



## DEBATE PACK

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# Access and waiting time standards for early intervention in psychosis

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## Summary

On Wednesday 7 September 2016 MPs will take part in a Westminster Hall debate on access and waiting time standards for early intervention in psychosis. The debate will be moved by Rt Hon Norman Lamb MP.

This debate pack includes briefing, recent press articles, Parliamentary material and links to further reading.

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The House of Commons Library prepares a briefing in hard copy and/or online for most non-legislative debates in the Chamber and Westminster Hall other than half-hour debates. Debate Packs are produced quickly after the announcement of parliamentary business. They are intended to provide a summary or overview of the issue being debated and identify relevant briefings and useful documents, including press and parliamentary material. More detailed briefing can be prepared for Members on request to the Library.

# 1. Background: mental health waiting time standards

In October 2014, the Government announced the first access and waiting time standards for mental health services, to bring waiting times for mental health in line with those for physical health.

*Achieving better access to mental health services by 2020*, jointly published by NHS England and the Department of Health, outlined that these standards should be introduced from April 2015, with full implementation a year later. These commitments were reaffirmed in the *Government's mandate to NHS England for 2016-17* and included as one of nine 'must dos' for the NHS in the *NHS Shared Planning Guidance for 2016/17-2020/21*.

One of the standards is that at least 50% of people going through their first episode of psychosis will get recommended treatment within 2 weeks of being referred: the aim is to increase this percentage in future years.<sup>1</sup>

The Department of Health and NHS England said that their ambition is for access and waiting time standards to be implemented for all mental health services over the next five years:

Access and waiting time standards for treatment in physical health will be complemented by access and waiting time standards for mental health. Starting in some key areas next year, for the next five years the vision is for all mental health services to guarantee people access to timely, evidence-based and effective treatment. In doing so the NHS will not only shorten the time that people go without treatment and support, but also improve outcomes.<sup>2</sup>

Further background on mental health policy and NHS waiting time standards in England can be found in the following Library briefings:

- [Mental health policy in England](#), 6 April 2016
- [NHS maximum waiting times and patient choice policies](#), 6 May 2016

## **The early intervention in psychosis access and waiting time standard**

The access and waiting time standard for early intervention in psychosis (EIP) services requires that, from 1 April 2016, more than 50% of people experiencing first episode psychosis will be treated with a NICE-approved care package within two weeks of referral. The standard is targeted at people aged 14-65.<sup>3</sup> The standard is described as 'two-

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<sup>1</sup> Gov.uk, [First ever NHS waiting time standards for mental health announced](#), 8 October 2014

<sup>2</sup> Department of Health and NHS England, [Achieving better access to mental health services by 2020](#), October 2014, page 11

<sup>3</sup> Most individuals experiencing a first episode of psychosis are in the 16-25 age range. Additionally, NHS England will be working with partner organisations to lead work

pronged' and both of the following conditions must be met for the standard to be deemed to have been achieved:

- a maximum wait of two weeks from referral to start of treatment; and
- treatment delivered in accordance with NICE guidelines and quality standards for psychosis and schizophrenia.

On 11 January 2016, following a speech on improving life chances by the Prime Minister, the Government announced investment to enhance mental health services across England, including an improved waiting time target for people experiencing psychosis:

About 75% of mental illness in adult life begins before the age of 18 and it is estimated that 17,000 people a year experience a first episode of psychosis. While care across the country is improving until now, there have been no national standards setting out a clear timeframe for care.

...the Prime Minister... set out a new waiting time target – to be in place in April 2016 – so that from next year at least half of those experiencing psychosis for the first time must be treated within 2 weeks, rising to at least 60% by 2020.<sup>4</sup>

In response to the recommendation of the *Mental Health Taskforce*<sup>5</sup>, published in February 2016, NHS England confirmed that by 2020/21 the standard will be extended to reach at least 60% of people experiencing first episode psychosis.

£40 million recurrent funding has been allocated to support delivery of the early intervention in psychosis standard. NHS England's report on implementing the Mental Health Taskforce recommendations, estimates the costs for an additional 10% of people to be treated within two weeks as £70 million per annum when fully implemented including costs of workforce development. The NHS England profile sets out increases towards this predicted funding level over four years, from 2017/18, in order to achieve "a deliverable phasing of improvement and additional capacity". This proposed funding increase does not include the recurrent £40 million annual funding provided from 2015/16.<sup>6</sup>

Further information on the standard, the evidence base for early intervention in psychosis, and expectations of commissioners and providers can be found in NHS England and NICE's guidance, [Implementing the Early Intervention in Psychosis Access and Waiting Time Standard](#). The guidance also provides the following information on clinical definitions and prevalence of psychosis:

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on the development of further access and waiting time standards for children's mental health as part of the transformation programme on children and young people's mental health. See [PQ 16650 \[on Mental health services: Children and young people\], 20 November 2015](#)

<sup>4</sup> Gov.uk, [Prime Minister pledges a revolution in mental health treatment](#), 11 January 2016

<sup>5</sup> [The Five Year Forward View for Mental Health: A report from the independent Mental Health Taskforce to the NHS in England](#) (February 2016). The Taskforce was launched by NHS England and was independently chaired by Paul Farmer, Chief Executive of Mind.

<sup>6</sup> NHS England, [Implementing the Five Year Forward View for Mental Health](#) (2016)

First episode psychosis is the term used to describe the first time a person experiences a combination of symptoms known as psychosis. During an episode of psychosis, 'a person's perception, thoughts, mood and behaviour are significantly altered'. (...)

Incidence rates refer to the number of new cases during a given period. The weighted average incidence of psychosis in England is 31.7 per 100,000. However, it is important to note that incidence levels can vary significantly from one area to another according to age, sex, ethnicity, population density and social deprivation.

First episode psychosis occurs most commonly between late teens and late twenties, with more than three quarters of men and two thirds of women experiencing their first episode before the age of 35. This means that areas serving younger populations (e.g. areas with higher education colleges and universities) may have higher rates of psychosis. A small proportion of people will also experience an onset of psychosis before the age of 16 years, with an additional peak in incidence in women in their mid-to-late 40s.

Higher rates have also been found across a number of ethnic minority groups, notably migrants and descendants of black Caribbean and black African origins. Geographically, the incidence rates of psychosis are also higher in more urban, more deprived and more densely populated settings.<sup>7</sup>

Scotland and Wales have early intervention programmes for serious mental illness, but no standard for waiting times for treatment.

### **Statistics on early intervention in psychosis waiting times**

Since April 2016 NHS England has published statistics on [Early Intervention in Psychosis Waiting Times](#), from December 2015 onwards. The most recent dataset shows that in June 2016, 1,177 patients in England started treatment for Early Intervention in Psychosis, 863 (73.3%) of which began treatment within two weeks of referral. In the same month, 1,047 patients were waiting to begin treatment, 558 (53.3%) of which had been waiting for over two weeks.

The tables below show equivalent figures for England back to December 2015 for patients starting treatment and for patients still waiting to begin treatment.

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<sup>7</sup> NHS England and NICE, [Implementing the Early Intervention in Psychosis Access and Waiting Time Standard](#). (April 2016)

**Waiting times for patients starting treatment for Early Intervention in Psychosis**

England, December 2015 to June 2016

	Total number of completed pathways	Number and percentage of patients starting treatment by time since referral							
		0-2 weeks		2-6 weeks		6-12 weeks		12+ weeks	
Dec-15	886	523	59.0%	232	26.2%	70	7.9%	61	6.9%
Jan-16	908	530	58.4%	251	27.6%	86	9.5%	41	4.5%
Feb-16	1,052	687	65.3%	261	24.8%	78	7.4%	26	2.5%
Mar-16	1,118	720	64.4%	281	25.1%	96	8.6%	21	1.9%
Apr-16	1,204	782	65.0%	288	23.9%	102	8.5%	32	2.7%
May-16	1,162	788	67.8%	278	23.9%	62	5.3%	34	2.9%
Jun-16	1,177	863	73.3%	236	20.1%	51	4.3%	27	2.3%

Source: NHS England, Early Intervention in Psychosis Waiting Times

**Waiting times for patients waiting for treatment for Early Intervention in Psychosis**

England, December 2015 to June 2016

	Total number of incomplete pathways	Number and percentage of patients waiting to start treatment by time since referral							
		0-2 weeks		2-6 weeks		6-12 weeks		12+ weeks	
Dec-15	1,188	291	24.5%	357	30.1%	262	22.1%	278	23.4%
Jan-16	1,333	474	35.6%	399	29.9%	203	15.2%	257	19.3%
Feb-16	1,344	470	35.0%	462	34.4%	242	18.0%	170	12.6%
Mar-16	1,325	391	29.5%	417	31.5%	319	24.1%	198	14.9%
Apr-16	1,222	452	37.0%	325	26.6%	213	17.4%	232	19.0%
May-16	1,157	433	37.4%	346	29.9%	159	13.7%	219	18.9%
Jun-16	1,047	489	46.7%	297	28.4%	162	15.5%	99	9.5%

Source: NHS England, Early Intervention in Psychosis Waiting Times

Monthly figures by clinical commissioning group (CCG) are also available, with the [figures for June 2016](#) the most recent. However, the very small numbers involved mean that figures for the percentage of patients waiting under/over two weeks to start treatment in each CCG should be treated with caution.

The notes to the datasets state that some providers who submitted data indicated that there may be data quality issues with their submissions.

Two main issues were raised:

1. Some providers were not able to include referrals made prior to 1st December 2015 due to the way that they had previously captured data.
2. Some providers were only able to include waiting times for referrals made to their dedicated EIP teams. These teams may only provide a services to a limited age range; often people aged 35 and under.<sup>8</sup>

The notes state that both of these issues mean the numbers of patients who started treatment and incomplete pathways are likely to be under reported. This may also result in the percentage achievement against

<sup>8</sup> [NHS England, STATISTICAL PRESS NOTICE Early Intervention in Psychosis Waiting Times, June 2016](#)

the standard being artificially inflated. These issues mean that individual months of data should be treated with a degree of caution at this stage.

On 10 August 2016 a [BBC News article](#) reported responses to Freedom of Information (Fol) requests made by the Liberal Democrats to CCGs in England. The BBC report that of those CCGs that responded (170 out of the 209), 23% said they had applied the target to for 14- to 35-year-olds only. And more than three-quarters of those had no firm plans to extend it to 35- to 65-year-olds this year. Furthermore, about 64% of CCGs that responded to the Fol request did not or could not say what they were spending on early intervention in psychosis. Another 29% of CCGs said they were spending below the £8,250 per patient that NHS England estimates early intervention in psychosis should cost the NHS.<sup>9</sup> Some individual CCGs have published their response to this Fol on their websites – for example, [Stockport CCG](#). However, this does not seem to be the case for the vast majority of CCGs.

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<sup>9</sup> [BBC News, Mental health target being ignored, 10 August 2016](#)

## 2. Implementing the Early Intervention in Psychosis Access and Waiting Time Standard: Guidance

**NHS England, the National Collaborating Centre for Mental Health and the National Institute for Health and Care Excellence**

April 2016

[...]

### **Key messages**

1. Psychosis is characterised by hallucinations, delusions and a disturbed relationship with reality, and can cause considerable distress and disability for the person and their family or carers. A diagnosis of schizophrenia, bipolar disorder, psychotic depression or other less common psychotic disorder will usually be made, although it can take months or even years for a final diagnosis.
2. Treatment can begin as soon as a provisional diagnosis of first episode psychosis is made – it does not have to wait for a final diagnosis. Treatment should be provided by an early intervention in psychosis (EIP) service. These services are evidence-based, cost-saving and preferred by service users and carers over generic services.
3. People who experience psychosis can and do recover. The time from onset of psychosis to the provision of evidence-based treatment has a significant influence on long-term outcomes. The sooner treatment is started the better the outcome and the lower the overall cost of care.
4. To improve access to EIP services, NHS England is introducing an access and waiting time standard. It is for all people experiencing first episode psychosis (including that associated with trauma or substance misuse). The standard is also relevant for people at high risk of psychosis (an 'at risk mental state').
5. The standard requires that, from 1 April 2016, more than 50% of people experiencing first episode psychosis commence a National Institute for Health and Care Excellence (NICE)- recommended package of care within two weeks of referral. Treatment will be deemed to have commenced when the person:
  - a. has had an initial assessment; AND
  - b. has been accepted on to the caseload of an EIP service capable of providing a full package of NICE-recommended care; AND
  - c. has been allocated to and engaged with by an EIP care coordinator.
6. All NHS-commissioned EIP services will be expected routinely to record data regarding EIP waiting times, NICE-recommended interventions and outcome measures via the Mental Health Services

Data Set. They will also be expected to take part in a national quality assessment and improvement programme.

7. EIP services should provide the full range of psychological, psychosocial, pharmacological and other interventions shown to be effective in NICE guidelines and quality standards, including support for families and carers. Effective and integrated approaches are needed to address the social and wider needs of people with psychosis to help them live full, hopeful and productive lives. EIP services also need the capacity to triage, assess and treat people with an at risk mental state, as well as to help those not triaged to access appropriate treatment and support.

8. Commissioning EIP services should be underpinned by estimated local incidence of psychosis, derived to incorporate a range of demographic features such as ethnicity, age, population density and deprivation to ensure services are designed to serve fully the needs of a particular locality.

9. Commissioners and providers should ensure that children and young people (aged under 18) also benefit fully from the standard and that there are robust local arrangements in place between children and young people's mental health services and EIP services so that specialist expertise in working with children and young people with psychosis is available.

10. Health Education England will shortly make available a workforce planning tool to support commissioners and providers to plan the EIP capacity and skill mix required locally to ensure sustainable delivery of high-quality, NICE-recommended care.

[...]

### 3. Department of Health press release

#### [First ever NHS waiting time standards for mental health announced](#)

8 October 2014

*This news article was published under the 2010 to 2015 Conservative and Liberal Democrat coalition government*

Nick Clegg has announced new waiting time standards, bringing treatment for mental health problems in line with physical health.

The Deputy Prime Minister, Nick Clegg, has today announced that treatment for mental health conditions will be brought into line with other NHS services with the introduction of the [first ever waiting time standards](#). Bringing treatment for mental health problems on a par with physical health will end years of discrimination. There will also be £120 million to improve mental health services.

For the first time, from April 2015, most patients needing talking therapies – for conditions like depression – will be guaranteed the treatment they need in as little as 6 weeks, with a maximum wait of 18 weeks.

Read [Mental health services: achieving better access by 2020](#).

For many patients experiencing their first episode of psychosis, the NHS will start to provide treatment within 2 weeks of referral – bringing it into line with consultations for cancer. Evidence shows that treating psychosis rapidly can dramatically improve patients' chances of recovery and potentially save £44 million each year in hospital admissions.

View an [infographic showing new waiting times and the impact of mental health issues](#).

The Deputy Prime Minister said:

At least 1 in 4 of us will experience a mental health problem in our lives. Whilst I have nothing but praise for the tremendous work of NHS staff, the system is still letting patients down.

It's wrong that relatives and friends needing a hip operation can expect treatment within a clear time frame but someone with a debilitating mental health condition has no clarity about when they will get help.

For years, NHS waiting standards have existed for patients with physical ailments and they have drastically cut long waits. Now we are finally ending the injustice of people with mental health conditions waiting far too long for treatment with the first ever waiting time standards for NHS mental health services.

The Deputy Prime Minister held a reception to mark World Mental Health Day on 10 October 2014. [View photos from the event](#).

The announcement is part of a radical 5-year plan to end years of imbalance between mental and physical healthcare services, backed by £40 million this year and £80 million freed up next year.

[Care and Support Minister, Norman Lamb](#), said:

I want to build a fairer society and that means mental health has got to be a priority for everyone. As well as being potentially devastating for people affected, mental illness has an enormous impact on our economy. That's why, through these plans, I am absolutely determined to make sure anyone with a mental health condition can expect the same standards of care as they would for a physical health problem.

I urge the whole health and care system to engage with these ambitious plans to drive up standards so that, by 2020, mental and physical health services will be given equal priority in all parts of the country.

Simon Stevens, NHS England's Chief Executive, said:

This is an important moment when we will bring parity of esteem for mental health services a step closer. Putting access and waiting standards in place across all mental health services, and delivering better integration of physical and mental health care by 2020, will bring us much closer towards that aim.

Currently, most people who are referred for treatment for a physical health problem can expect to start their care within 6 weeks, with an absolute maximum of 18 weeks. The plans announced today will mean that people referred for talking therapies will benefit from the same standards.

Similarly, people referred for an urgent cancer consultation can expect to be seen within 2 weeks. Today's announcement will ensure that many people needing urgent care for psychosis will start to be treated with the same urgency.

The national waiting time standards will tackle the regional variations where some people have very long waiting times for talking therapies as well as making sure that there is proper investment in making these services available within an acceptable time.

Other measures include:

- investment in psychiatry services in acute hospitals, so that more people than ever before who go to accident and emergency (A&E) departments in a mental health crisis, for example if they have self-harmed, will get the right help at the right time
- a £7 million investment by NHS England to create 50 new in-patient beds for children and young people and better case management so that children with specialist needs get the right care in the right place, as close as possible to their homes and families

## Background

The Deputy Prime Minister first signalled his ambition for maximum waiting times for some mental health services when he convened a

[national conference for mental health practitioners and charities on 20 January 2014.](#)

From 1 April 2015 (to be fully implemented by April 2016), the new waiting time standards will be as follows:

- 75% of people referred for talking therapies for treatment of common mental health problems like depression and anxiety will start their treatment within 6 weeks and 95% will start within 18 weeks
- at least 50% of people going through their first episode of psychosis will get help within 2 weeks of being referred: the aim is to increase this percentage in future years

Mental illness costs the country as much as £100 billion each year through lost working days, benefits and treating preventable illness, but these plans are expected to make huge savings:

- improved access to talking therapies will help tackle the 70 million working days lost annually due to mental health problems
- early treatment for people with psychosis could save the NHS £44 million a year in reduced hospital admissions through people reaching crisis point
- improved psychiatric liaison services in acute hospitals could save each hospital an average of £5 million a year by cutting down on admissions and length of stay

## 4. Press articles

**BBC News, 10 August 2016**

**[Mental health target being ignored](#)**

**HSJ, 18 July 2016**

**[Hundreds left waiting for vital mental health assessments](#)**

- Eight trusts in April failed to hit the new early intervention in psychosis standard of treating people within two weeks of being referred
- In England, two-thirds of patients began treatment within the new government target
- Out of 1,222 patients waiting to be assessed ahead of treatment, 770 had already been waiting more than two weeks
- Mental health leaders have called for more money to help achieve the standard

**Guardian, 21 April 2016**

**[Mental health goals may not be met, audit office warns](#)**

Waiting-time targets were scheduled to start in April, but NAO report says officials do not yet have a grip on how much the policy will cost

**Guardian, 19 April 2016**

**[Hospitals offer A&E for people with mental health crisis](#)**

A 24/7, single point of access service in London is proving a success and staff hope it will be the A&E equivalent of community psychiatric care

**Independent, 2 April 2016**

**[Britain's top psychiatrist Simon Wessely challenges Government to ring-fence mental health spending](#)**

**Guardian, 22 February 2016**

**[The scale of the UK's mental health challenge has been underestimated](#)**

**Guardian, 16 February 2016**

**[Forget about a mental health revolution without new cash](#)**

David Cameron's promised £1bn is old money so can't be ringfenced – and will be swallowed by existing NHS debts.

**Financial Times, 11 January 2016**

**[Cameron sets out mental healthcare plans](#)**

**Sky News, 11 January 2016**

**[PM Pledges £1bn To End 'Shame' Of Mental Illness](#)**

**Guardian, 3 November 2015**

**[10 steps to mental health equality](#)**

**Independent, 1 October 2015**

**[We must take mental health as seriously as physical - and here's how to start](#)**

## 5. Parliamentary questions and debates

### [Health Services](#)

**Asked by:** Brown, Mr Nicholas

To ask the Secretary of State for Health, how his Department measures and demonstrates parity of esteem between mental and physical health in the NHS.

**Answering member:** Alistair Burt

The Government accepted the Mental Health Taskforce recommendation to identify the gaps in provision between mental health and physical health and has increased funding for mental health to an estimated £11.7 billion last year and have introduced waiting time standards so people know they will be treated quickly.

This Government continues to hold NHS England to account through the NHS Mandate for the achievement of measurable progress towards the parity of esteem for mental health and clinical commissioning groups are required through the annual planning guidance to increase spending each year on mental health at least in line with the increase in their overall allocation.

In line with practice in physical health, from 1 April 2015, waiting times standards for mental health came into effect for:

- treatment within two weeks for more than 50% of people experiencing a first episode of psychosis; and
- treatment within six weeks for 75% of people referred to the Improving Access to Psychological Therapies (IAPT) programme, with 95% of people being treated within 18 weeks.

The National Health Service has already achieved waiting time standards for IAPT and we have made changes to the Mental Health Services Dataset to measure performance against the standard for Early Intervention in Psychosis.

28 Apr 2016 | Written questions | 34778

### [Mental Health Services](#)

**Asked by:** Berger, Luciana

To ask the Secretary of State for Health, pursuant to the Answer of 25 January 2016 to Question 23475, on what date in March 2016 he expects the first report on progress against the referral to treatment element of the Early Intervention Psychosis access standard to be published.

**Answering member:** Alistair Burt

The Health and Social Care Information Centre Monthly Statistics - Provisional January 2016, which includes experimental statistics relating to the Early Intervention for Psychosis access standard, is scheduled to be published on 31 March 2016.

16 Mar 2016 | Written questions | Answered | House of Commons | 30837

[NHS: Mental Health Services](#)

**Asked by:** Baroness Tyler of Enfield

To ask Her Majesty's Government what plans they have to publish data regularly on the availability and quality of NHS-funded mental health services across the country.

Oral questions - Lead

**Answering member:** The Parliamentary Under-Secretary of State, Department of Health (Lord Prior of Brampton) (Con)

My Lords, data on mental health have been a bit like a black hole. We are working with the Mental Health Data and Information Board to improve the data, as recommended by the Mental Health Taskforce. A new mental health dataset will be online by April this year. Starting with early intervention in psychosis, it will comprise data on waiting times, availability and outcomes. We will expand the dataset to other pathways once data become more robust.

14 Mar 2016 | Oral answers to questions | House of Lords | 769 c1575

[Mental Health Services](#)

**Asked by:** Berger, Luciana

To ask the Secretary of State for Health, with reference to the Prime Minister's speech of 11 January 2016, on life chances, how the waiting time target for patients with psychosis will be monitored; and when the first results of that monitoring will be published.

**Answering member:** George Freeman

The Early Intervention Psychosis access standard will be monitored via the new Mental Health Service Dataset which is managed and reported against by the Health and Social Care Information Centre.

As this is a new collection, reporting will be phased starting with basic counts in March 2016 and building in detail as quality is assured. In the meantime NHS England has implemented a bespoke collection to monitor progress against the referral to treatment element of the standard, the first report of which is likely to be available in March 2016.

25 Jan 2016 | Written questions | 23475

[Mental Health Services: Finance](#)

**Asked by:** Hayes, Helen

To ask the Secretary of State for Health, whether full funding for the implementation of the new access target for early intervention in psychosis is included in the Government's commitment to an additional £600 million of funding for mental health in 2016-17.

**Answering member:** Alistair Burt

No decision has yet been reached on how the additional £600 million of funding for mental health in 2016-17 will be allocated.

A key element of achieving parity across mental and physical health care is in people having timely access to evidence-based and effective treatment.

One focus of the first set of mental health standards for 2015/16 is that from 1 April 2016, 50% of people experiencing a first episode of psychosis are treated with a National Institute for Health and Care Excellence approved package of care within two weeks of referral. This is being supported by £40 million recurrent funding from NHS England to support delivery of the early intervention in psychosis (EIP) standard. Health Education England are focusing £5 million for workforce development towards meeting the EIP standard.

15 Jan 2016 | Written questions | 21223

[Mental Illness](#)

**Asked by:** Baroness Redfern

To ask Her Majesty's Government what action they are taking to raise awareness of mental health issues, to address the impact of stigma and discrimination on those affected, and to engage with local businesses to develop employment opportunities for those affected.

**Answering member:** Lord Prior of Brampton

It is important that local authorities employ individuals who possess the necessary skills to engage effectively with those with mental health problems. Local authorities should make training opportunities available to all staff.

Mental health social workers empower individuals with mental illness and their families, carers, and communities to lead fulfilling, independent lives. On 1 September this year applications for a new fast track route into mental health social work careers opened for an intensive on-the-job programme called Think Ahead. The programme aims to attract promising students and graduates into mental health careers.

Health Education England, working with NHS England, aims to ensure that there are sufficient therapists and other staff with the right skills to support the identification of mental health issues.

Community mental health services, which include community mental health teams, crisis and home resolution teams, assertive outreach teams and early intervention in psychosis teams, all have a key role in supporting people with mental health problems either to avoid the need for in-patient care or to provide them with on-going support once in-patient treatment is no longer necessary.

From April 2016, the first set of mental health waiting time standards will be introduced which requires that 50% of people experiencing a first episode of psychosis are treated with a National Institute for Health and Care Excellence approved package of care within two weeks of referral; 75% of adults referred to the national programme for psychological therapies will be treated within 6 weeks, and 95% within 18 weeks.

This is supported by an £80 million funding package for 2015-16 from NHS England's budgets, breaking down as:

- £40 million recurrent funding to support delivery of the early intervention in psychosis (EIP) standard;
- £10 million to support delivery of the new psychological therapies standards; and
- £30 million to support liaison psychiatry in acute hospitals.

The Time to Change initiative is an ambitious national programme being delivered by leading mental health charities Mind and Rethink Mental Illness to reduce stigma and discrimination towards people with mental health problems. The Department, the Big Lottery Fund and Comic Relief have all provided funding for the programme. The Department funded the campaign with over £16 million between 2011-12 and 2014-15 and is continuing to fund the programme with £2.5 million in 2015-16. Time to Change continues to work with people with experience of mental health problems to challenge attitudes and discrimination; run social marketing campaigns and work with local and regional partners on community-led activity. To date, more than 350 organisations across England have committed to tackling mental health stigma and discrimination in the workplace.

23 Nov 2015 | Written questions | HL3515

### [Mental Health Services: Children](#)

**Asked by:** Blenkinsop, Tom

To ask the Secretary of State for Health, what steps he plans to take to (a) reduce waiting times for children to receive an assessment for a mental health condition and (b) address the disparity between those waiting times across different NHS mental health trusts.

**Answering member:** Alistair Burt

Waiting times are not currently collected centrally, however the Government accepts there is variation in waiting times and is committed

to improving access and is introducing the first ever waiting time standards for mental health services.

These include an access and waiting time standard for Children and Young People with an Eating Disorder. This states that National Institute of Health and Care Excellence concordant treatment should commence within a maximum of four weeks from first contact with a designated healthcare professional for routine cases and within one week for urgent cases. Data collected in 2016 will help inform incremental percentage increases in compliance with the standard, with the aim of 95% of patients being treated within the standard's timescale by 2020.

We have also introduced an access and waiting times standard on Early Intervention in Psychosis announced in **Mental health services: achieving better access by 2020** which came into force in April 2015. Whilst focused on all ages, most individuals experiencing a first episode of psychosis are in the 16-25 age group.

The setting of a blanket access and waiting time standard for children and young people's mental health services is not feasible due to the wide range of conditions, services and care pathways this covers. However, NHS England will be working with partner organisations to lead work on the development of further access and waiting time standards for children's mental health as part of the transformation programme on children and young people's mental health.

At a local level, clinical commissioning groups (CCGs) have worked with local partners to produce Local Transformation Plans for children and young people's mental health and wellbeing that will set out how they will improve support for children and young people in line with the vision in Future in mind. In addition, CCGs have legal duty to consider the need to reduce inequalities in access to, and outcomes from healthcare services, and we would expect commissioners to have due regard to waiting times as part of this.

The new Mental Health Services Dataset will begin from January 2016, to provide data for both adults and children on outcomes, length of treatment, the source of referral, location of appointment and demographic information.

23 Nov 2015 | Written questions | 16909

### [Mental Illness](#)

**Asked by:** Khan, Sadiq

To ask the Secretary of State for Health, how many new cases of psychosis were diagnosed in (a) the UK, (b) London, (c) each London borough and (d) each health trust in London in each year between 2010 and 2015.

**Answering member:** Alistair Burt | **Party:** Conservative Party | **Department:** Department of Health

Data on new cases of psychosis is not collected at United Kingdom level.

Data for England is provided in the table below:

England Level Data	
Financial Year	The number of new cases of psychosis served by early intervention teams
2014-15	10,186
2013-14	10,475
2012-13	10,375
2011-12	10,099
2010-11	10,312

Data for new cases of psychosis in London is provided in the table below:

Financial Year	The number of new cases of psychosis served by early intervention teams
2014-15	1,993
2013-14	2,177
2012-13	2,198
2011-12	1,952
2010-11	2,051

Data on a London borough level is not available centrally.

Data for new cases of psychosis diagnosed in each London Trust are provided in the attached table.

[New diagnosed cases of psychosis- London Trusts](#) (Word Document, 16 KB)

03 Nov 2015 | Written questions | 14122

### Debate

[Mental Health: Ensuring Equal Access to Mental and Physical Healthcare](#)

26 May 2016 | House of Lords | 773 cc552-572

[Mental Health](#)

09 Dec 2015 | House of Commons | 603 cc997-1052

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