

Private: Digitised mental health care is growing – but where is it going?

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Mental health services are going digital, and more companies are seeing this as a way to tap into growing demand. Healthcare Europa talks to UK MD Maud Fontanier of the newest player in the British market, Instant Counselling; Michelle Tempest, partner at Candestic who is tracking this segment, and; Romy de Groot, head of international BD at Karify to understand these new platforms and what they mean for the industry.

A new service seeks to meet growing demand for certified therapists on demand, whilst leveraging a professional network to tap into the UK's occupational healthcare benefits system to replicate its French model that serves 3m employees across its corporate portfolio.

Tempest says: "Instant Counselling, as well as other players like Karify are consolidating – what is new in this area is that businesses are scaling up, not just with one provider, but across Europe and across the world.

"Mental health is still quite stigmatised. In a way, this is a good thing for new entrants in the global market as there is a need for trained mental health therapists and access to them. These companies facilitate that access in high demand areas."

Instant Counselling for example, lets users talk to UK accredited counsellors when and wherever they need them, with sessions starting at £1.35 per minute. The company is an extension of a French initiative.

Fontanier says: "Our parent company, Pros-Consulte, provides counselling services for corporates in France. It has clients such as EDF and Procter and Gamble. Jeconsulteunpsy (JCUP), is its service for the public. Pro and Instant Counselling, the UK parallels, launched this year."

Each country has its own network of counsellors (55 in France and 30 in the UK). The B2C services, Instant and JCUP offer on demand telephone counselling. The B2B arms (Pros-Consulte/Counselling) are in the occupational health and employee benefits area.

The difference in the corporate packages are the inclusion of intervention through onsite counsellor deployment, anonymous analysis on collated feedback for employers to use in change management, stress management training, and specifically for the UK, financial and legal advice (as this was identified as a cause of stress/anxiety!).

"We provide feedback for corporate clients in the form of statistical data and reports on the number of calls from employees and the general reasons for problems within the confines of anonymity and confidentiality. Employees are allowed eight calls per issue per year.

"We also provide stress management training so clients can identify and cope with the early signs of stress. Other supplementary tools include financial and legal support and online well-being forum with tips on mindfulness, smoking etc."

Fontanier also explains that structured counselling with the same counsellor is accessible for employees within a short-term framework. If longer support is required (e.g. open-ended therapy), this is then referred externally to avoid conflicts of interest.

On the financials she adds: "the largest part of our turnover comes from the Pros-Consulte platform for the professionals.... this doesn't mean that the public isn't a successful target market, it is just our resources have been placed on B2B revenue streams."

Karify's de Groot emphasises that to address underlying issues and benefit from the digital possibilities, platforms need to provide features beyond enabling a phone call between a therapist and an anonymous patient: "What a patient needs is guidance, support and autonomy to get on the road of recovery.

"At Karify, we work as cloud based solution that supports therapy sessions with online supplementary digital care. You can combine face to face meetings with online exercises, tailored medical information and different portals to communicate safely digitally."

Tempest elaborates on the digitalisation of psychiatric services: "if you look historically in the mental health sector, we have always been head of the curve; we have Skype, online services and telephone talking therapies."

"There are all sorts of different ways these companies are developing; at the lower end you have counsel support and peer to peer groups, whilst more complex cases necessitate talking to therapists via classic face to face sessions – online technology is matching a long time mismatched supply and demand for this sort of healthcare.

"The sector is also evolving in terms of technology. For a long time the NHS and GPs have had access to computerised CBT – with reasonable results. Phobias for example have been seen to diminish under these sorts of sessions.

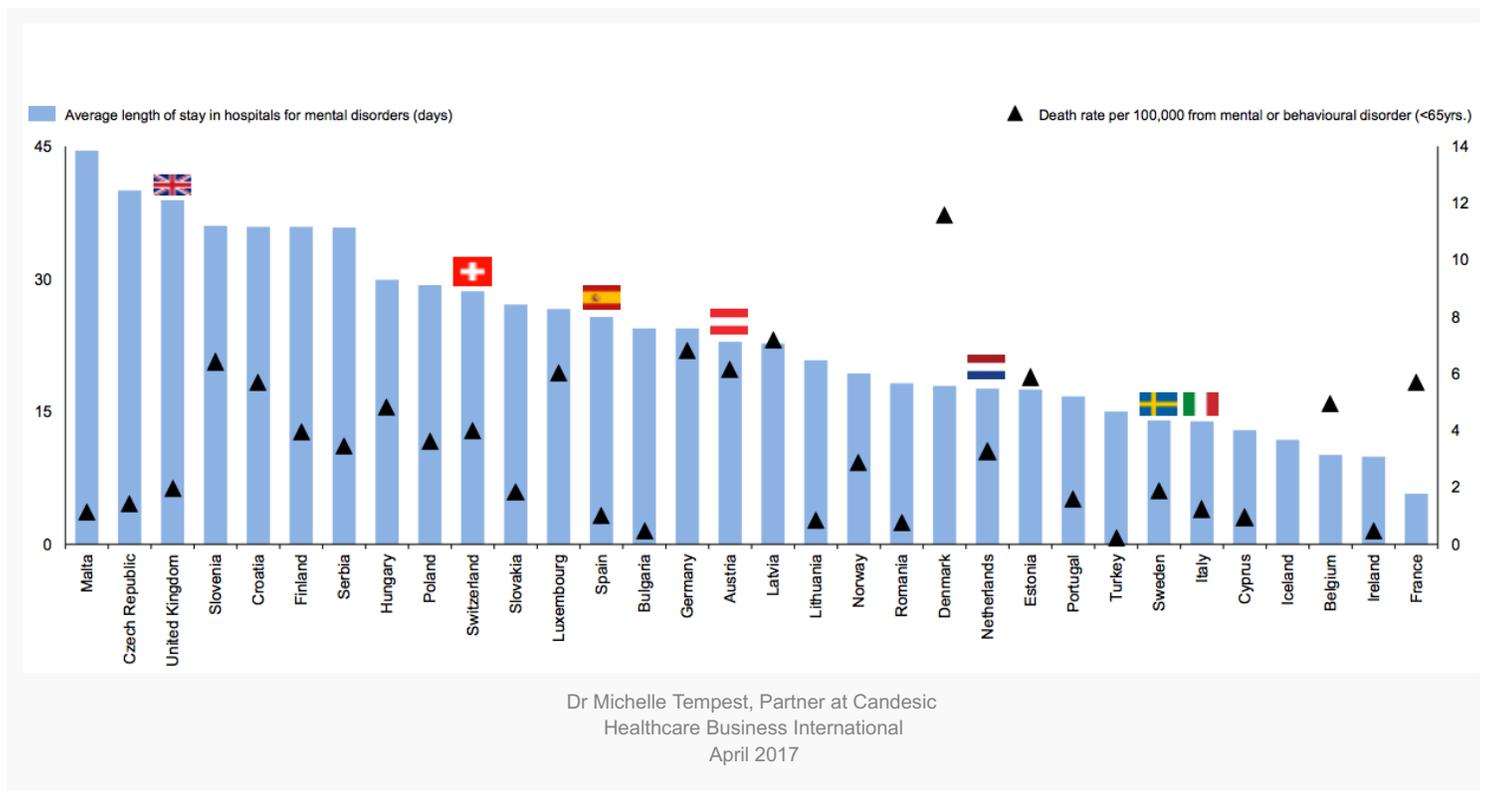
"Now, new companies are coming to the next level so you can do therapy in the comfort of your own home."

IESO is yet another company in this field: "it sits between counselling and face to face therapy. With a certified CBT counsellor at the other end of the telephone – via Whatsapp and/or text – algorithms and autodidactic AI are building data and recognising keywords in patient communication. This sort of initiative bridges two important gaps; instant access to therapy and writing therapy.

"Digitised mental healthcare will never exactly match the inpatient care – there is a valid point of the risk involved in terms of not being able to monitor patients' emotions, reflexes, reactions and voice for example. It can be a grey area when it comes diagnostic criteria for mental disorders which inhibits technology platforms but results produced in the Lancet have shown positive results."

In the psychiatric stream at HBI 2017, Tempest provided a few statistics in her presentation highlighting vast discrepancies in the delivery of psychiatric healthcare.

Barriers to admittance vary and statistical information is skewed with a general trend for Catholic and Muslim majority countries to avoid recording deaths due to mental disorders.



Taking the UK as an example, AVLOS is high as criteria for hospital admittance is high and death rates low: “we are in top quartile with long length of stay – we are only admitting very ill people and in other states it is a cultural concern.”

For example, the Latin countries, Ireland, Cyprus and Bulgaria have low AVLOS well as death rates. This shows little correlation and reveals gaps in the market where public systems do not have the most efficient method of delivering or providing access to essential care.

“There are two models for this industry, one where you’re willing to pay, and keep cost down with economies scale and a decent operational cost line. The state market is number two, where there is a big untapped potential. Online and instant therapy platforms have yet to economise here.”

Instant Counselling is already acting on filling this gap as member of a Franco-British directive providing mental health support and wellbeing guidance to both businesses and the public, the Pro-Counselling Group.

“The NHS market I believe is a where they could really be helpful to the whole sector – it’s quite difficult to see a therapist in the NHS due to diagnostic levels needed to warrant admittance.”

According to Tempest, sub clinical people could benefit from digitisation, those who are not authorised to prescribe or diagnose, counsellors for example, who can be incorporated into a network to deliver healthcare services for mental disorders.

Digitisation also supports the Big Data movement we have witnessed over the past few years.

De Groot says: “With *digital layers*, you can track patients’ progress and make decisions about treatment plans based on their profiles. There are self-monitoring capabilities at one end and apps to monitor mood on the other. More digital layers such as cloud based sessions, give way to transparency and provides several communication portals to build relationships and provide structured counselling.

“At the end of the cycle we have accurate data, transparency of patient progress, and multiplying this data by the number of patients, we can classify and streamline delivery.”

Our Analysis: All in all, one thing is for sure – this online mental health services can never replace the role of face to

face meetings where the counsellor or psychiatrist can engage fully. Although the technology will help to effectively understand data, which can be used either to foresee a stressed employee needing support or streamline HR culture and practice.

On the public front, the first step is to let supply and demand coincide. We can expect growth and consolidation.