



# Department of Health & Social Care

Parliamentary Under Secretary of State  
for Women's Health and Mental Health

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London  
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Sean Horstead  
HM Area Coroner  
HM Coroner's Office  
County Hall  
Seax House  
Victoria Road South  
Chelmsford  
CM1 1QH

12 January 2026

Dear Mr Horstead

Thank you for your Regulation 28 report to prevent future deaths dated 13<sup>th</sup> October 2025 about the death of Jack Mathew Peatling. I am replying as the Minister with responsibility for mental health and patient safety and I am grateful for the additional time you have allowed for me to do so.

Firstly, I would like to say how saddened I was to read of the circumstances of Jack'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. I also understand that this tragic case is being considered as part of Lampard Inquiry – the independent statutory inquiry investigating the deaths of mental health inpatients in Essex between 2000 and 2023.

Your report raises concerns addressed to the Department regarding a lack of available in-patient beds for high-risk mental health patients who, as was acknowledged at the time, cannot be managed safely in the community. I note that NHS England have also provided a response and are aware of the issues in some systems around high bed occupancy and limited local bed availability which can be found here: [2025-0510 - Response from NHS England](#)

I understand your concerns.

We are determined to bring mental health waiting times down and intervene earlier, so people get the right mental health support at the right time in the right place.

I expect individual trusts and local health systems to effectively assess and manage local bed capacity through the 'flow' of patients being discharged or moving to another setting.

The NHS Operational Planning Guidance for 2025-26 contains fewer targets across the board to focus on the fundamentals of good care. It sets a requirement for

Integrated Care Boards to take action to reduce the average length of stay in adult acute mental health beds, in order to improve local bed availability and reduce the need for inappropriate out of area placement. This involves-making use of alternatives described below:

- **Reducing avoidable ambulance dispatches and conveyances, and reduce handover delays by** working towards delivering hospital handovers within 15 minutes, with joint working arrangements that ensure that no handover takes longer than 45 minutes and improving access to urgent care services at home or in the community including urgent community response and virtual ward (also known as hospital at home) services
- **Improve and standardise urgent care at the front door of the hospital by** increasing the proportion of patients seen, treated and discharged in 1 day or less using the principles of same day emergency care and optimising the urgent care offer to meet the needs of their local population, including the use of urgent treatment centres .
- **Reduce length of stay in hospital and ensure that patients are cared for in the most appropriate setting by** increasing the percentage of patients discharged by or on day 7 of their admission in line with existing guidance. Additionally, by working across the NHS and local authority partners to reduce average length of discharge delay in line with the Better Care Fund (BCF) policy framework. ICBs should review BCF commitments to ensure they represent the best use of resources, and plan sufficient intermediate care capacity to meet demand, including through surge periods across the year.

Over the period 2026/27 to 2028/29, integrated care boards have been asked to drive real productivity gains including reducing the average length of stay in adult acute mental health beds, through the recently published Medium Term Planning Framework.

We have committed £26 million in capital investment to open new mental health crisis centres, reducing pressure on busy emergency mental health and A&E services and ensuring people have the support they need when they need it.

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

Yours sincerely,

  
