



Department
of Health &
Social Care

*From Maria Caulfield
Parliamentary Under Secretary of State for
Mental Health and Women's Health Strategy*

*39 Victoria Street
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Kevin McLoughlin
Senior Coroner
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Coroner's Office and Court
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3 February 2023

Dear Mr McLoughlin,

Thank you for your letter of 13 July 2022, to the Secretary of State for Health and Social Care, about the death of Mr Daniel Clements. I am replying as Minister with responsibility for Mental Health.

Firstly, I would like to say how saddened I was to read of the circumstances of Mr Clements's death, and I offer my sincere condolences to his family and loved ones. The circumstances your report describes are very concerning and I am grateful to you for bringing these matters to my attention.

In preparing this response, Departmental officials have made enquiries with NHS England as well as the relevant regulator in this instance, the Care Quality Commission (CQC). I am further advised that South West Yorkshire Partnership NHS Foundation Trust have provided a detailed response to your report, which has been shared with me.

The Mental Health Act relates only to those who are suffering from mental disorder. It does not cover people with suicidal ideation who are deemed not to be acutely mentally unwell at the point of assessment.

An individual in crisis can be detained for assessment for up to 28 days under Section 2 of the Mental Health Act, if clinicians assess that the patient may have a mental health condition of a nature and degree that makes detention appropriate and they ought to be detained for their health and safety. During this time, practitioners can assess the patient's condition and address the underlying social circumstances that may be contributing to their mental health condition.

The forthcoming reforms to the Mental Health Act (set out in the draft Mental Health Bill published in June 2022) are intended to make care more person-centred, providing

more advocacy support and improving care planning. These reforms will ensure that the purpose of detention is to help patients recover and be discharged into the community.

We have closely considered your recommendation to extend section 136 of the Mental Health Act. Section 136 is primarily a conveyancing power to bring someone to a place of safety and is not designed to allow for care planning. We recognise the desire to ensure that vulnerable people in crisis get the support they need. However, rather than expanding the scope of legislation we believe that the concerns you identify would be better addressed through expanding community services. Amending the Mental Health Act to permit the detention of people without acute mental health conditions would likely result in many more detentions. This could also risk discouraging people seeking support if they were suicidal for fear of detention. The fear of detention is already a barrier to seeking help, especially in BAME communities.

Where individuals are not experiencing mental illness of a severity that makes detention under the Mental Health Act appropriate, their needs should be met in the community where partnership between Local Authorities, NHS organisations and Voluntary sector organisations is so critical. Local Authorities hold a range of duties under the Care Act 2014 to promote individual wellbeing, provide information and advice, safeguard adults from abuse and neglect as well as promote the integration of health and care services for those in need of care and support. The expansion of crisis services in the NHS Long Term Plan, backed up by [£150m of additional capital funding](#) for crisis centres, will support this aim alongside system partners. For example, one key intention of the investment in crisis cafes and crisis houses is that people should be able to receive crisis support even if they do not reach the threshold of the Mental Health Act. In addition, expanded crisis services will include signposting to other services and joined-up support with the voluntary and community sector, helping people address the factors contributing to their crisis.

Further, in September 2022, the National Institute for Health and Care Excellence (NICE) published new guidance on the assessment, management and preventing recurrence of self-harm.¹ To support services to adhere to this guidance, and to enable a definitive change in clinical practice and culture, the Department and NHS England will work with NICE and experts in suicide and self-harm prevention to further develop evidence-based best practice in safety planning and the management of needs and risks. This work will be co-produced by experts with experience in the field and in line with evidenced based practice.

In addition, the NHS Long Term Plan will see an additional £2.3bn funding invested in mental health services by 2023/24 and aims to ensure people can always access care in a timely way and in the most appropriate setting for their needs, regardless of where they present in the system.

This aim is underpinned by significant expansion and investment in adult community crisis and acute mental health services. NHS England are investing almost £1bn extra funding into the transformation of new models of community mental health services in all areas of the country, which includes a specific focus on integration between primary

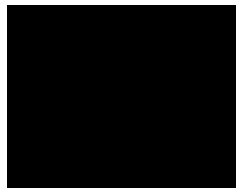
¹ <https://www.nice.org.uk/guidance/ng225>

and secondary care. Additionally, there is universal access, via NHS 111, to 24/7 community-based crisis care, including a range of alternative services to hospital admission, such as crisis houses and safe havens.

With regard to increased joined-up working between and within local organisations, the Health and Care Act 2022 is a key part of the Government's agenda to increase collaboration between the NHS and local authorities to improve health and wellbeing outcomes. The Act has brought about the formation of Integrated Care Systems, which bring together a wide range of partners to deliver more joined-up, personalised and preventative care for population and communities through more joined-up decision making across NHS Bodies, local authorities and other partners. Furthermore, in February, the Government published its integration white paper *Joining Up Care for People, Places and Populations*.² The paper recognised the importance of clarity of accountability for delivering integrated care at the local, or 'place' level, and it set out opportunities for how this could be achieved. The Government is continuing with plans to further develop the opportunities set out in the white paper, to ensure all places have clear governance arrangements and accountability structures that deliver strong, effective leadership.

I hope this response is helpful and I thank you for bringing these concerns to my attention.

Kind regards,



MARIA CAULFIELD MP

² <https://www.gov.uk/government/publications/health-and-social-care-integration-joining-up-care-for-people-places-and-populations>