

Supporting mental health during and post pandemic with the use of digital

Chris Wright, National Advisor for Digital Mental Health, Scottish Government

Mental Health in Scotland

16% of the population is estimated as having common mental health problems

Demand for mental health treatment is outstripping supply

25-30% of all GP consultations involve depression, stress or anxiety

Antidepressant usage in 2018-19 was 936,269 compared to 633,762 in 2009-10

Demand on specialist psychology services has doubled in 10 years

Mental Health in UK has worsened as a result of the COVID-19 pandemic,
increasing by about 8%

50% of health workforce report that their mental health has declined
44% of doctors experience depression, anxiety, stress or burnout

Evidence is suggesting a need for whole population approaches alongside targeted support for at risk and vulnerable groups

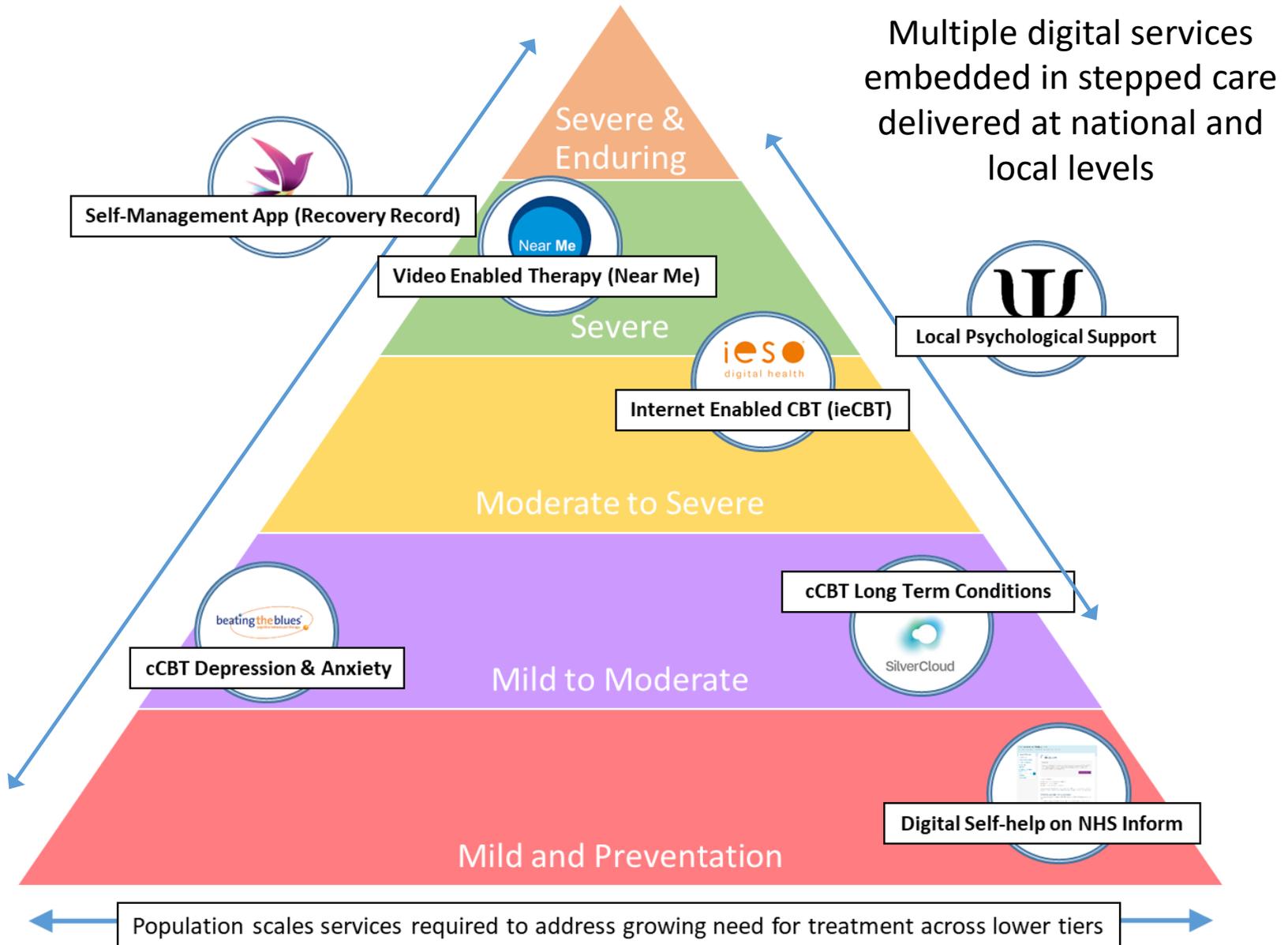
*“The COVID-19 pandemic has only affirmed what we knew from the beginning
- digital mental health is critical to help scale much-needed services and
provide additional choice for people to manage their mental health.”*

Kevin Stewart, Mental Wellbeing and Social Care Minister

Digital Focus During Covid

<i>cCBT</i>	Online sessions, deliver across short 20 minutes CBT modules, animated sequences, video clips, case studies and CBT exercises
<i>ieCBT</i>	Clinician lead CBT treatment delivered in written form, overcomes geographical barriers
<i>Video Enabled Therapy</i>	Tele-psychiatry and tele-psychology integrated into existing services, deliver via Attend Aware Video Conferencing Platform
<i>Online Self-help</i>	Online interactive psychological self-help guides hosted on national site NHS Inform
<i>Self-management</i>	Categories: Self monitoring, Mindfulness/Relaxation, Reminders, Peer Support, Mood Trackers, Self & Risk Management. Conditions; ADHD, Autism, Addictions, Anxiety, Bipolar, Depression, Eating Disorders, Panic, Phobias, Stress, Brain Injury

Integration into Clinical Models



Rapid Expansion of Digital Therapies

cCBT and ieCBT self-managed treatments from 1 to 21 including:

Depression/Anxiety

Social Anxiety

Health Anxiety

LTC Depression and Anxiety (diabetes, respiratory, heart conditions, chronic pain, rheumatoid arthritis)

Stress

Insomnia (Sleepio)

GAD (Daylight)

Resilience

COVID-19

Panic

OCD

Phobias

Perinatal

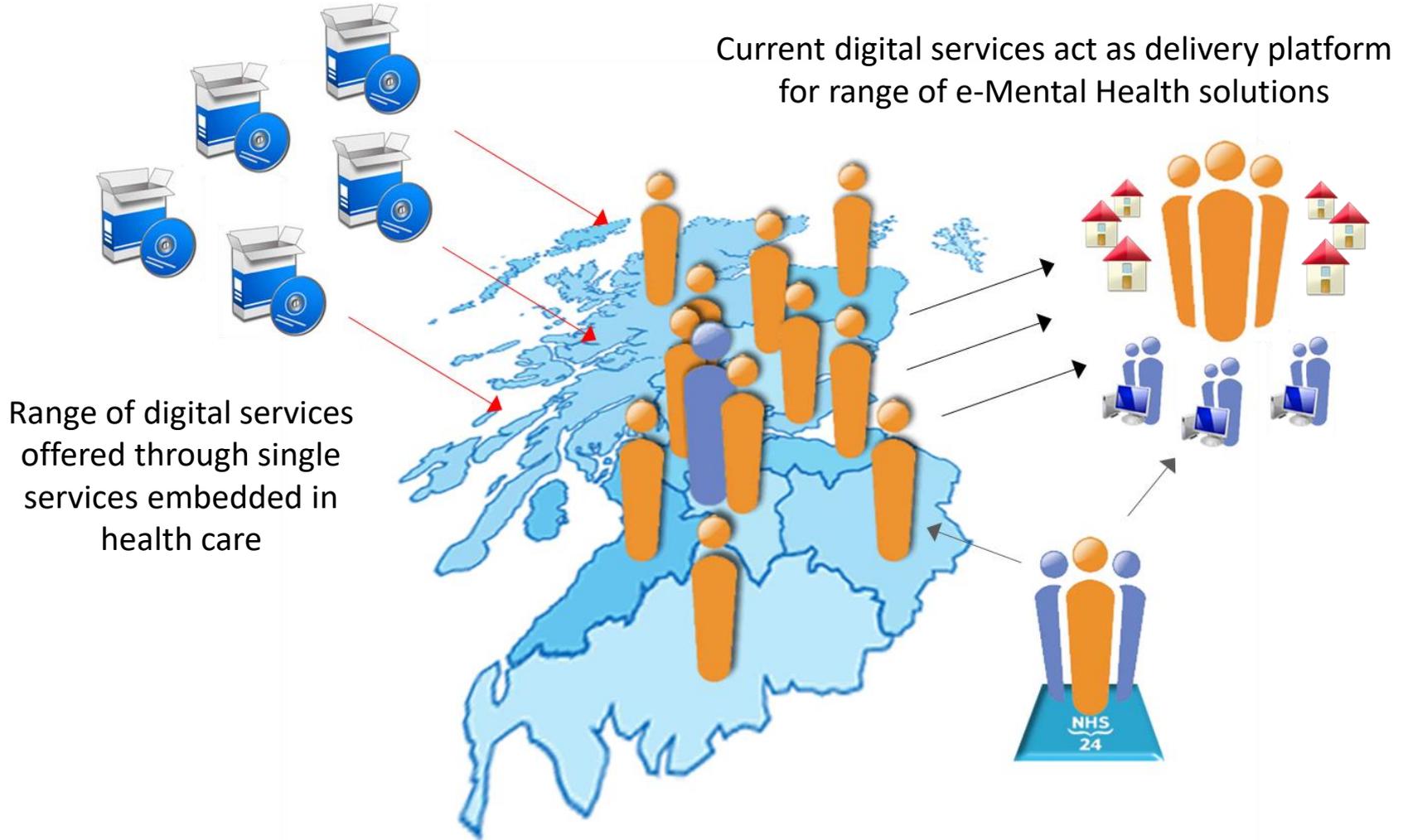
CYP

Supporting An Anxious Child

Supporting An Anxious Teen

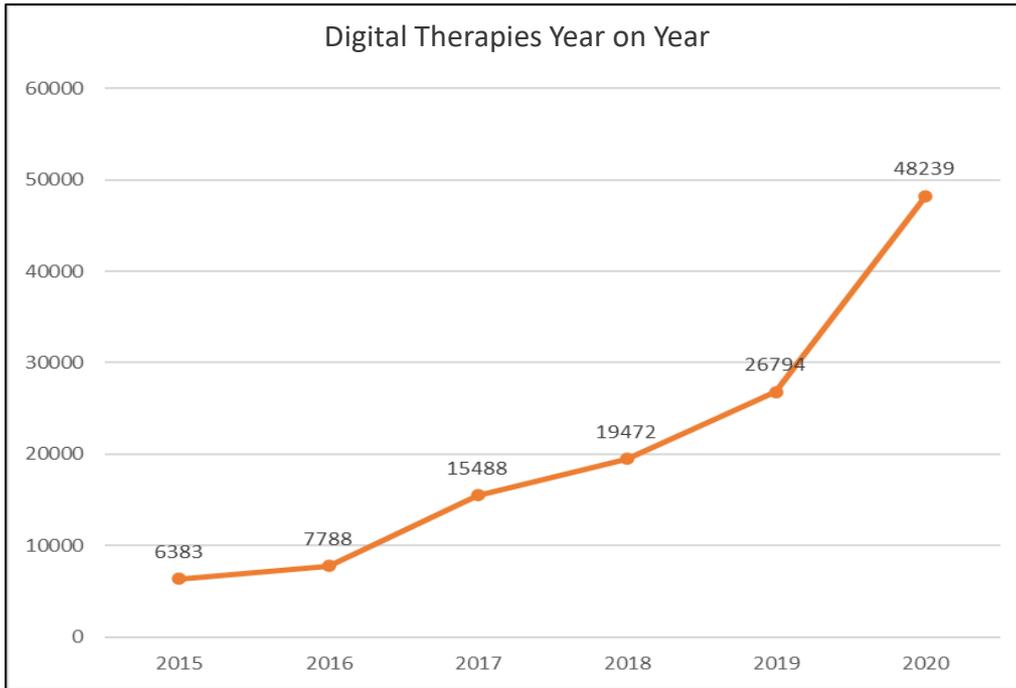
New national service ieCBT

Service Platforms of Delivery



Service platforms allow for rapid national implementation reducing development time as structures are reused, this enhanced when using a shared learning approach

National Usage



**48,239 referrals last 12 months,
increased from 26,794**

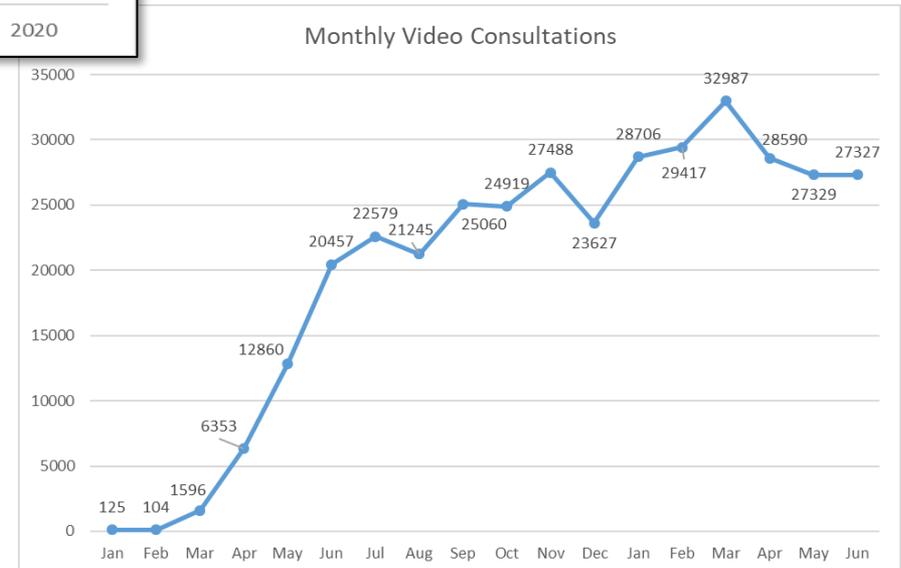
>25% of referrals to psychology is now
to a digital therapy

10,635 through self-referral

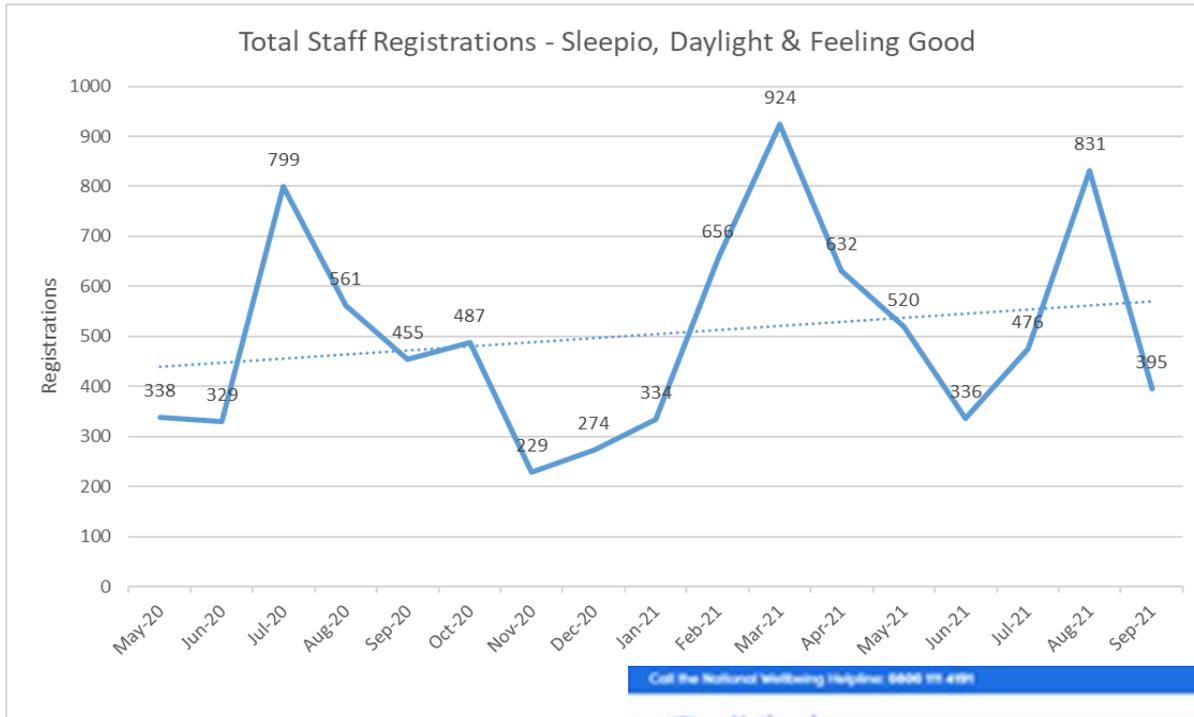
Suicide ideation of over 4,000 citizens
actively monitored per month

A total of 360,769 video
consultations carried out in mental
health since start of 2020

301,706 self-help guide access (13
in total) in last 12 months



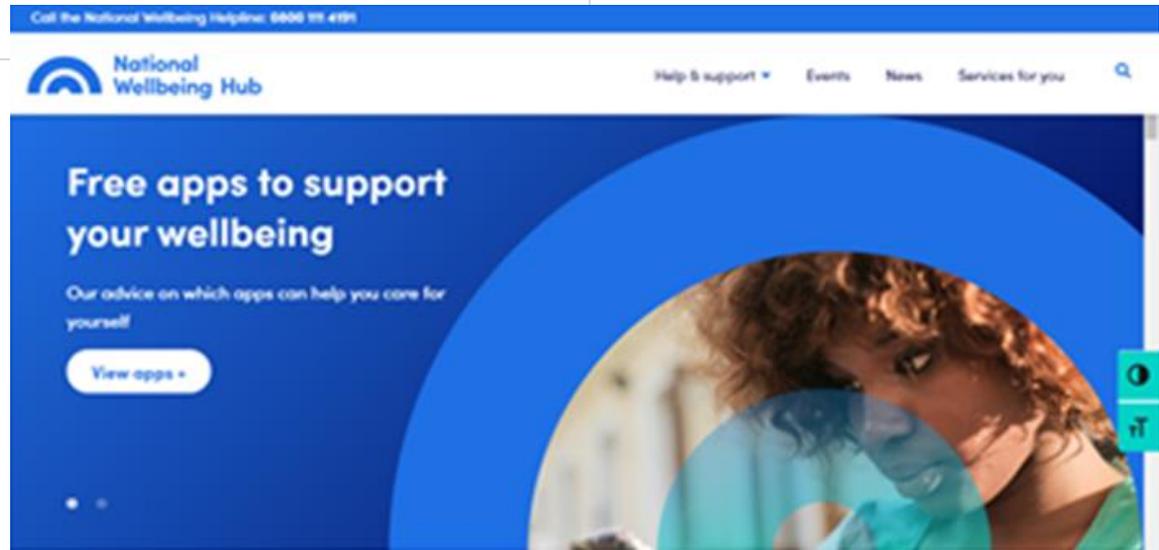
Staff Support



Silver Cloud & Big Health Staff Platforms

Depression	Stress
Anxiety	Sleep
Health Anxiety	Resilience
Social Anxiety	Alcohol
Panic	Mindfulness
Phobias	Chronic Pain
Money Worries	

8,576 staff have registered on one of these digital treatments/resources



Issues of Rapid Service Development

Rapid development of service for COVID has consequences

Emergency funding caused instability in services

Capacity and prioritisation within local territories

Workforce development is limited there is a need to develop appropriate skills/confidence

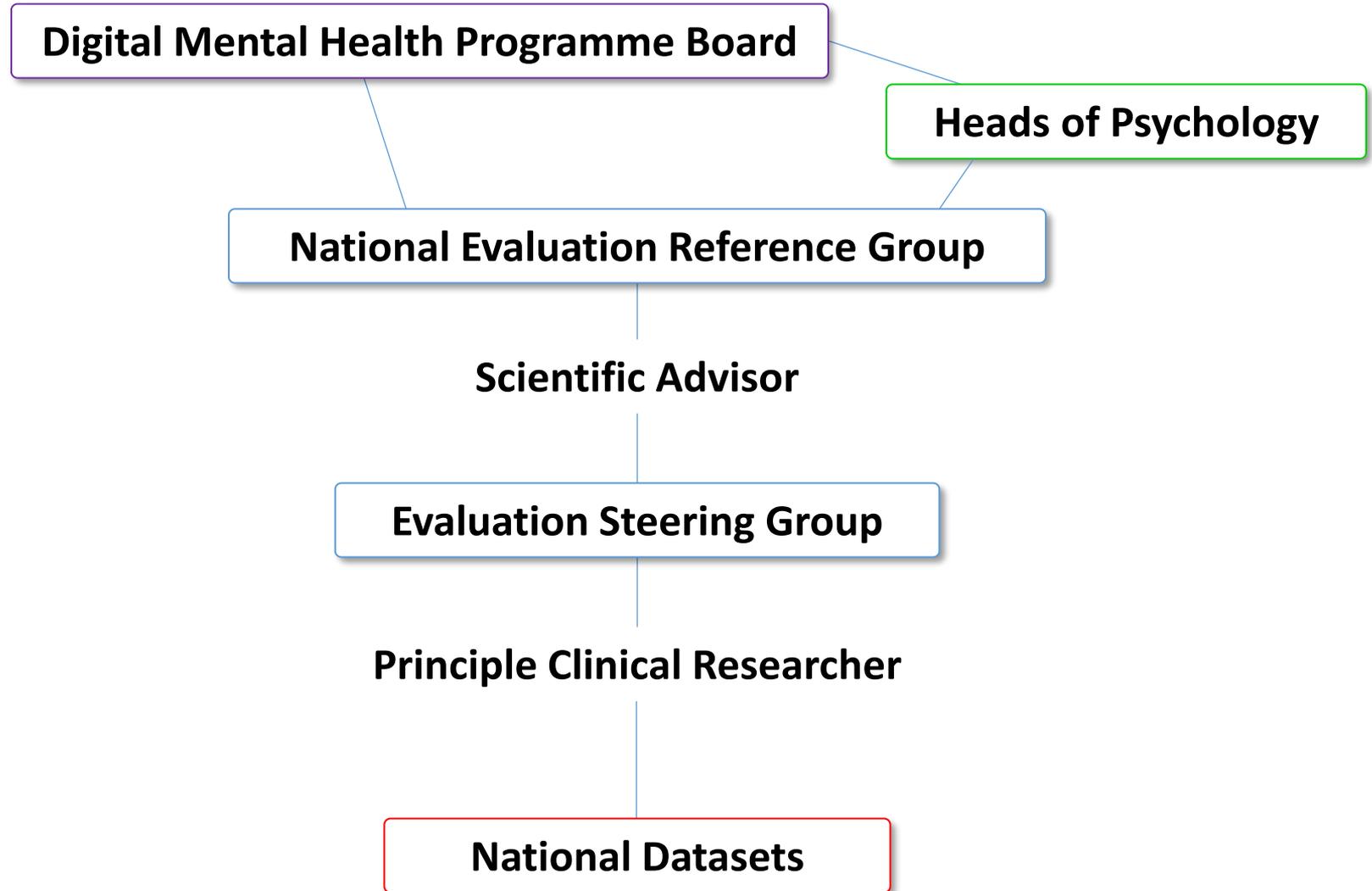
Limited service improvement activity

Area with greater capacity develop at faster rates, meaning local services may be further apart in terms of capacity, less consistency of referral number and implementation of new services/treatments

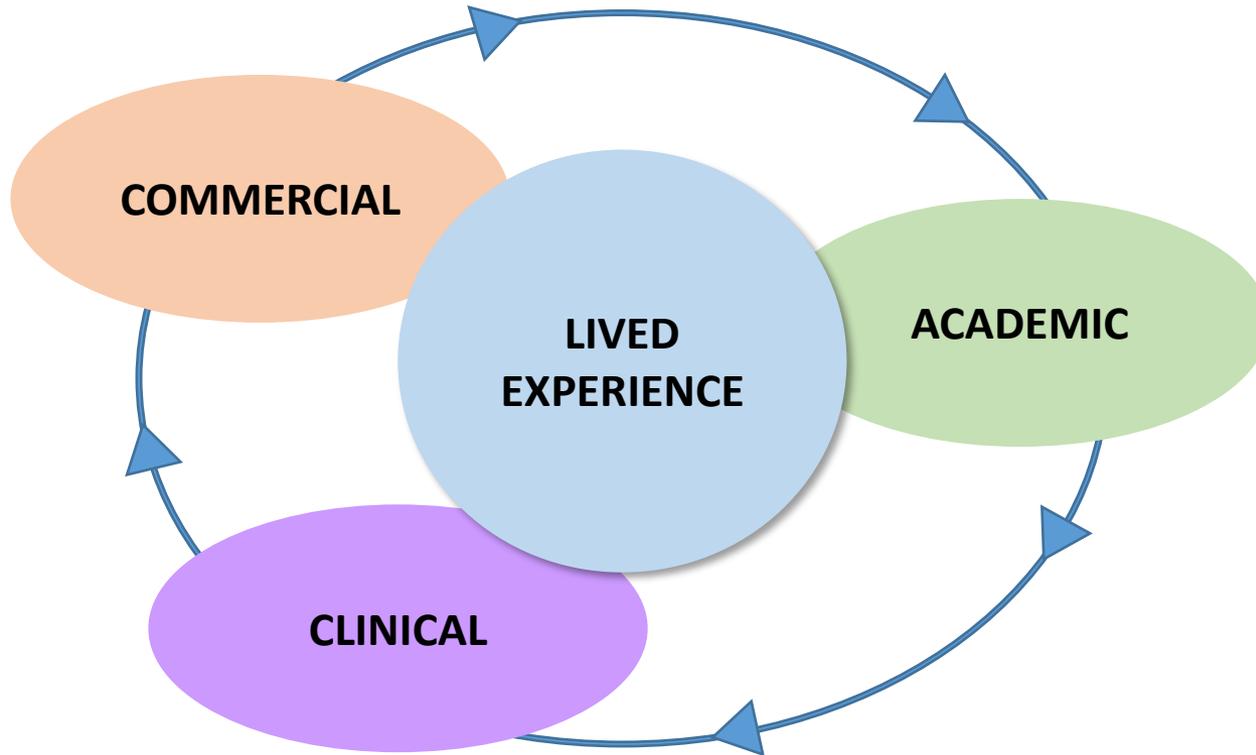
During normal implementation parallel work takes place to develop infrastructure and address negative attitudes in clinical staff

Infrastructure is required to ensure sustainability of digital services and to maintain the continual and future impact of digital in mental health settings

National Approach to Evaluation



Stimulating Innovation



Innovation Cluster: coordinates engagement between clinical, academic and commercial partners, integrated into wider innovation landscape

Identifies funding opportunities and provide guidance around need and clinical requirements, supported by strong evidence

Collaborative Partnerships

Clinical
Implementation
Service Delivery
Technical
Policy



**Development of
shared understanding
of need**

**Ownership
and buy in**

Common Goals

Building shared and defined responsibilities across all partners

Building Trust and Acceptance

Build common goals and aims

Learn about your partners

Develop a clear understanding of need

Continue to Communication and Inform

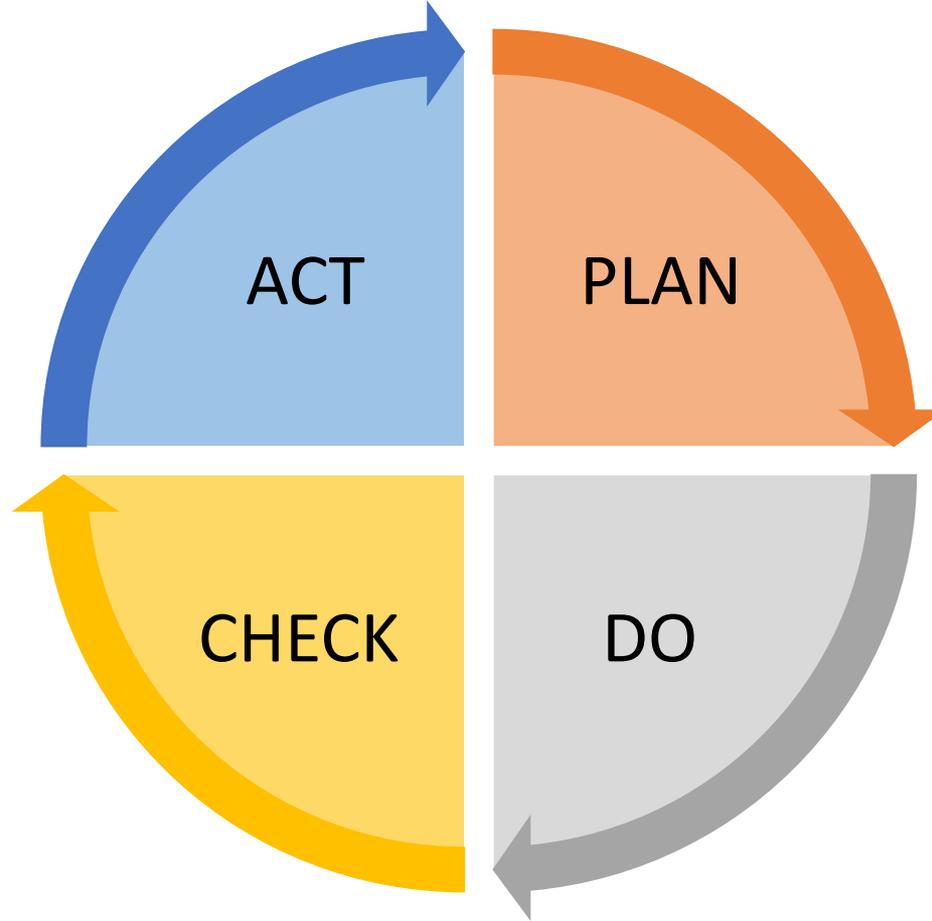
Respond and react

Build trust through transparency

Share knowledge, learn together

Ensure strategic alignment with national profile

Always Learn and Improve



The way people engage with technology has changed
Self-management of conditions at home is untested so hard to predict
Use of digital at home requires different approach to patient engagement
Need to better manage speed of growth

Thank You
