

Parity of Esteem – Delivering Physical Health Equality for those with Serious Mental Health Needs

ADVICE AND INFORMATION



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Thanks to the staff from across NHS services in the UK who have contributed to the case studies used in this publication. Their hard work and dedication is making a difference for those with serious mental health needs.

Thanks to colleagues from the Centre for Mental Health and Equally Well UK whose work is bringing about visibility and action to address the current mortality gap.

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Thanks to Hannah MacDonald whose service user perspective has created a richer insight, critique and awareness of the challenges those with serious mental illness face in meeting their physical health needs.

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This publication gives an overview of the work the Royal College of Nursing (RCN) is doing to address the mortality gap between people with serious mental illness and the rest of the population as well as our work towards establishing parity of esteem between mental and physical health.

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Evaluation

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Summary

People with serious mental illness die 15-20 years before the rest of the general population. This is called the mortality gap.

Why is this?

There are many reasons, these include discrimination, stigma, poor life chances, long term use of medication with severe side effects, unconscious bias and lack of knowledge and understanding on the part of staff to name a few. How services are designed also plays a part, as does the lack of adequate funding.

There is an absolute need to equate the importance of mental health and mental health service provision with physical health and physical health service provision.

We call this **parity of esteem**.

This means giving equal priority and value to mental and physical health needs, so that people with mental health problems will have:

- equal access to care and treatment
- the same levels of dignity and respect from health and social care staff
- the same quality of physical health care as those without a mental health problem.

In 2017, RCN members said more action was needed to address the current mortality gap for those with a serious mental illness.ⁱ

The Royal College of Nursing (RCN) has developed a Parity of Esteem Programme and is working collaboratively with others to address the problems those with serious mental illness face.

Nurses have an important role to play and there is evidence to support how best nurses can help. This brief report is for nursing staff and aims to raise knowledge and awareness of the current mortality gap. It also provides some good practice examples and practical tips about how nurses can influence this important issue.

Foreword from Dame Donna Kinnair



Paying attention to the physical health needs of people with serious and complex mental health conditions is essential if we are to close the current mortality gap for those with the most serious and complex

mental health needs. Member experience is vital to forming our work priorities and you asked us to do more to influence this issue at Congress 2017. Since then we have established a core programme of work to create a stronger presence for nursing in this important area of practice. This brief report provides an overview of what parity of esteem is, some good examples in practice, and what you can do as a frontline nurse to influence this important agenda.

Nursing staff have a critical role to play in closing the current mortality gap, so we are working across the four countries of the UK to ensure that nurses are equipped with the right knowledge, skills and resources, to achieve equality across

both mental and physical health care for those with serious mental health needs. This includes making sure that there are enough staff to care for patients safely and effectively whether their needs are related to physical conditions/illnesses, mental health conditions or importantly when they have both mental health needs and physical health needs.

We believe that the best and most effective way to bring about changes in our systems is through collaborative efforts across many organisations to truly make a difference. That is why we are members of organisations like Equally Well UK, whose sole purpose is to develop a better understanding of this complex problem and to promote the equal right to good and effective health care for those with a mental health condition.

Professor Dame Donna Kinnair
RCN Chief Executive & General Secretary

What is parity of esteem?

Parity of esteem describes the need to value mental health on an equal footing with physical health. People with complex mental health needs should have the same access to health care services and support as people with physical health needs.

Evidence shows that people with serious mental health needs die between 15 to 20 years before the rest of the general population (World Health Organization). This figure is widely accepted across the developed world and is sometimes referred to as the mortality gap for those with serious mental illness. Researchers have estimated the number of years of life lost ranges from 10 to 30 years (RCN evidence-based review).

There are many complex reasons for this, including discrimination and stigma, poor life chances, poor physical health and lifestyle choices, the use of long-term medication and the way the mental health services are currently structured.

Members asked us to do more as part of an RCN Congress Resolution in 2017. Since then, we have worked to raise the awareness of the plight of those with serious mental illness – we still believe much more could be achieved if organisations worked more closely together to find practical solutions to this complex challenge our society faces.



“I believe that nurses have an important role to play in helping to address the mortality gap. Harnessing the knowledge, skill and ability of our nurse members to work in new and innovative ways is a really important part of addressing this very complex issue”

Catherine Gamble
RCN's Mental Health Professional Lead

The RCN's current understanding

In 2018 we surveyed our members to establish their views on progress of achieving mental health equality in clinical settings. Based on the findings of this reportⁱⁱ, the RCN has identified three key areas of focus:

- pushing for increased funding into mental health services on par with physical health services
- improved training – consistency, competency and curriculum support
- identifying areas where access and innovation around physical health has made a difference.

The RCN completed an evidence-based review in 2018ⁱⁱⁱ exploring the role of mental health nurses in improving the physical health care of those with severe mental illness.

The report highlighted that the dangers of poor physical health have been known for a number of years and that the current mortality gap is not improving. There remains a significant level of concern over the health inequalities that continue to be experienced by those diagnosed with severe mental illness.

The evidence-based review, completed by the RCN in 2018, suggests that the main role of the mental health nurse is one of assessment and monitoring the physical health care of those with severe mental illness, but a number of issues have been raised around how systems equip and support nurses to fulfil this role.

The evidence-based review cites:

- a lack of knowledge and skills
- a systemic issue linked to fragmentation of services
- a lack of training and education
- a lack of policies and guidance for practice.

There is also a requirement to focus training on the individual and social determinants of health that contribute to the poor physical health of those with serious mental illness.

Research exploring the user perspective revealed that professionals often fail to view service users holistically despite the link between mental and

physical health. Service users viewed losing weight as the single most important motivator for attending lifestyle interventions. They identified the importance of peer and staff support and building relationships. Service users also valued the environment, context and the role and characteristics of the health care professional delivering key lifestyle interventions.

The situation is improving all the time and there are many examples across the UK of good practice in both mental health and general nursing settings. What nurses tell us though is that services are still inconsistent, not always readily available and often don't work together across a whole pathway to support people in their own communities to make health and lifestyle changes. There is also a need to emphasise the value of nurses in delivering a wide range of physical interventions, particularly the competencies and skills required, to support those with serious mental health needs.



“A commitment to bring about equality between mental and physical health is absolutely the right thing and all RCN members working in mental health settings wouldn't disagree with that objective. I want to thank all our members who have helped to shape our thinking and work on this important issue. They are still telling us that whilst great progress has been made the NHS still hasn't got to the point where people with mental health problems get the same access to care, and the same standards of care, as people trying to get treatment for a physical health problem. Much more is needed.”

Tim Coupland
RCN's Programme Lead, Parity of Esteem

The RCN's work – a collaborative approach

The RCN's work is focused on developing knowledge and awareness for nurses, improving resources for nursing practice, and working with others to discover what will help reduce the current mortality gap. We believe only collaborative effort across many organisations will bring about the change needed.

Equally Well UK

In meeting the challenge to improve current physical health with those who have serious mental health needs the RCN has become one of the signatories of the Equally Well UK 'Charter for Equal Health', a new collaboration backed by over 50 health and care organisations. As part of this the RCN has pledged to improve the physical health of people with mental illness.

The Equally Well UK Pledge



We believe that we all, regardless of where we live, have an equal right to good health and effective health care. No one

should have poorer physical health or health care just because they have a mental health condition. Our shared vision is that everyone living with a long-term mental health condition has access to effective, timely, consistent and responsive help at every stage of their life for their physical health and has an equal chance of enjoying a healthy and, ultimately, equal life expectancy.

The RCN's pledge

"The Royal College of Nursing is committed to improving the physical health of people with mental illness. It will push to ensure mental health nurses play a pivotal role in improving the health outcomes of patients. The College will gather evidence to achieve this across all health settings, share examples of best nursing practice and campaign for safe, therapeutic staffing levels to meet patient demand."

Competence development

A core strand of our work is to support the development of clear and consistent competencies to assist nurses to develop their skills in supporting the physical health of those with serious mental health needs. Competence development should aim to provide nurses with good basic physical health skills and the ability to hold positive and enabling conversations about health and wellbeing. Nurses should be able to look beyond their own immediate support and identify other potential areas of support for lifestyle changes.

Potential areas of training and competence in meeting physical health skills with those with serious mental health needs (Health Education England, 2018)^{iv}

Vital signs
Infection, prevention and control
Pressure area care and VTE (venous thromboembolism)
Cardio-metabolic risk factors
Motivational interviewing*
Nutrition/obesity
Diabetes
Smoking cessation
Alcohol and substance misuse
Health improvement and wellbeing

* Motivational interviewing is person-centred, goal-orientated method of communication for eliciting and strengthening intrinsic motivation for positive change. Miller and Rollnick (2012). A brief e-learning module is available at: www.makingeverycontactcount.co.uk/training/e-learning/other-e-learning-resources/



"I don't think we ever give enough credibility to how difficult it is. I think we should have a far greater emphasis, generally, around motivational interviewing skills, as opposed to just telling people what to do."

Helen Donovan
RCN's Public Health Professional Lead, commenting on the challenge to improve health.

What nursing staff need to meet the physical needs of those with serious mental health needs

It is important for nurses to hold the appropriate skills, knowledge and responsibilities to enable them to provide good holistic care for those with complex mental health needs.

In reflecting on their needs, nurses should be able to expect:

- workplace activities that are aimed at increasing awareness, knowledge and skills, facilitated through the provision of post-registration training and good supervision in practice
- good access to services that provide support and information for those with mental health needs in physical health settings
- environments that are well equipped to meet the practical physical health checks needed for those with mental health needs, for example, clinic spaces and equipment
- reasonable adjustments to be made within wider community settings, such as primary care, to enable those with serious mental health needs to receive the right checks at the right time
- wider health, social and community resources to help those requiring support make positive lifestyle changes.

How can you make a difference?

On a day to day basis the practice of **enquiring about someone's physical and mental health needs in the same conversation** is a simple yet very effective intervention to help generate conversations about their holistic needs.

Six things to ask

Ask what your local service is doing to integrate some of its services for those with serious mental health needs. Research has shown that joined up pathways and services make a difference to the experience and outcome of those with serious mental health needs.

Ask what your service is doing to train and support the physical and/or mental health needs for its patients. Parity of esteem is equally as important for anyone in any setting.

Ask what your service is doing to develop specialist roles such as Advanced Nurse Practitioners. Case examples have shown that these types of roles can and do make a real difference to the input and support around working with people holistically.

Ask what evidence-based tools are being used to measure and help improve physical health outcomes for those with serious mental health needs. Using tools such as the Lester Tool (Mental Health Partnerships, 2014)^v or the Health Improvement Profile (White et al., 2009)^{vi} help to bring a consistent and rigorous approach to supporting physical health care.

Ask the “so what?” question. Knowing that someone has completed a physical health check is only one step, always consider what interventions may be required, what information someone may need and what future community-based service could help the person improve their health.

Ask what your service is doing to develop health promotion roles within its service. Research suggests that nurses have an important role in helping people, through coaching and behaviour change conversations to help others make positive lifestyle changes.

RCN member case studies

Belfast Health and Social Care Trust – Physical Healthcare Pathway



Jennie Lee Sims and her team on the Mental Health Acute Admission ward at Belfast Health and Social Care Trust have developed a new process to raise awareness of physical ill-health and embed it into daily routines.

Jennie says: “The Physical Healthcare Pathway (PHCP) requires all clinical staff to monitor the physical health of our patients throughout their time in hospital. It highlights those at risk of physical deterioration, so that measures can be put in place early.

These measures include referring patients to smoking cessation or addiction services and promoting personal responsibility.

We want the improvement in physical health of our acute mental health patients to continue after they’ve been discharged, so we work hard to ensure their records are communicated to their GP and community teams.

Achieving parity of esteem is really important to us. The need to address mental and physical health equally is emphasised in our staff induction programme.

Since introducing the PHCP, our patients have reported feeling ‘well looked after’ and carers have noticed an improvement in communication regarding physical health.”

Contact: jennielee.sims@belfasttrust.hscni.net

Cardiff and Vale University and Health Board



Kelly Panniers works as an Advanced Nurse Practitioner who offers clinical expertise, education and supervision in supporting the physical health and wellbeing of patients who have severe and enduring mental health problems. As well as undertaking an assessment role, she works as a non-medical prescriber to provide advice, support and liaison across services to support physical health. She is currently involved in several projects to support cross working and engagement of wider services such as A&E departments and primary care.

In working with colleagues Kelly says: “I will ensure that any follow-up appointments are made and offer patients information and education if they wish to receive it. I will also liaise with the nursing staff to ensure that the management of any disease is being addressed within the patient’s care and treatment plan.”

She says a key success factor is about: “being visible within the clinical areas and ensuring that patients are aware of what it is I can offer them and why I have been asked to come and review them.”

Contact: kelly.panniers@wales.nhs.uk

NHS Forth Valley



The Livilands Resource Centre is a community-based service that works to address the physical health issues to improve quality of life for people with severe and enduring mental health conditions.

The service undertakes a range of interventions for a “forgotten and vulnerable group” which involves physical health monitoring, increased physical activity, education regarding diet, exercise, smoking and misuse of alcohol and substances. They also host and deliver physical activities aimed at various levels of ability. Wider services are now working with younger people looking at employability and meaningful activity.

Heather Tainsh, Senior Charge Nurse says that the success of the service is due to the: “enthusiasm and passion of the staff and the commitment and participation from service users. This vulnerable group of patients are known to be very difficult to engage in and sustain meaningful activity, this is not an issue at Livilands, we actually have issues with groups being full and people keen to participate.”

In terms of outcomes, Heather says: “we are measuring a few areas such as weight-loss, numbers of patients receiving physical health monitoring, attendance at clinics and activities, and overall patient experience.”

The service is currently also in the process of developing a cardiology pathway.

Contact: heather.tainsh@nhs.net

Kings Health Partners



Kings Health Partners is completing an ambitious programme to integrate Mental and Physical Healthcare Systems across South London and Maudsley NHS Foundation Trust (SLaM). As a three-year project, the aim is to establish sustainable systems and shared pathways to support the integration of mental and physical health.

The project team is nurse-led, bringing together expertise from different professional groups and involves a range of specialist nurse roles. It aligns to SLaM’s physical health strategy associated with premature mortality and is funded via a three-year charitable grant. There are three workstreams – a physical health improvement and implementation team, volunteer health champions, and Health Locker which provides a digital platform to improve consistent provision of information and resources.

Beverley Murphy, Director of Nursing at SLaM, says: “Nurses are well placed to shape development of the project as well as to enable the translation of change into business-as-usual activity. The broader nursing workforce in SLaM will particularly benefit from the education and training provided by the project team to support them to be skilled and confident to support physical health.”

On its success she says: “It is a truly collaborative approach and is establishing trusting and robust relationships across organisations. We have in place a range of short to long-term outcomes to ensure that there are improved health outcomes and greater physical health equality for those with serious mental health needs.”

Contact: kate.lillywhite@slam.nhs.uk

A shared experience

Many service users have shared their experiences of struggling to have their physical health needs recognised whilst unwell or in receipt of mental health support. The RCN is working to create a stronger voice for service users, creating opportunities to capture a richer understanding of the complex issues around supporting physical health.

Hannah's experience



“Throughout my treatment as a service user it was extremely rare for both my mental wellbeing and physical wellbeing to be thought of at the same time.

“When I self-harmed, often my physical wellbeing was the only thing thought about and risk adverse interventions were put into place that did not think about the impact of those on my mental wellbeing. For example, not being allowed to go for a walk which is known to be good for mental wellbeing.

In reverse there were times when only my mental health was thought of, even though the drugs and my self-harm were impacting my physical wellbeing.

We all have physical and mental health and I am pleased to be working with the RCN on this important programme – I think in every sector of health care we need to take both equally into account, otherwise we are neglecting a huge part of someone.”

Hannah McDonald – Lived Experience Representative, RCN's Parity of Esteem Programme

“It is simply unacceptable that in 2019, there is still a mortality gap for people with a serious mental illness. This has not changed over the past five years despite numerous reports, publications and a Physical Health Quality Improvement Scheme.

Largely this is due to physical health problems that often are not diagnosed or managed effectively. There should be seamless collaboration between primary and secondary care to both share information, and to provide regular physical health screening for all service users.

Reasonable adjustments should be considered for some service users who may need extra support to access these services and to have appropriate and accessible pathways of care readily available if needed.”

Angela Willan, RN, Physical Health Facilitator, RCN Member

“To address Parity of Esteem requires a focus on many different areas but, to me, joint working is probably the most important.

There are many examples of where acute trusts and specialist mental health trusts are not working together in an effective way. There are few shared services, with few mental health lead nurses within acute care. There also seem to be real challenges for all wider services, outside a mental health context, taking responsibility for addressing gaps in physical health provision.

My drive, as a development nurse, is to make connections between relevant services, help acute and mental health staff network and collaborate more effectively. The goal is to bring together the skills from both mental and physical health professionals, some of whom are currently working in ‘silos’ next door to each-other.

If we are to address the mortality gap, frontline staff must have the time and the opportunity to learn from their counterparts in both mental health and physical health assessment, engagement of services users and using innovative approaches to training and service provision. We must join forces and share skills both formally and informally. Frontline staff have the expertise, the drive and the motivation to make this happen. What is needed is ‘buy-in’ from right across the health system which, I believe, will start to provide equity and ultimately save lives. ”

Dan Brown, RN, Development Nurse, RCN Member

Parity of Esteem across the UK

Northern Ireland

RCN lead – Rosaline Kelly: Senior Professional Development Officer, Northern Ireland

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We have been working really hard in Northern Ireland to implement the Parity of Esteem programme; raising awareness of the injustice of the mortality gap, amongst staff across all nursing services and specialties. It is important for nurses to understand that people with mental ill health are “our patients, our users” irrespective of where they need care and treatment, be that from mental health nurses or nurses treating their physical conditions.

In the absence of a devolved government here in Northern Ireland, we believe the best way to influence nursing services, design and commissioning, is to empower nurses. We want to empower the nurses who work in front line services, and their managers, to demonstrate the effectiveness of their nursing care and interventions.

Our main focus this year is on supporting mental health nurses to evaluate and evidence the impact of their interventions that meet the physical health needs of people with mental ill health. We will equip mental health nurses with the knowledge and tools to articulate how they are improving physical health outcomes for the people they are providing services to, along a cohesive continuum of care. A learning event in April 2019 created a community of enthused nurses, from front line staff to commissioners of services, who have an improved understanding of the power of evaluation, evidence and research.

There is more open discussion about mental health. This is definitely a good thing. However, mental ill health can still be viewed as very separate from everything else. The interdependency of physical health, mental health and other life factors, and our ability to manage, treat, overcome and live with these, all need to be seen as a package. That’s the vision – truly holistic care. And for that we will turn our focus to all nurses, across all specialisms.

England

RCN lead – Jude Diggins: Director, RCN London, London Region

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Influential papers by the Royal College of Psychiatrists (2013)^{vii}, policy documents from the UK Government and Parliamentary reports (2014)^{viii}, have all highlighted the need for more decisive and coordinated action. A potential turning point has been NHS England’s Five Year Forward View for Mental Health (2016)^{ix} which states explicitly where parity should be addressed, such as in funding of services, research, access to services, mental health legislation and physical health. An Implementation Plan (2016)^x describes specific objectives including physical health screening in both primary and secondary care settings. Most of this activity has been achieved via England’s Commissioning for Quality and Innovation Framework (CQUIN) which includes screening and intervention. NHS England has produced resources to support this initiative and arguably CQUIN targets have been achieved, however it still feels like there is so much more to do.

Collaborating with key partners is important to make positive progress. Our role has been to work alongside organisations such as Equally Well UK, NHS England, and Health Education England to strengthen the mechanisms for nurses to be adequately equipped on the front line. Our presence at a recent England mental health summit drew focus to the ongoing commitment to deliver parity and for those that attended; there was a palpable sense of the commitment to address mental health inequality. There is a sense of moving in the right direction, with more recent initiatives, such as the launch of Equally Well UK, giving impetus to seek out the answers.

In spite of this, all developments need to be seen in the context of ensuring services are staffed safely and effectively and working in an integrated way to achieve the best possible outcome for those with serious mental health problems.

Scotland

RCN lead – Lorna Greene: Policy Officer, Scotland

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In its first progress report on Scotland's Mental Health Strategy 2017-2027^{xi}, the Scottish Government said that preventing and treating mental health problems "with the same commitment, passion and drive as we do with physical health problems" is the Strategy's guiding ambition.

In September 2018, as part of our work on parity of esteem, RCN Scotland hosted an event with the Scottish Minister for Mental Health, Clare Haughey, so that she could hear directly from RCN members working in mental health and learn what they considered to be the key issues for mental health nursing and the mental health strategy. Members raised a number of priority areas with the Minister which included: the need for better workforce tools and methodologies, difficulties in recruitment and retention, as well as the need for a review of some elements of Scottish Mental Health legislation.

RCN Scotland is pleased to see that the voices of our members are having an impact and that in March 2019, a number of independent reviews were announced by the Minister for Mental Health including a review of forensic mental health services and a review of Scotland's mental health legislation. This is in addition to a review on CAMHS and a review on perinatal and infant mental health. As well as supporting these important areas of work, RCN Scotland continues to incorporate issues highlighted by members in our ongoing safe staffing work.

RCN Scotland's aspiration for this work is to follow through on the 2017 RCN Congress motion and continue to insist that parity of esteem is addressed urgently for the people of Scotland.

RCN Scotland is doing this by continuing to monitor the progress of the government's mental health strategy as well as contributing to key policy areas such as the Scottish CAMHS Review, the development of safe staffing legislation and the development of a staffing tool for community mental health nursing. Member engagement is key to meeting this aspiration and we are grateful

for the expert input we have received from members to date and look forward to continuing to ensure that RCN members' priorities are reflected in our contributions.

Wales

RCN lead – Nicola Davies-Job: Associate Director (Professional Practice), Wales

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Parity of Esteem between mental and physical health is at the heart of the Mental Health (Wales) Measure 2010^{xii}. *Together for Mental Health: Delivery plan: 2016-19*^{xiii} is the Welsh Government's 10-year strategy to improve mental health and wellbeing. The cross-Government strategy consists of five chapters, is underpinned by 18 outcomes and covers all ages.

Priority area eight states that people with a mental health problem should have access to appropriate and timely services and that mental wellbeing should be given equal priority with physical wellbeing in the development and delivery of services. This goal had the following measurable targets with positive outcomes:

- Health Boards were to establish effective mental health psychiatric liaison capacity for District General Hospitals by March 2017 and have evaluated the impact of this service by March 2018. This achieved all District General Hospitals having psychiatric liaison services in place by 2017.
- Health Boards were to establish effective mechanisms to increase the quality and uptake of health checks and medication reviews for people using mental health services by March 2017. This increased the percentage of patients with schizophrenia, bipolar affective disorder and other psychoses having their blood pressure and BMI recorded, and in addition for those aged 40 or over, a record of blood glucose or HbA1c, shown by the Quality Framework used in general practice.
- Welsh Government and Public Health Wales NHS Trust were to work towards ensuring that mental wellbeing is given equal status within Health Impact Assessment undertaken in Wales by March 2019.

- Mental Health Psychiatric Liaison and substance misuse teams were tasked with working in conjunction with emergency department colleagues and partners including the police to better address mental health and substance misuse needs of frequent attenders.

We are beginning to forge working relationships with mental health leads in the Welsh Government. Our role will be to continue to influence this agenda and reflect the experiences of nurses and service users in our conversations, in order to ensure that key priorities are being met.

Also, in Wales, The Welsh Government's *Wellbeing of Future Generations Act (2015)*^{xiv} has enshrined the notion of parity in law; this law calls for a more equal Wales. This has been interpreted in mental health services as ensuring that "people with mental ill-health experience less stigma and discrimination and feel that these problems are being tackled."

The scale of the challenge

The scale of the challenge, to reduce the current mortality gap, should not be underestimated. It is our belief that only collaborative effort across many organisations will bring about improved life expectancy for those with serious mental illness. The RCN's role, as the leading professional body for nursing, is to continue to support nurses in practice, influence our partners and stand up for the equal rights and needs for those affected by a serious mental illness.



"Mental Health Nurses have a core role to play in ensuring there is parity of care for people with serious mental health needs. However good or bad a day they are having, whatever their needs are – physical, emotional or both –

we need to be equipped and ready to help.

"It is a privilege to work with people with mental health needs, and we must honour that by ensuring we provide holistic care to our patients."

Ellie Gordon
RCN Mental Health Forum.

Resources

Equally Fit Scotland, available at: www.supportinmindscotland.org.uk/Handlers/Download.ashx?IDMF=ef7ea924-bbb0-4a77-95f2-f953ee27603d

Equally Well UK A range of practical guides and literature to support a better understanding of the need for parity, available at: www.equallywell.co.uk/resources/

Making Every Contact Count, available at: www.makeeverycontactcount.co.uk/media/1152/mecc-resources_a5_revised_print.pdf

NHS England, *A practical toolkit for supporting those with serious mental illness*, available at: www.england.nhs.uk/mentalhealth/wp-content/uploads/sites/29/2016/05/serious-mental-hlth-toolkit-may16.pdf

RCN, *Evidence-Based Review*, available at: www.rcn.org.uk/clinical-topics/mental-health/parity-of-estate/improving-care-for-clients-with-a-severe-mental-illness

UK Government, *Improving the Physical Health of People with Mental Health Problems: Actions for Mental Health Nurses*, available at: www.assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/532253/JRA_Physical_Health_revised.pdf

World Health Organization, *Premature death among people with severe mental disorders*, available at: www.who.int/mental_health/management/info_sheet.pdf

References

Suggested further reading RCN parity of esteem webpages www.rcn.org.uk/clinical-topics/mental-health/parity-of-esteem RCN, *Evidence-Based Review*, available at: www.rcn.org.uk/clinical-topics/mental-health/parity-of-esteem/improving-care-for-clients-with-a-severe-mental-illness

- i Parity of Esteem debate item (2017) www.rcn.org.uk/congress/whats-on/parity-of-esteem (accessed 2 April 2019)
- ii RCN (2018) *Parity of Esteem*, London: RCN. www.rcn.org.uk/professional-development/publications/pub-007109 (accessed 1 April 2019)
- iii RCN, *Evidence-Based Review*, available at: www.rcn.org.uk/clinical-topics/mental-health/parity-of-esteem/improving-care-for-clients-with-a-severe-mental-illness (accessed 1 April 2019)
- iv Health Education England (2018) *Physical Care Competency Framework for Mental Health and Learning Disabilities* (in publication)
- v Mental Health Partnerships (2014) *Lester UK Adaption*, available at: www.mentalhealthpartnerships.com/resource/lester-uk-adaption/ (accessed 1 April 2019)
- vi White et al (2009) The development of the serious mental illness physical Health Improvement Profile, *Journal Psychiatric Mental Health Nursing*, 16, pp.493-498.
- vii Royal College of Psychiatrists (2013) *Whole-person Care: from rhetoric to reality*, available at: www.ucl.ac.uk/core-resource-pack/resources/content-delivery/lester (accessed 1 April 2019)
- viii UK Government (2014) *Closing the Gap*, available at: www.gov.uk/government/uploads/system/uploads/attachment_data/file/281250/Closing_the_gap_V2_-_17_Feb_2014.pdf (accessed 1 April 2019)
- ix NHS England (2016) *Five Year Forward View for Mental Health*, available at: www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf (accessed 1 April 2019)
- x NHS England (2016) *Implementing the Five Year Forward View*, available at: www.england.nhs.uk/wp-content/uploads/2016/07/fyfv-mh.pdf (accessed 1 April 2019)
- xi Scotland's Mental Health Strategy (2017) available at: www.gov.scot/publications/mental-health-strategy-2017-2027/ (accessed 1 April 2019)
- xii Mental Health (Wales) Measure (2010) available at: www.legislation.gov.uk/mwa/2010/7/contents (accessed 29 March 2019)
- xiii *Together for Mental Health: Delivery plan: 2016-19*, available at: <https://gov.wales/mental-health-delivery-plan-2016-2019> (accessed 29 March 2019)
- xiv Welsh Government's Wellbeing of Future Generations Act (2015) available at: <http://futuregenerations.wales/about-us/future-generations-act/> (accessed 29 March 2019)

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