Struggling to cope

Mental health staff and services under pressure

UNISON’s survey report of mental health staff 2017
Introduction

Mental health services are increasingly under scrutiny, with one in four people across the UK experiencing a mental health problem each year\(^1\). Mental health has been rising up the political agenda in recent years. Politicians from all of the parties have begun to realise the prevalence of mental health problems, and the growing need for more to be done to provide help to those that need it.

But throughout all this, there is a danger that the voices of those who provide the services are forgotten or ignored. UNISON wants to ensure that mental health staff are listened to and heard. So this year UNISON undertook a survey of its members working in mental health.

Our survey results make for grim reading. They reveal that mental health services have been hit hard by cuts to NHS funding, which has a damaging effect on service users and staff. Service users have been left struggling to access the help they need, while mental health staff working in under-resourced areas are left vulnerable to violence and aggression, and unable to provide the level of care needed.

Our survey results also show that an overwhelming majority of staff report feeling work-related stress frequently, with many suffering so much that they have had to take time off work.

UNISON is campaigning for fair funding for mental health. Staff must be able to deliver quality services and carry out their jobs in an environment that looks after their own mental and physical health too.

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Survey findings

UNISON undertook a survey of mental health staff in September 2017, which received more than 1,000 responses across a wide range of employment settings, including adult community mental health, dementia care and secure units.

Survey respondents worked across a broad range of occupations from nursing, to administrative and clerical roles, and social work. Over half the respondents worked in a nursing or health care assistant/support worker role.

Cuts to services

UNISON has been campaigning for better funding for NHS. This survey shows how reduced funding has damaged mental health services.

More than two-thirds (68%) of respondents felt they were unable to ‘provide the best support to service users’, and almost a third (32%) felt there was not the right mix of skills and specialists within their team to provide good support.

In comments others said that cuts affected what they were able to offer to service users with many citing “patients in inappropriate settings for their needs due to bed shortages”, a “lack of services to offer patients”, and a “lack of resources and increased workloads leading to less oversight of clients”.

Three-quarters (76%) of respondents stated that staff shortages as well as a lack of funding (75%) were responsible for individuals being unable to access services early. Three-fifths of respondents cited long waiting lists (61%) and a lack of beds (64%).

Sixty per cent felt they did not have enough time to meet the needs of service users, families and carers. The repercussions of this are likely to be an even greater demand for already overstretched services.

Lone working appeared to be on the increase, with a third (33%) of respondents stating that cuts to services meant that they now had to work alone where previously they didn’t have to.

Thirty one per cent of respondents felt there had often been an unsafe ratio of staff to services users at their workplace in the past year, while 37% said this had been the case.
sometimes. Just a fifth of respondents (20%) stated that this never happened.

Almost two-thirds (62%) of the more than 300 respondents who were involved in the supervision of clinical placements said they did not have enough time to provide good support to students. This is especially concerning given the recruitment problems in mental health and the difficulties in encouraging younger people into the sector.

More than a third of these respondents stated that students were sometimes (22%) or often (13%) counted as part of core staff when on placement in their team.

**Stress at work**

Almost three-quarters of respondents (74%) reported feeling stressed because of their work at least once a week, while more than a third (36%) felt stressed every day. With the pressures currently affecting the health service, this is perhaps unsurprising, but concerning nonetheless.

Of particular concern is the extent to which individuals are feeling the impact of stress – with more than one in five respondents (22%) having taken time off work because of stress in the past year.

These findings suggest that robust measures must be put in place to protect the mental health and well-being of staff. Yet, half of all respondents (50%) felt their employer didn’t look after the mental health of staff. Given the recruitment and retention problems within mental health and the wider NHS, this is something that must be addressed urgently if the health service is to hold on to knowledgeable, well-trained staff, and encourage new recruits.

Stress levels are also likely to be affected by the work-life balance of individuals, or lack of it. Yet almost two-fifths of respondents (38%) reported that they worked unpaid overtime at least 2-3 times per week. More than two-thirds (68%) said their increased workload was the reason for their extra hours, while 57% cited a shortage of staff.
Violence and aggression

A common theme was that verbal or physical aggression happened on a daily basis and that it simply “goes with the job”. One respondent stated: “On a daily basis I would say that patients are verbally aggressive. Rather than being an unusual occurrence I now consider this almost a default position for a large number of patients.”

Alarmingly, 42% of respondents have been the subject of a violent or aggressive incident from a service user in the last year, with shocking examples of physical assaults. More than a third (36%) had witnessed a colleague being the victim of a violent incident.

One respondent described an assault where they were “repeatedly punched to the floor”, while others spoke of “attempted strangulation”, being “head-butted”, “punched [in] the face with resulting fractured nose”, “being punched and spat at when supporting patients with their personal care, or unexpected physical abuse from patients that are confused and worked up.”

However, it is the causes of these incidents and the extent to which they are preventable that needs to be examined. Given our survey findings around staffing ratios and lone working, this is something that must be urgently addressed.

More than a third of respondents (36%) felt that violent incidents had become increasingly frequent over the past year, with 87% citing a lack of staff as the reason for this. Fifty per cent of respondents said that the overuse of agency staff, who often aren’t around for long enough to get to know patients, was another reason for the increase.

Respondents spoke of service users experiencing “delays in accessing services”, which can lead to service users being admitted once their mental health has significantly deteriorated. Others talked of thresholds “increasing for admission so service users are having to stay in the community when they are not well and need additional support”. Or that delays meant “service users on wards have become very unwell and are therefore often more aggressive and violent.”

An increase in drink and drug use by service users was also cited by some respondents for the rise in violence and aggression. More than a quarter of respondents (28%) stated
that a lack of training in de-escalation techniques was a factor, while 50% blamed an over-reliance on agency staff.

The responses indicate that much more can be done to reduce the frequency of violent incidents – with more than one in ten respondents (12%) stating they had not received de-escalation training (where it was relevant to their role).

Only 38% of staff who had been subject to a violent or aggressive episode felt adequately supported by their manager. Almost a third (32%) did not report the violent incident. Some said that this was because the reporting procedure was too “onerous”, or there were “too many [incidents] to write about”. The survey highlights the need for more to be done to help support staff.

**Working in mental health**

Almost half (48%) of the respondents were planning to leave their work in mental health or were thinking about doing so. This is worrying given the drop in numbers of students applying for nursing degrees and the recruitment and retention problems in mental health settings.

Of those either leaving or thinking of leaving, more than a quarter (26%) stated that it was because their own mental health and well-being were suffering, while 22% said that the lack of a decent pay rise in recent years was to blame.

But, despite all the pressures of working in mental health and the concerns of staff around cuts to services, more than two-thirds (67%) of staff find working in mental health rewarding. More than four in ten (45%) would recommend a career in the sector to others.
Survey findings – in brief:

- the survey was conducted in September 2017 and received 1,071 responses
- responses came from a wide range of employment settings, including adult community mental health, dementia care and secure units
- 86% of respondents worked for NHS organisations, with others employed by independent providers (7%) and local authorities (4%)
- respondents worked across a broad range of occupations from nursing, administrative and clerical staff to social workers
- over half of the respondents worked in a nursing or health care assistant/support worker role
- 61% of respondents stated they had worked in mental health services for more than 11 years.

Stress at work:

- 74% of respondents reported feeling stressed because of their work at least once a week, and 36% felt this way every day
- 22% had taken time off because of work-related stress in the past year
- 50% reported that they did not think that their employer looked after the mental health and well-being of staff
- 38% work unpaid overtime at least 2-3 times per week, with the most common reason identified (by 68% of respondents) increased workload
- 57% cited staff shortages for why they worked unpaid overtime, and 47% said it was when the needs of the service user overran.

Violence and aggression:

- 42% said they had been subject to a violent or aggressive incident from a service user in the last year, and 38% hadn’t felt adequately supported by their managers after the incident
87% cited a lack of staff as a reason for the increased frequency of violent incidents occurring in the last year. The overuse of agency staff was also highlighted by 50%.

86% felt they had the knowledge and training required to carry out their work safely and well.

Cuts to services:
- 60% stated they did not feel able to meet the needs of service users and their families
- Staff shortages (76%) and the lack of funding (75%) were highlighted as two major barriers preventing individuals from accessing services early
- 68% of respondents said that service users were “increasingly reaching crisis point before accessing services”
- 33% reported having to work alone as a result of funding cuts.

Working in mental health:
- 67% find working in mental health rewarding. But 34% did not feel able to recommend working in the service to others
- 26% cited their mental health and well-being suffering as the reason why they were considering leaving work in the mental health sector.
Conclusion

UNISON's survey clearly shows the damage that government cuts have done not only to those that require mental health services, but the employees that provide it too.

Cuts to services have caused staff shortages and have increased workloads for existing employees. The mental health of those working in the sector is suffering and this has had a detrimental effect on the services that staff are able to provide.

Staff shortages were cited again and again in our survey as a reason why service users were unable to access help early and for the increase in violent incidents against service providers.

UNISON is calling for a full review of safe staffing levels within mental health settings with the aim to introduce minimum staffing levels.

Mental health employees must be properly rewarded for the work they do by an immediate end to the public sector pay cap. Last month health unions submitted an NHS pay claim to the Chancellor, urging him to earmark funds in the November Budget for a pay rise in line with inflation. The claim also calls for an additional £800 payment per individual, to restore some of the pay lost over the past seven years.

With almost half (48%) of respondents admitting that they are considering leaving the mental health sector, it's clear that urgent action must be taken by the government to safeguard those who provide an essential service.