



Department  
of Health &  
Social Care

*From Maria Caulfield MP  
Parliamentary Under Secretary of State  
Department of Health and Social Care*

*39 Victoria Street  
London  
SW1H 0EU*

09 November 2022

Our Ref: PFD – 1392892

Chris Morris  
Area Coroner for Greater Manchester (South)  
Coroner's Court  
1 Mount Tabor Street  
Stockport  
SK1 3AG

Dear Mr Morris,

Thank you for your correspondence of 4 February 2022, to the then Secretary of State for Health and Social Care, Sajid Javid, regarding the death of Joy Burgess. I am replying as Minister with responsibility for Mental Health, and thank you for the additional time allowed.

I would like to begin by offering my deepest condolences to the family and loved ones of Mrs Burgess. Your report raises important concerns regarding the quality and suitability of care for those suffering from mental health problems, and long waiting times for psychological therapies. It is, of course, vital that we take learnings, where they are identified, to improve the NHS care, and I am grateful to you for bringing these matters to my attention.

In preparing this response, my officials have made enquiries with NHS England and the Care Quality Commission (CQC). I am also informed that Pennine Care NHS Foundation Trust (PCFT) have produced an investigation report, in line with the NHS Serious Incident Framework, and have provided evidence at the inquest, and that the CQC has accepted the findings of the report.

We recognise the importance of providing an environment that feels safe and comfortable for people receiving treatment in mental health inpatient care. I understand that in their Concise Investigation Report, the Trust acknowledged that Ms Burgess's experience on the Taylor ward fell short of the expected standard. You may wish to note that the Government is committed to upgrading the physical environment for inpatient mental health care, and we are already taking steps to modernise inpatient environments and improve patient experience. We are investing more than £400 million over the 4 years up to 2024/25 to eradicate dormitory accommodation from mental health facilities to improve



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the safety, privacy and dignity of patients suffering with mental illness.

In addition, we are investing £150 million for significant improvements to the mental health estate, including investing in NHS mental health facilities linked to accident and emergency departments, enhancing patient safety in mental health units, and new mental health ambulances.

You noted that Ms Burgess was on a lengthy waiting-list to access psychological therapy at the time of her death and were concerned that other patients are continuing to wait significant lengths of time for care.

The pandemic has had an impact on the mental health and wellbeing of many people, which has caused increased demand for mental health services. In order to help address this, we provided an extra £500 million in 2021/22 to accelerate our expansion plans and address waiting times for mental health services, which will provide more people with the mental health support they need and invest in the NHS workforce. This funding included £110 million to expand adult mental health services - including talking and psychological therapies, implementing the community mental health framework, investment in crisis services and maintaining the delivery of the 24/7 urgent mental health helplines stood up earlier in the pandemic, as well as additional investment in suicide prevention programmes.

The NHS Long Term Plan committed that, by 2023/24 we will invest almost £1 billion extra in community mental health care for adults with severe mental illness. You may also wish to know that work is also ongoing to expand and improve mental health crisis care provision. This includes improving the operation of all age 24/7 crisis lines, crisis resolution home treatment teams, and mental health liaison services in A&E departments.

With regards to those people with more complex mental health needs, who are waiting for treatment, NHS England consulted in 2021 on the potential to introduce five new waiting time standards as part of its clinically-led review of NHS access standards. The proposals included:

- Patients referred from Accident and Emergency should be seen face to face within one hour, by mental health liaison or children and young people's equivalent service
- For a 'very urgent' referral to a community based mental health crisis service, a patient should be seen within four hours from referral, for all age groups
- For an 'urgent' referral to a community based mental health crisis service, a patient should be seen within 24 hours from referral, across all ages
- Children, young people and their families/carers presenting to community-based mental health services, should start to receive care within four weeks from referral; and



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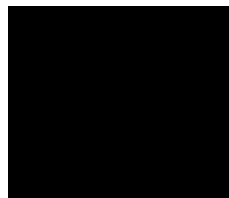
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- Adults and older adults presenting to community-based mental health services should start to receive help within four weeks from referral.

NHS England published the outcomes of its consultation in February 2022<sup>1</sup>, and we are now working with them on the next steps.

I hope this response reassures you that the government and the NHS take mental health seriously and that action is being taken to address the quality and timeliness of care.

Kind regards,



**MARIA CAULFIELD**

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<sup>1</sup> <https://www.england.nhs.uk/2021/07/nhs-england-proposes-new-mental-health-access-standards/>