

Tackling TB in Under-Served Populations:

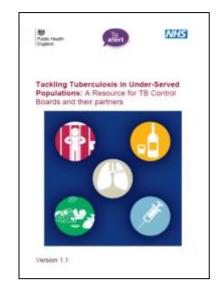
A Resource for TB Control Boards and their partners

A closer look at Chapter 5: People living with a mental health problem

Available from: https://www.gov.uk/government/publicatio ns/tackling-tuberculosis-in-under-servedpopulations

Slides prepared by: National TB Office – PHE TBStrategy@phe.gov.uk

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Purpose of the USPs – TB Resource



- to improve our understanding of the health needs of USPs with TB
- to provide a resource to help tackle TB in USPs
- to provide in one place <u>hyperlinked</u> documents, information leaflets, other resources and exemplars of good practise
- to support the design and delivery of multi-agency programmes to better meet the needs of USPs
- Ultimately, to contribute to TB control in the wider population

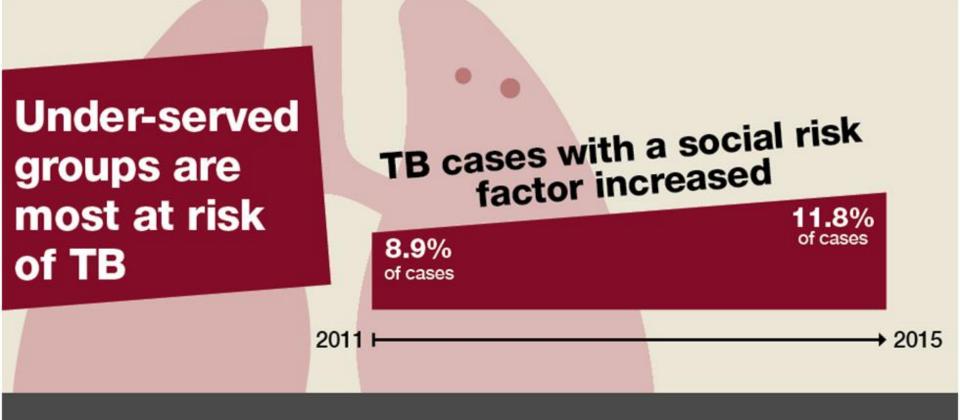


Who are the under-served with TB?

For the purpose of the USP Resource, people considered as underserved include:

- people with mental health needs
- people who misuse drugs or alcohol
- some migrants groups including asylum seekers, refugees and those in immigration detention
- people in contact with the criminal justice system
- people who are homeless

and what do we know about them... (next slide)



Social risk groups:







are twice as likely to have infectious TB

x2

x2 RIP

are twice as likely to die



Definitions of mental health problems

Mental health problems vary in severity and duration.

Divided into two main areas:

1. common mental health problems including anxiety and depression that <u>25% of adults</u> experience

2. severe mental illness (SMI) such as schizophrenia and bipolar disorder that often require treatment by specialist services. Experienced by approximately <u>1% of adult population</u>

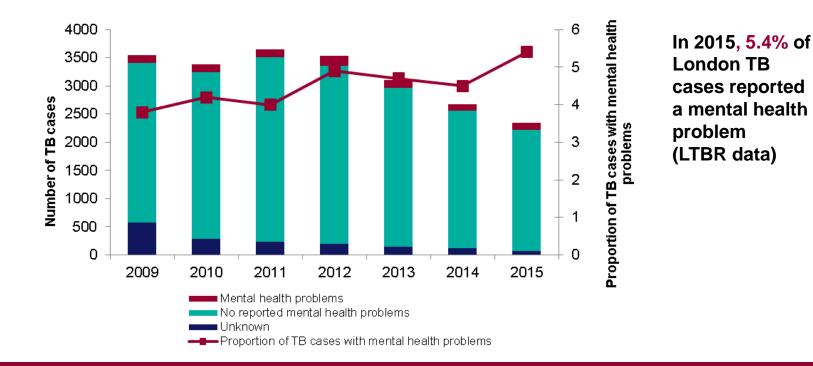




The burden of TB among people living with or recovering from mental health problems

TB patients with mental health issues are not recorded in ETS but information available in LTBR

No. of TB patients treated in London with reported mental health problems, LTBR, 2009 - 2015.





TB and mental health key facts

Data from the LTBR shows that TB patients with mental health problems were:

- more likely to have pulmonary disease (59% versus 46% of patients with no mental health problem, 2009-15)
- more likely to have a delayed diagnosis
- had poorer treatment completion (76% versus 86% of patients with no mental health problem completed treatment within 12 months)
- were also more likely to die (6.4% died versus 2.3%)



Challenges faced when working with TB patients with mental health issues

- recognising the needs of people with a mental health problem
- multiple complex needs in people with a mental health problem
- no recourse to public funds can be an issue
- homelessness / insecure accommodation
- late presentation of illness and poor treatment adherence



ACTIONS to support TB patients with mental illness - 1

1. Clinical and mental health services to consider patient-centred care plans that consider the totality of need for patients





2. TBCBs to encourage primary care as well as mental health service providers to:

- promote physical health checks for people living with, or recovering from, a mental health problem, and
- use any appropriate opportunities to increase awareness of TB

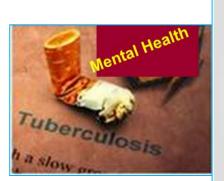




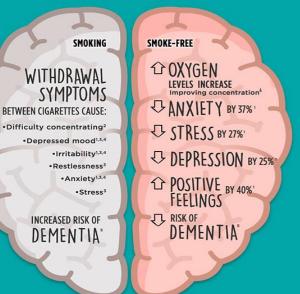
3. TBCBs to encourage clinical services and primary care to improve access to smoking cessation support for people living with or recovering from a mental health problem (smoking increases the risk of TB)

Quit smoking and improve your mental health

The effects of smoking are not limited to your lungs; smoking also affects your brain.¹



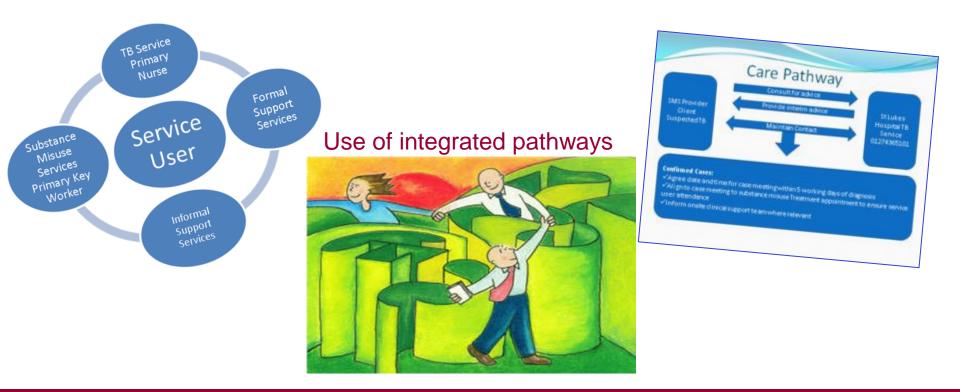






4. TB clinical teams to consider greater use of mental health services as DOT compliance support workers.

Exemplar E4.1 and models of care chapter 10





5.TBCBs are encouraged to explicitly recognise the needs of people with mental health problems in their work plans



6. National TB Surveillance team to include information on the mental health of patients with TB in the future national TB surveillance system



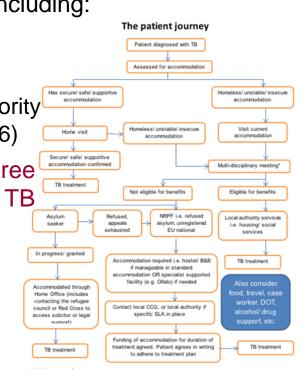
Related recommendation

7. Work to address the issues of homelessness & TB – which may apply to some TB patients who have mental health issues

The USP Resource provides many recommendations including:

- Streamlined accommodation pathways
 - to help house homeless TB patients
 - to help house TB patients ineligible for local authority funded accommodation (those with NRPFs) (Ch.6)
- TBCBs working with CCGs and local authorities to agree the best way to fund temporary housing for homeless TB patients, until treatment is completed (Ch.6)





Public Health

England

^{III} OVERALL: USP Resource consists of 10 chapters

<u>Chapter 1:</u> defines who USPs are, outlines the burden of TB in these groups and maps where found in England

Chapters 2 to 6:

- take each USP in turn: defines them; outlines the burden of TB within these groups; discusses their challenges and makes recommendations on how to meet USP needs
- each chapter includes hyperlinked resources (e.g. leaflets & websites) exemplars of innovation and good practice to stimulate local action

<u>Chapters 7, 8 and 9:</u> outline roles and responsibilities of local government, TBCBs, CCGs and the third sector in meeting the needs of USPs

Chapter 10 outlines 'models of care' that can be used to meet the needs of USPs with TB

PLEASE do view and use the other chapters



Message from the National TB team

We hope this brief presentation raises awareness of the content of the USP Resource and helps you and your stakeholders develop services that better meet the needs of **TB patients who have mental health issues**

We encourage you to read the full USP Resource discuss it, work with it & share it as widely as possible https://www.gov.uk/government/publications/tackling-tuberculosis-inunder-served-populations

Thank you