment in key priority areas between the investment for 2010/11, expressed at 2011/12 pay and price levels, with the amount in 2011/12.

Real term Changes in Priority Area Investment 2010/11 to 2011/12

SHA	Assertive Outreach Team	Crisis Resolution Home Treatment Team	Early Intervention in Psychosis Service	Overall Change in £'000s
NHS East Midlands	-£504	-£9,981	£420	-£10,064
NHS East of England	-£900	£2,048	£1,866	£3,014
NHS London	-£7,398	-£7,207	£1,346	-£13,259
NHS North East	-£256	-£270	-£130	-£657
NHS North West	-£1,413	-£713	-£665	-£2,791
NHS South Central	-£765	-£1,164	-£473	-£2,402
NHS South East Coast	-£202	-£2,957	£105	-£3,054
NHS South West	-£283	£1,621	-£11	£1,328
NHS West Midlands	£120	£1,677	£1,305	£3,102
NHS Yorkshire and the Humber	-£3,275	-£423	-£857	-£4,555
Total Real Term Change in £'000s	-£14,874	-£17,369	£2,906	-£29,338

The investment figures show considerable reductions nationally in both Assertive Outreach and Crisis Resolution Home Treatment Services. Only Early Intervention services reported a nett increase in investment over 2010/11.

APPENDIX FIVE

PRIORITY AREAS INVESTMENT AND ACTIVITY FIGURES 2002/03 TO 2011/12

PRIORITY AREAS INVESTMENT AND ACTIVITY FIGURES 2002/03 TO 2011/12

This appendix contains the supporting information used to create Figure 9. The tables below show the annual investment figures for the three key priority areas, expressed in £'millions at 2011/12 rates and the activity data for the same periods.

Real Term Investment at 2011/12 levels				Priority Activity Levels		
	Assertive Outreach	Crisis Resolution / Home Treatment	Early Intervention in Psychosis	Assertive Outreach	Crisis Resolution / Home Treatment	Early Intervention in Psychosis
2002/03	77.5	38.2	8.0	10,830	28,430	890
2003/04	93.6	71.8	15.4	12,390	45,770	1,590
2004/05	110.8	127.8	27.6	17,500	68,760	4,370
2005/06	116.0	177.5	47.9	18,720	83,800	7,880
2006/07	120.1	202.9	56.4	18,350	95,400	11,160
2007/08	134.4	229.9	74.4	19,930	106,320	15,780
2008/09	137.9	249.6	97.5	21,000	118,400	20,540
2009/10	141.1	259.9	107.3	20,899	127,396	21,372
2010/11	138.9	265.5	104.1	20,532	131,452	21,859
2011/12	126.8	254.6	109.3	19,897	127,924	21,622
Change 2002/03 to 2011/12				9,067	99,494	20,732
Change 2008/09 to 2011/12				-1,103	9,524	1,082
Change 2010/11 to 2011/12				-635	-3,528	-237

Readers are reminded that matching investment figures with similar figures on activity is complicated due to the way in which the activity figures are collected. Whilst complete year figures for crisis resolution/home treatment are available, data on assertive outreach and early intervention in psychosis are collected as a snapshot in time at the end of March – the first as the number of home treatments (not patients seen) and the second as the number of patients currently being seen³.

These figures do however provide a broad indication of trends. The percentage change since 2002/03 for each service type is summarised below.

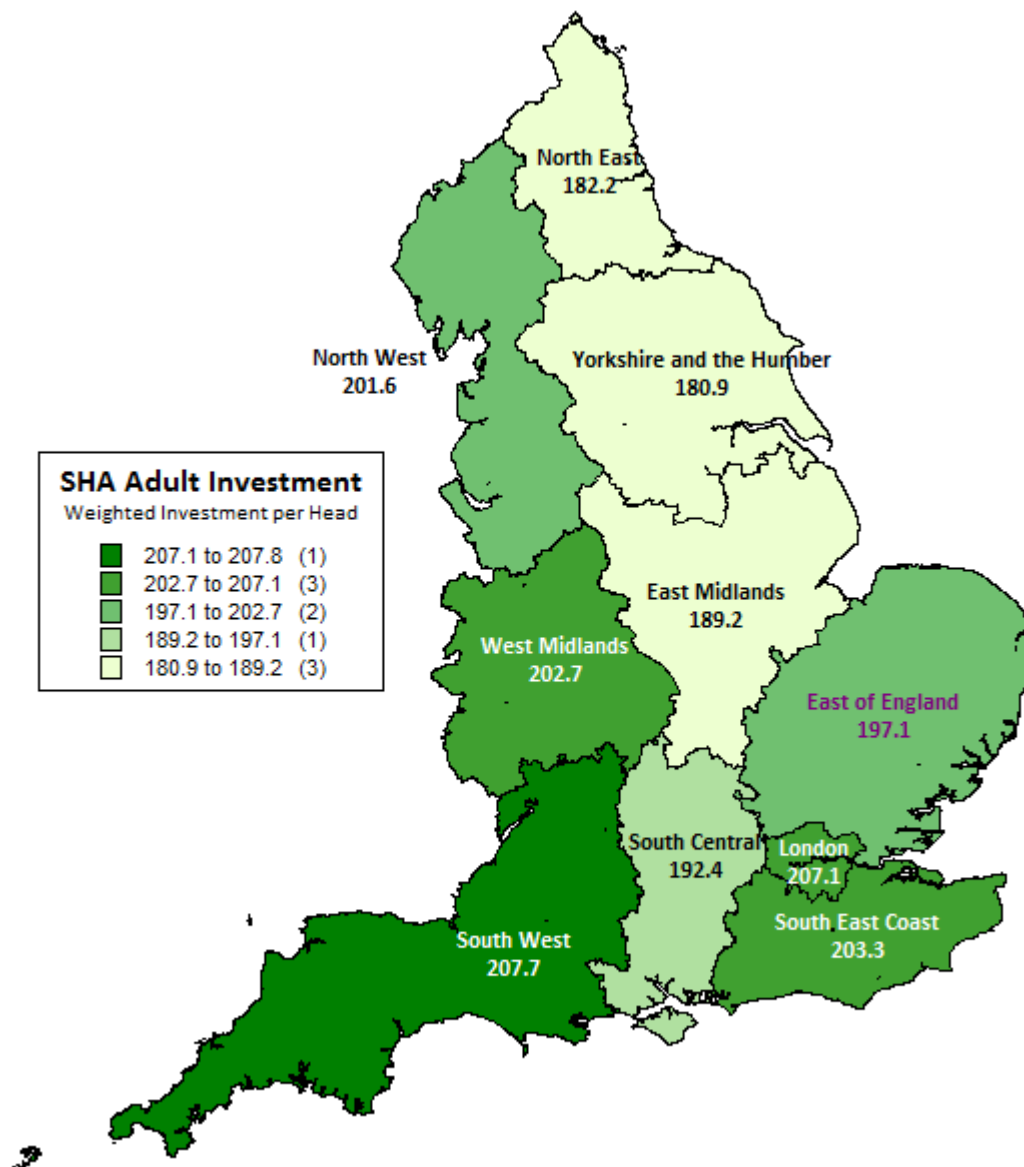
	Assertive Outreach	Crisis Resolution / Home Treatment	Early Intervention in Psychosis
% Increase in Invest since 2002/03	64%	566%	1274%
% Increase in Activity since 2002/03	84%	350%	2329%

³ Crisis Resolution Team data capture the numbers of home treatments provided over the full year. Early intervention engage with patients over three years. The reported figures are for total EI caseload at the end of a given year. Assertive Outreach teams engage with patients that are hard to engage often with chaotic lifestyles. Data shows the number of people on caseload at the end of the year.

APPENDIX SIX

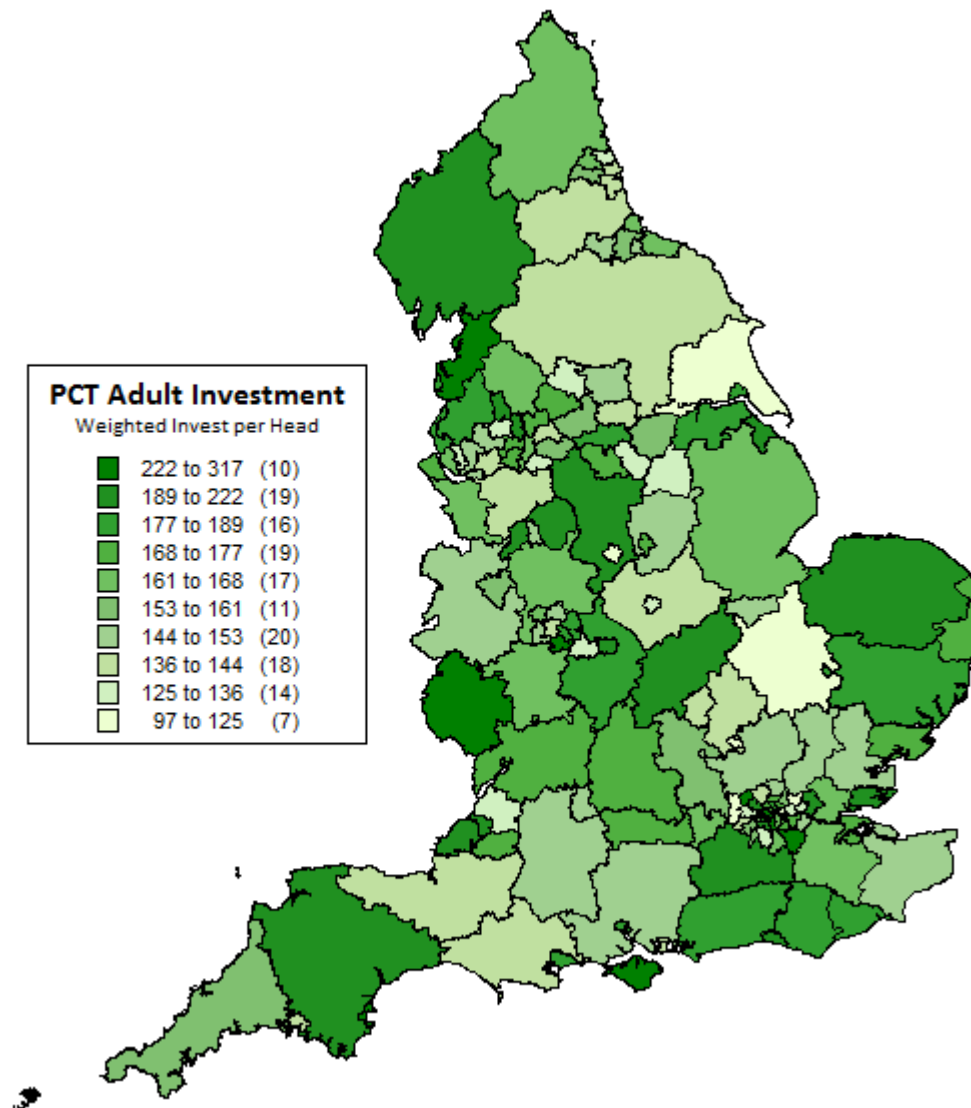
SHA AND PCT WEIGHTED INVESTMENT PER HEAD 2011/12

Appendix Six graphically charts the investment per weighted head for working age adult mental health services for 2011/12.



Note that the weighted population used are weighted for both mental health need and cost factors to enable a fair comparison of the relative spend per head.

Differences in weighted investment are clearly displayed when you map investment by PCT nationally as illustrated here.



Note that the weighted population used are weighted for both mental health need and cost factors to enable a fair comparison of the relative spend per head.

APPENDIX SEVEN

INVESTMENT IN DIRECT SERVICES BY COMMISSIONER AND PROVIDER TYPE 2011/12

INVESTMENT IN DIRECT SERVICES BY COMMISSIONER AND PROVIDER TYPE

This appendix shows the proportion of reported direct services investment by commissioner and direct provider types based upon the data submitted to Mental Health Strategies for 2011/12.

The bar chart to the right of the table shows the percentage share by each commissioner type.

By Commissioner type





Service Group	Commissioner Type		Total	Commissioner Type Share
	LA	NHS		
Access & Crisis Services	£62,327	£526,075	£588,402	
Accommodation	£406,716	£121,064	£527,780	
Carer's Services	£19,033	£7,833	£26,865	
Clinical Services	£6,425	£965,280	£971,705	
Community Mental Health Teams	£190,533	£565,592	£756,124	
Continuing Care	£55,737	£588,495	£644,232	
Direct Payment	£29,344	£1,182	£30,525	
Employment/Day/Resource Centres	£87,980	£43,671	£131,651	
Home Support Services	£95,644	£14,439	£110,083	
Mental Health Promotion Services	£277	£3,020	£3,297	
Other community and hospital professionals	£12,890	£76,486	£89,376	
Personality Disorder Services	£27	£35,865	£35,892	
Psychological Therapy Services (IAPT)	£471	£212,892	£213,363	
Psychological Therapy Services (Non IAPT)	£1,422	£170,822	£172,244	
Secure Services and PICU	£2,113	£1,054,196	£1,056,309	
Services for Mentally Disordered Offenders	£6,616	£65,778	£72,394	
Support Services	£25,074	£41,301	£66,375	
Total Reported Investment in £'000s	£1,002,628	£4,493,991	£5,496,619	
% Directly commissioned by each	18%	82%	100%	



















Commissioners are either NHS or Local Authorities. The bar chart to the right shows those services that NHS commissioners (shown in **BLUE**) are the main commissioner and those where Local Authorities (shown in **RED**) take the lead.

By Provider type

The following table and chart shows the proportion of direct services by direct provider types and is based upon the data submitted to Mental Health Strategies for 2011/12.

The bar chart to the right of the table shows the percentage share by each provider type. There are four types of direct provider.

-  NHS - NHS Trusts, Care Trusts and Directly Providing PCTs
-  Social Services – Delivered directly by Local Authorities
-  Non Statutory Providers – comprising private providers, or voluntary or charitable organisations
-  NGMS - services delivered by the General Medical services but funded from mainstream PCT resource allocations.

Service Group	Provider Type				Total	Provider Type Share
	NGMS	NHS	NON STATUTORY	SOCIAL SERVICES		
Access & Crisis Services	£1,227	£529,245	£13,122	£44,809	£588,402	
Accommodation	£985	£48,639	£417,694	£60,462	£527,780	
Carer's Services	£151	£2,899	£15,476	£8,340	£26,865	
Clinical Services	£1,042	£857,212	£112,341	£1,110	£971,705	
Community Mental Health Teams	£986	£602,562	£16,940	£135,636	£756,124	
Continuing Care	£555	£244,652	£388,082	£10,943	£644,232	
Direct Payment	£0	£523	£25,792	£4,210	£30,525	
Employment/Day/Resource Centres	£373	£28,547	£69,870	£32,861	£131,651	
Home Support Services	£141	£6,393	£81,075	£22,475	£110,083	
Mental Health Promotion Services	£197	£934	£2,043	£123	£3,297	
Other community and hospital professionals	£4,996	£63,992	£10,698	£9,690	£89,376	
Personality Disorder Services	£0	£24,753	£11,135	£4	£35,892	
Psychological Therapy Services (IAPT)	£3,600	£160,086	£48,049	£1,629	£213,363	
Psychological Therapy Services (Non IAPT)	£6,235	£139,334	£26,574	£101	£172,244	
Secure Services and PICU	£0	£692,096	£363,381	£832	£1,056,309	
Services for Mentally Disordered Offenders	£334	£53,857	£13,198	£5,006	£72,394	
Support Services	£142	£6,150	£53,657	£6,426	£66,375	
Total Reported Investment in £'000s	£20,963	£3,461,873	£1,669,128	£344,657	£5,496,619	
% Directly provided by each	0%	63%	30%	6%		

Services provided by the Non General Medical Services (NGMS) sector comprise services delivered by the General Medical Services (GMS) sector but funded from mainstream PCT resource allocations.

APPENDIX EIGHT

SHA INVESTMENT BY COMMISSIONER AND PROVIDER TYPE

SHA INVESTMENT BY COMMISSIONER AND PROVIDER TYPE

This appendix shows the proportion of total investment in 2011/12 by commissioner and provider types for each SHA and is based upon the data submitted to Mental Health Strategies.

By Commissioner Type

SHA	Commissioner Type		Total	Commissioner Type Share
	LA	NHS		
NHS East Midlands	£79,217	£439,506	£518,723	
NHS East of England	£122,841	£476,805	£599,646	
NHS London	£264,203	£1,165,333	£1,429,536	
NHS North East	£56,831	£282,743	£339,574	
NHS North West	£168,912	£839,886	£1,008,797	
NHS South Central	£61,120	£324,317	£385,437	
NHS South East Coast	£60,076	£390,620	£450,696	
NHS South West	£99,993	£451,937	£551,930	
NHS West Midlands	£93,497	£623,967	£717,463	
NHS Yorkshire and the Humber	£98,268	£528,500	£626,768	
Total Reported Investment in £'000s	£1,104,958	£5,523,612	£6,628,571	
% Commissioned by each	17%	83%	100%	

By provider type

SHA	Provider Type				Total	Provider Type Share
	NGMS	NHS	NON STATUTORY	SOCIAL SERVICES		
NHS East Midlands	£0	£361,937	£140,358	£16,427	£518,723	
NHS East of England	£0	£419,214	£157,930	£22,502	£599,646	
NHS London	£5,980	£1,033,818	£293,949	£95,789	£1,429,536	
NHS North East	£2,719	£232,225	£79,294	£25,335	£339,574	
NHS North West	£2,846	£643,291	£275,067	£87,593	£1,008,797	
NHS South Central	£736	£257,630	£102,029	£25,042	£385,437	
NHS South East Coast	£0	£282,615	£151,892	£16,189	£450,696	
NHS South West	£4,860	£350,107	£167,063	£29,899	£551,930	
NHS West Midlands	£358	£474,020	£200,656	£42,429	£717,463	
NHS Yorkshire and the Humber	£5,115	£429,222	£148,313	£44,118	£626,768	
Total Reported Investment in £'000s	£22,615	£4,484,080	£1,716,552	£405,324	£6,628,571	
% Provided by each	0%	68%	26%	6%	100%	

Data sources: Finance mapping returns 2011/12

Note:

Services provided by the Non General Medical Services (NGMS) sector comprise services delivered by the General Medical Service (GMS) sector but funded from mainstream PCT resource allocations. Services provided by the Non Statutory sector comprise services delivered by voluntary, charitable and independent (private) organisations.