



Department of Health & Social Care

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

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5 December 2022

Dear Ms Schofield,

Thank you for your letter of 7 August 2022, to the Secretary of State Steve Barclay, about the death of Robyn Skilton. I am replying as Minister with responsibility for Mental Health, and I thank you for the additional time allowed.

Firstly, I would like to say how deeply saddened I was to read of the circumstances of Ms Skilton's death. I can only begin to imagine how distressing her death will be for her parents and those who knew and loved her. I offer my heartfelt condolences.

It is vital that we take the learnings from what happened to Miss Skilton to prevent future deaths, and I am grateful to you for bringing these matters to my attention.

I appreciate your concerns about access to child and adolescent mental health services (CAMHS) in West Sussex, and I would like to assure you that we are working nationally to support local areas to expand mental health services so that more people can access the care and support they need.

The NHS Long Term Plan¹, which we published in 2019, commits to increasing funding for, and access to, mental health services, with at least an additional £2.3 billion a year being invested into these services by 2023/24. This increased investment will allow an additional 345,000 children and young people access to mental health services by then.

A significant portion of this funding is provided through baseline funding to local commissioners (formerly clinical commissioning groups and now through the integrated care boards that replaced them). This is supporting them to deliver on their responsibilities to commission healthcare services that meet the needs of their local populations and to expand mental health services in line with the aims of the Long Term Plan and the *NHS Mental Health Implementation Plan 2019/20 – 2023/24*², which provides the framework for local delivery.

¹ <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf>

² <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/07/nhs-mental-health-implementation-plan-2019-20-2023-24.pdf>

Growth of the mental health workforce, as well as retaining and re-skilling our current workforce, is the key strategic priority to ensure we can deliver our commitments to expand services and increase access. This is why, through the Plan we are committed to expanding the NHS workforce, with an aim of having an additional 27,000 mental health professionals by 2023/24, to deliver the expansion and transformation of mental health services, including those for children and young people.

We are making progress: June 2022 figures show an increase of almost 6,900 more (a 5.4% increase) full-time equivalent staff in the mental health workforce compared to June 2021, and over 14,500 more (12.2% increase) since June 2010.

Furthermore, we are aware that the pandemic has posed significant challenges to children and young people's sense of wellbeing, and data from NHS Digital³ shows the prevalence of mental health issues in children and young people has increased from one in nine in 2017 to one in six in 2021/22.

This is why, in 2021/22 we provided an additional £79million to expand children's mental health services, allowing around 22,500 more children and young people to access community health services, 2,000 more to access eating disorder services, as well as a faster increase in the coverage of mental health support teams in schools and colleges. There are currently 287 mental health support teams supporting schools and colleges, covering 20-25% of the country, with 13 planned or in operation across the Sussex integrated care system.

NHS England also announced a further £40 million in 2021/22 to address the COVID impact on children and young people's mental health. As part of this, £10 million capital funding was used to provide extra beds at units which provide care for young people with the most complex needs, as well as £1.5 million to ensure there are additional facilities for children under 13 years of age.

With regard to children and young people's mental health services in West Sussex, in preparing this response, Departmental officials made enquiries with NHS England (NHSE), as well as the relevant regulator in this instance, the Care Quality Commission.

Officials inform me there is multiagency work across the Sussex integrated care system (which comprises East Sussex, West Sussex, and Brighton and Hove), under the leadership of the Directors of Public Health, to rapidly identify clusters of young people engaging in suicide ideation and self-harm, and to provide an immediate response to identify those at risk. Local Authority Safeguarding and CAMHS teams are working in partnership to assess individual risk and vulnerability and are establishing care management plans to support the young person at home and at school.

There are plans in place across the integrated care system to progress the Single Point of Access (SPOA) service, which will provide a simplified single route to access specialist emotional wellbeing and mental health support.

The SPOAs are providing an access point for clinicians and professionals to refer children and young people to the full range of emotional wellbeing and mental health services, including CAMHS. Young people and families may also self-refer and contact the SPOA for advice and guidance. It is anticipated that signposting children and young people to the right service for their needs at the earliest point will result in a faster process.

³ <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2021-follow-up-to-the-2017-survey>

More broadly, NHS England consulted on the potential to introduce a range of new waiting time standards as part of its Clinically-led Review of NHS Access Standards⁴. These include:

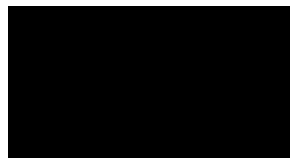
- For an 'urgent' referral to a community based mental health crisis service, a patient should be seen within 24 hours from referral, across all ages;
- For a 'very urgent' referral to a community based mental health crisis service, a patient should be seen within four hours from referral, for all age groups;
- 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; and
- Children, young people and their families/carers presenting to community-based mental health services, should start to receive care within four weeks from referral.

NHS England published in February the outcomes of its consultation on the potential to introduce these waiting time standards⁵ and we are now working with it on the next steps.

Finally, we launched a public call for evidence on what can be done across government in the longer term to support mental health, wellbeing and suicide prevention. We asked the public for their views on a wide range of questions, from prevention through to acute mental health care. This is a key part of our commitment to 'level up' and improve unequal outcomes and life chances across the country. The call for evidence closed on 7 July 2022. We are currently analysing the responses.

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

Kinds regards,



MARIA CAULFIELD MP

⁴ <https://www.england.nhs.uk/clinically-led-review-nhs-access-standards/>

⁵ <https://www.england.nhs.uk/wp-content/uploads/2022/02/mental-health-clinically-led-review-of-standards.pdf>