



DEBATE PACK

Number CDP-2018-0060, 13 March 2018

Access and waiting time standards for early intervention in psychosis

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Summary

This House of Commons Debate Pack briefing has been prepared in anticipation of the debate entitled “Access and waiting time standards for early intervention in psychosis.” This debate is sponsored by Norman Lamb MP and will take place in Westminster Hall on Thursday 15th March 2018.

This Debate Pack provides background information, parliamentary material, press articles, and further reading suggestions which Members may find useful in preparation for this debate.

Since April 2016, the Government and NHS England have been committed to the standard that 50% of people, aged 14-65, experiencing a first episode of psychosis should have access to a care package, which conforms to NICE clinical guidelines and quality standards, within two weeks of referral, with a target that this should rise to at least 60% by 2020/21.

In January 2018, Norman Lamb MP published a report, [Discrimination at the Heart of the NHS](#), which argued that, while the waiting time aspect of the standard was being met, there were concerns about whether the Government had focused sufficiently on whether the provision of a NICE-approved package of treatment was being adhered to.

This Debate Pack covers the policy background to the introduction of this standard, including the Government’s commitment to “parity of esteem” between mental and physical health, and provides statistics on early intervention in psychosis waiting times.

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.

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1. Background

1.1 Early intervention in psychosis service standards

Since April 2016, the Government and NHS England have been committed to the standard that 50% of people, aged 14-65, experiencing a first episode of psychosis should have access to a care package, which conforms to NICE clinical guidelines and quality standards, within two weeks of referral, with a target that this should rise to at least 60% by 2020/21.

NICE has published clinical guidelines and quality standards for care and treatment delivered by early intervention in psychosis (EIP) services:

- Psychosis and schizophrenia in children and young people: recognition and management ([CG155](#));
- Bipolar disorder, psychosis and schizophrenia in children and young people ([QS102](#));
- Psychosis and schizophrenia in adults: prevention and management ([CG178](#)); and
- Psychosis and schizophrenia in adults ([QS80](#)), published in February 2015.

The access requirement has been described as a “two-pronged” standard, as it includes conditions of a maximum waiting time, as well as a minimum level of treatment. With regard to the latter, in particular, NICE and NHS England guidance provides a summary of the key components of high-quality EIP services required by this standard:

- swift assessment through a readily accessed point of contact by a practitioner competent in recognising first episode psychosis
- staff who build up trust and confidence
- provision of good information to help them to understand psychosis and treatment options
- a care coordinator who will support them throughout their time in the service, including helping them with self-management skills, social care issues such as housing or debt management, and relapse prevention work
- a choice of psychological and pharmacological interventions
- support, information and advice for families and carers, including carers’ assessments where required
- support with employment, training and / or education
- regular physical health checks, monitoring and appropriate treatment, with support and / or education

- regular monitoring of risk
- routine monitoring of other coexisting conditions, including depression, anxiety and substance misuse, particularly in the early phases of treatment
- a crisis plan and prompt service response to help them to manage when in crisis.

[...]

The core aims of EIP services are to:

- reduce the duration of untreated psychosis, including support for people with an at risk mental state, and for some, prevent transition to psychosis
- produce effective outcomes in terms of recovery and relapse rates.¹

The policy background to the Government's commitment to this "two-pronged" standard is explained further below.

1.2 Mental health access standards – policy background

The NHS has set out that it wants to achieve "parity of esteem" between mental and physical health, in terms of access to services, quality of care and allocation of resources. While the achievement of parity of esteem has been a long term-policy goal, since 2010 this aim has increasingly featured in legislation and in Government and NHS policy statements.

In October 2014, NHS England and the Department of Health jointly published [Achieving Better Access to Mental Health Services by 2020](#). This set out a vision to ensure that mental and physical health services were given equal priority in terms of access times and service quality.

As part of this, the Coalition Government announced the first waiting time standards for mental health services, to bring waiting times for mental health in line with those for physical health

This introduced the following waiting standards from 1 April 2015 (to be implemented fully by April 2016):

- 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.²

¹ NICE, NHS England, and the National Collaborating Centre for Mental Health, [Implementing the Early Intervention in Psychosis Access and Waiting Time Standard: Guidance](#), April 2016, p16. A table outlining the quality standards is on p17.

² [First ever NHS waiting time standards for mental health announced](#), Gov.uk, 8 October 2014

The Government stated an ambition for access and waiting time standards to be introduced for all mental health services by 2020:

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.³

In response to a 2015 PQ, the then Care Minister Alistair Burt, noted that first episodes of psychosis were more prevalent in children and young people:

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.⁴

The above response refers to 'all ages'. The 2016 guidance on implementing the standard confirmed that the standard was targeted at ages 14-65, but clinical judgement should be used as to whether it would also be appropriate for people outside of this age group.

The access and waiting time standards were 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.⁵

Five Year Forward View for Mental Health

[*The Five Year Forward View for Mental Health*](#) was published in February 2016. This was produced by the Mental Health Taskforce which was commissioned by NHS England and chaired by Paul Farmer, Chief Executive of Mind. It made a series of recommendations for improving outcomes in mental health by 2020/21.

With regard to EIP services, specifically, it repeated the abovementioned waiting time standard, for those experiencing a first episode and noted

³ Department of Health and NHS England, [Achieving better access to mental health services by 2020](#), October 2014, page 11

⁴ [PQ 16650 \[on Mental health services: Children and young people\], 20 November 2015](#)

⁵ [PQ HL3514 \[on Mental health services\], 23 November 2015](#)

a second part of the standard which is the level of care which should be accessible:

The NHS should ensure that from April 2016 50 per cent of people experiencing a first episode of psychosis have access to a NICE– approved care package within two weeks of referral, rising to at least 60 per cent by 2020/21.⁶

In July 2016, NHS England published its implementation plan for these recommendations, entitled [Implementing the Five Year Forward View For Mental Health](#). As part of this, it outlined its ambition that, by 2020/21, adult community mental health services “will provide timely access to evidence-based, person-centred care, which is focused on recovery and integrated with primary and social care and other sectors”. This would, it claimed, deliver four broad objectives, one of which was the abovementioned access and waiting time standard for EIP.

It committed, further, to objectives relating to the level at which EIP provision so that they are “in line” with NICE recommendations, starting with “all services complete baseline self-assessment” in 2016/17 to “60% of services graded at least level 3 by year end” in 2020/21.⁷

It noted that “NICE-concordance will be measured during 2016/17 via a self-assessment tool” published by the College Centre for Quality Improvement (CCQI) at the Royal College of Psychiatrists (RCPsych) and which was “to be validated during the course of the year and re-assessed subsequently”.⁸ This tool can be accessed on the RCPsych [website](#), and the most recent self-assessment by EIP teams in England was completed between 30 October 2017 and 20 January 2018.

In July 2016, the CCQI produced a report on an audit it conducted on EIP which had been commissioned by the Healthcare Quality Improvement Partnership (HQIP) on behalf of NHS England. This was conducted with the intention of providing a “baseline” position regarding services’ ability to provide timely access to NICE recommended interventions across England. With regard to the waiting time standard, it found that 33% of patients with first episode or suspected psychosis were allocated and engaged within 2 weeks, and the provider performance in this ranged from 4% to 82%. To improve, it recommended that clinical teams “should use local networks and the new [EIP Network](#) to share good practice and implement changes needed to increase the proportion of people who are engaged with services within a two week period.”⁹

⁶ Mental Health Taskforce, [The Five Year Forward View for Mental Health](#), February 2016, p34

⁷ NHS England, [Implementing the Five Year Forward View for Mental Health](#), July 2016, pp20-1

⁸ *Ibid.*, p48, nXI

⁹ CCQI, [Report of the Early Intervention in Psychosis audit](#), July 2016, pp6-8

Following this, in August 2016, the RCPsych’s CCQI published [guidance](#) to support the implementation of the new access and waiting times standards.

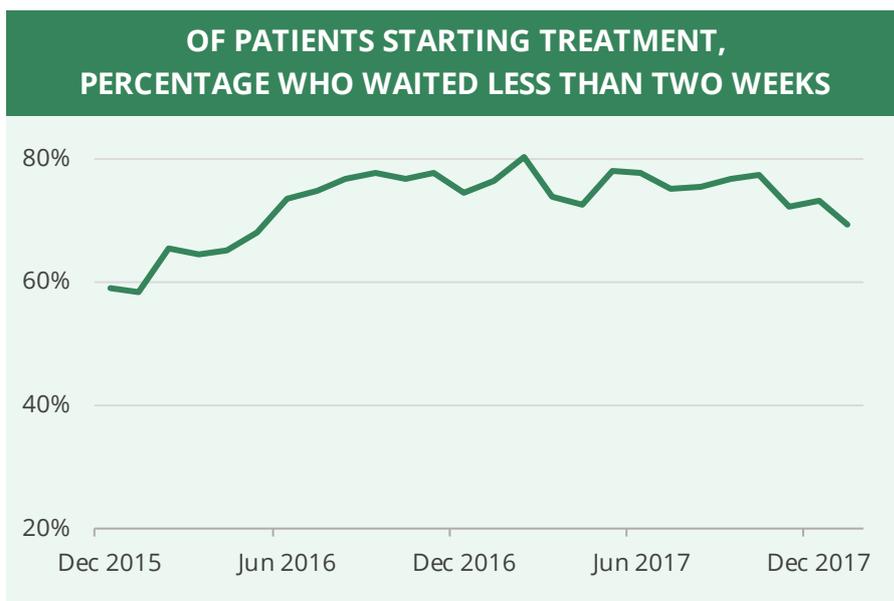
This was in addition to guidance published by NICE and NHS England in April 2016 entitled [Implementing the Early Intervention in Psychosis Access and Waiting Time Standard](#) (mentioned above). This outlines the patient pathway necessitated by both parts of the standard, as well as how performance against this standard should be measured and reported.

In January 2017, the Government accepted the *Five Year Forward View for Mental Health* report “in full”. It claimed that the standard waiting time for early intervention in psychoses was already being exceeded, and that in October 2016 76.6% of people had begun treatment within 2 weeks. It claimed that “the majority of CCGs are meeting the waiting time elements of the standards for IAPT and Early Intervention in Psychosis, but we will go further.”¹⁰

1.3 Early Intervention in Psychosis Waiting Times Statistics

As noted above, since April 2016 there has been a target that 50% of those experiencing a first episode of psychosis should receive NICE-approved treatment within two weeks.

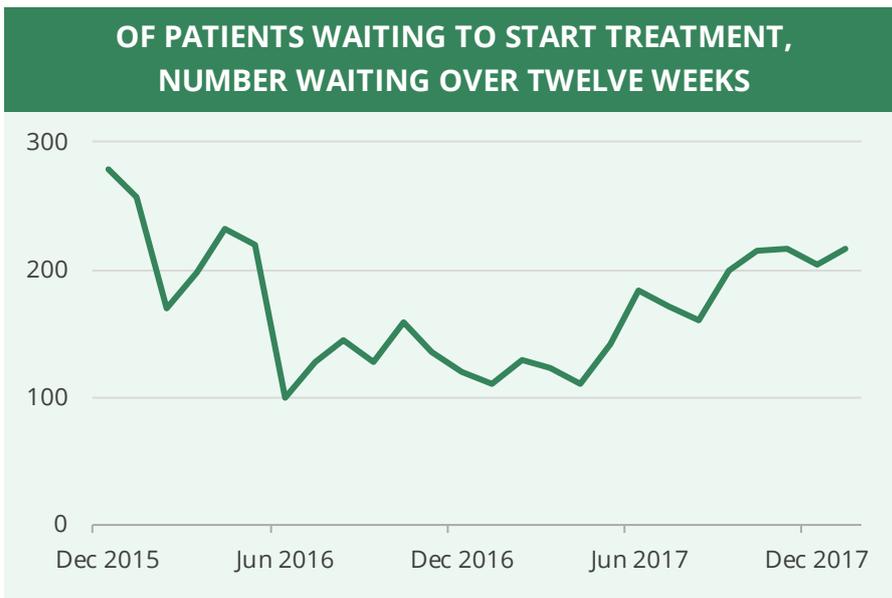
The chart below shows performance on this measure since December 2015. The 50% target has been met each month. Performance rose during 2016 and early 2017 – in February 2017 performance reached 80%. Since mid-2017 performance has fallen, and in January 2018, 69% of those starting treatment had waited less than two weeks.



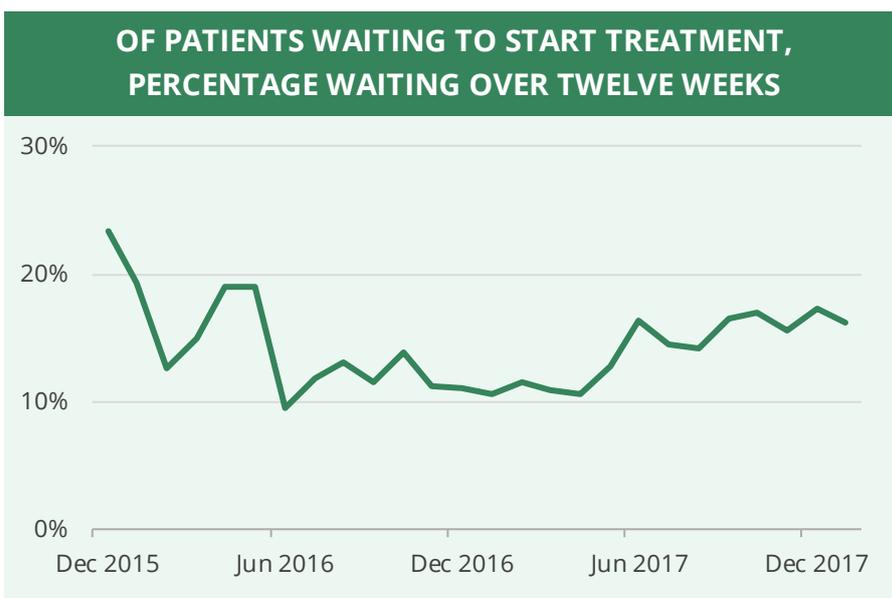
¹⁰ HM Government, [The Government’s response to the Five Year Forward View for Mental Health](#), January 2017, pp6 & 22

The above measure looks at those starting treatment, so does not take account of those who are still waiting for treatment. The number of people waiting for treatment rose in late 2017, and reached a high of 1,389 in November 2017 – 14% higher than it had been a year earlier. As of January 2018, 1,344 people were waiting for treatment – 28% higher than in January 2017.

A substantial minority of patients wait longer than twelve weeks for treatment. In January 2018 there were 217 patients still waiting to start treatment who had been waiting for over twelve weeks – up from 111 in January 2017.



As the chart below shows, the percentage on the waiting list for twelve weeks has also risen over the past year, from 11% to 16%.



As of January 2018, more than half of patients still waiting for treatment have been waiting for more than two weeks.

Activity levels vary substantially across the country. In January 2018, for instance, 25 people started EIP treatment in Sheffield, 22 in Tower Hamlets, and 20 in Liverpool. Meanwhile there were 11 areas in which nobody started treatment, including Leeds North, Mid Essex, Surrey Heath, Swale, and West Norfolk, and a further 29 areas in which only one person started EIP treatment. Overall, 20 CCGs accounted for around 30% of treatments in January 2018.

Activity Targets and Waiting List Targets

The two-week EIP waiting time standard is a target measuring the waits of those treated in a given month, and not those still on the waiting list. Only those entering treatment in a given month count toward the calculation of whether or not 50% were treated within two weeks, and the waits of those who are still on the waiting list at any given time don't count toward the target. This means that the percentage waiting over twelve weeks, as discussed above, won't lead to a breach of the target.

By contrast, some waiting time targets in other areas of NHS treatments take account of those still waiting for treatment. For instance, the flagship waiting time target for hospital treatment, the 18-week target, looks at whether those who are still waiting for treatment have been waiting for more or less than 18 weeks. This kind of measurement means that allowing too long-waiters to accrue on the waiting list will lead to a breach of the target.

Until 2015 the 18-week treatment target was also associated with activity targets like the 2-week EIP target described above. However, these were criticised for having counterproductive incentives – specifically, for disincentivising hospitals from treating long waiters because treating a large number of long-waiters was treated in any given period could lead to the activity target being breached.¹¹ NHS England accepted the recommendation to drop these targets for hospital treatments, and 18-week treatment waits are now exclusively measured through a waiting list target.

1.4 'Discrimination at the Heart of the NHS' report (2018)

In January 2018, Norman Lamb MP published a report, [Discrimination at the Heart of the NHS](#), based on Freedom of Information (FOI) responses received from 45 mental health trusts¹² about adherence to the EIP standard.

The report argued that, while the waiting time aspect of the standard was being met (see section 1.3), there were concerns about whether the

¹¹ See e.g. [Sir Bruce Keogh's report to Simon Stevens](#) on waiting time standards.

¹² According to the most recent [NHS Digital statistics](#), as of Sep 2017 there were 52 trusts in the mental health cluster - 48 'mental health and learning disability' trusts and 4 'care trusts'.

Government had focused sufficiently on whether the second ‘prong’ was being adhered to, related to the provision of a NICE-approved package of treatment. Information on NHS England’s targets to improve NICE-concordance can be found on page 5 of this Debate Pack.

Mr Lamb asked trusts whether their EIP teams were able to deliver the full NICE-concordant packages of care to all referred patients. Of the 41 trusts that answered this question:

- 12 trusts stated that they were able to
- 24 trusts stated that they were not able to
- 5 trusts provided “ambiguous responses”

The trusts that were not able to provide a NICE-concordant package of care reportedly attributed this to “a lack of resources, including staff shortages and insufficient funding.”

The report argued that the figure of 12 trusts able to provide a NICE package of care was in fact too high, as two of them also stated that they did not accept patients over 35, while the access standard guidance sets out the target age range as 14-65.

Of the 43 trusts which responded to the question about age caps, 11 fully or partially excluded patients over 35, with 32 trusts offering the full 14-65 age range. Some trusts offered different age ranges within the geographic areas they cover:

In the Norfolk and Suffolk NHS Foundation Trust, EIP is available to people experiencing a first episode of psychosis between the ages of 14-65 in the Norfolk and Waveney teams, but is restricted to under 35s in Suffolk. Even in Great Yarmouth and Waveney, where over 35s are accepted, the trust warned that the service “may have to restrict the number of new patients that [it] can take on” due to a lack of funding.¹³

The report also raised concerns about provision of training and employment support, variation in treatment provided, and levels of investment. Of the 33 trusts that provided information about funding, seven stated that their EIP budget for 2017/18 was lower than for 2016/17, with 26 seeing a funding increase.

Mr Lamb previously led a Westminster Hall debate on this topic on 7 September 2016 during which he outlined very similar concerns about the implementation of this standard based on his findings from another FOI survey of CCGs and mental health trusts.¹⁴

¹³ Norman Lamb MP, [Discrimination at the Heart of the NHS](#), January 2018, p5

¹⁴ [HC Deb 7 September 2016 cc141-164WH](#)

2. Parliamentary material

2.1 Written Parliamentary Questions

- [Mental Health Services](#)

Asked by: Ashworth, Jonathan | **Party:** Labour Party · Cooperative Party

To ask the Secretary of State for Health and Social Care, what the longest period of time was that a patient has had to wait for access to mental health services in the last 10 years.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party |

Department: Department of Health and Social Care

The information requested has not been collected for the past 10 years. Waiting times only began being collected in April 2015 for Improving Access to Psychological Therapies, and January 2016 for Early Intervention in Psychosis and children and young people with eating disorders. In addition, quality assurance is not as robust at the level of individual records as at a system level – therefore NHS Digital advises that statistical outliers are likely to be due to data quality or data collection errors rather than an accurate record of how long individuals are waiting for treatment.

07 Mar 2018 | Written questions | Answered | House of Commons | 130205

Date tabled: 27 Feb 2018 | **Date for answer:** 01 Mar 2018 | **Date answered:** 07 Mar 2018

- [Health Services: Standards](#)

Asked by: Afriyie, Adam | **Party:** Conservative Party

To ask the Secretary of State for Health and Social Care, what steps he has taken to help ensure parity of treatment for patients diagnosed with (a) mental health and (b) physical health conditions.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party |

Department: Department of Health and Social Care

The Government set parity of esteem in physical and mental health in law in the Health and Social Care Act 2012. The Government further reinforced this commitment by welcoming the independent Mental Health Taskforce's Five Year Forward View for Mental Health report in February 2016. The report set out a strategy for change in four key areas to drive forward improvements in mental health: promoting good mental health and helping people lead the lives they want to live, integrating care, creating a seven-day National Health Service for mental health and hard wiring mental health across health and social care.

The Government accepted all the report's recommendations in January 2017 and published a detailed action plan for taking forward the

recommendations, including how we will monitor progress and report transparently. NHS England's Implementation plan for the Five Year Forward View, published in July 2016, also set out a robust plan for delivering the commitments set out in the Five Year Forward View for Mental Health.

The Government has also set up the first waiting times standards for mental health, including for those experiencing a first episode of psychosis. Latest figures show that over 75% of people experiencing their first episode of psychosis commence treatment within two weeks, exceeding the 50% Early Intervention in Psychosis target set for 2016/17.

NHS England's Mental Health Investment Standard also requires the local NHS to increase mental health investment by at least the same proportion as overall allocations. This is planned to be met across England as a whole in 2017/18 and 2018/19. For 2018/19 all clinical commissioning groups will be required to meet the Mental Health Investment Standard and this will be subject to confirmation by their auditors.

07 Mar 2018 | Written questions | Answered | House of Commons | 129995

Date tabled: 27 Feb 2018 | **Date for answer:** 01 Mar 2018 | **Date answered:** 07 Mar 2018

- [Mental Health Services: Standards](#)

Asked by: Lord Ouseley | **Party:** Crossbench

To ask Her Majesty's Government what assessment they have made of (1) failings in the mental health system, (2) the identified causes of such failings, and (3) remedial actions proposed by the Care Quality Commission, especially to reduce the number of detentions made under the Mental Health Act 2007.

Answering member: Lord O'Shaughnessy | **Party:** Conservative Party | **Department:** Department of Health and Social Care

The Care Quality Commission (CQC) report *The Rise in the use of the MHA to detain people in England*, published on 22 January 2018, identified a number of issues which may have contributed to the rise in detentions under the Mental Health Act 1983.

These issues include changes in mental health service provision and bed management, and the fact that patients may be admitted more frequently than before, either as part of a plan of care or because of premature discharge. The report also acknowledged that demographic and social changes have resulted in an increase in the size of population that is at risk of detention.

A copy of the CQC's report is attached.

The Government is aware that rates of detention under the Mental Health Act 1983 have been rising and welcomes the CQC's report. The

report acknowledges that the Government is improving services and that these may help to reverse the increases in detentions under the Act, pointing to NHS England's national access standard for Early Intervention in Psychosis services and the £400 million dedicated as part of the Five Year Forward View for Mental health to enhance crisis resolution home treatment teams.

The rise in detentions under the Act is one of the reasons the Government has commissioned an Independent Review of the Mental Health Act. The Review, chaired by Professor Sir Simon Wessely, has been tasked with reviewing issues around the legislation itself and the practice surrounding it, and it will make its recommendations to Government in autumn 2018.

The CQC is one of a number of organisations working closely with the Independent Review and its report was produced with the expectation that it be considered by the Review.

08 Feb 2018 | Written questions | Answered | House of Lords | HL5241

Date tabled: 30 Jan 2018 | **Date for answer:** 13 Feb 2018 | **Date answered:** 08 Feb 2018

- [Mental Health Services: Children and Young People](#)

Asked by: Moore, Damien | **Party:** Conservative Party

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to (a) improve access to and (b) reduce waiting times for, mental health facilities for children and adolescents.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party |

Department: Department of Health and Social Care

As set out in Future in Mind, the Government is making available £1.4 billion to 2020/21 to improve access to mental health services for children and young people and to treat 70,000 extra children a year by 2020. The National Health Service is meeting the current waiting times standards relevant to children and young people. Latest information published on 31 January 2018 as part of NHS England's Five Year Forward View Dashboard reports the following:

For early intervention in psychosis (all ages): 50% of people experiencing first episode psychosis should commence a National Institute for Health and Care Excellence (NICE)-recommended package of care within two weeks of referral. In Q1-2 2017-18 - 72.3% of patients started treatment within two weeks (Q1-Q2 2017/18).

For eating disorders (for those up to 19 years): by 2020/21, 95% of children and young people experiencing an eating disorder urgent case should commence a NICE-recommended package of care within one week of referral. In Q1-2 2017/18 - 72.1% of urgent cases of children with eating disorders received treatment within one week and 80.6% of routine cases of children with eating disorders received treatment within four weeks.

The joint health and education Children and Young People's Mental Health Green Paper published in December 2017, includes proposals for the trialling of a four week waiting time standard for NHS specialist children and young people's mental health services. The Government will make over £300 million available, following public consultation, to set up these waiting times pilots, Mental Health Support Teams and the provision of mental health first aid in primary schools.

07 Feb 2018 | Written questions | Answered | House of Commons | 125663

Date tabled: 30 Jan 2018 | **Date for answer:** 01 Feb 2018 | **Date answered:** 07 Feb 2018

- [Mental Health Services](#)

Asked by: Berger, Luciana | **Party:** Labour Party · Cooperative Party

To ask the Secretary of State for Health and Social Care, what progress is being made on delivering the recommendation of the Mental Health Taskforce Five Year Forward View for Mental Health, published in January 2016, for his Department to carry out a review of existing regulations of the Health and Social Care Act 2012 to identify disparities and gaps between provisions relating to physical and mental health services.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party | **Department:** Department of Health and Social Care

The Health and Social Care Act 2012 already placed the principle of parity of esteem on a statutory footing.

Since the publication of the Government's response to the Five Year Forward View we have continued to address gaps in provision for people experiencing mental health problems:

- The Policing and Crime Act reduces the time that mentally ill people can spend in detention after a Section 136 from 72 hours to 24 hours, and bans the use of police cells as a place of safety for person under 18 years of age to ensure people are directed to mental health services quicker;
- We have made significant progress with access and waiting time standards for mental health services for all ages in the following areas:
 - 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;
 - Treatment within two weeks for more than 50% of people experiencing a first episode of psychosis; and
 - From April 2017, progress towards achieving the new access and waiting times for children and young people with eating disorders, so that by 2020 95% of children and young people are seen within one week if urgent and four weeks if routine, will be monitored.

- We published a Green Paper on Children and Young People's Mental Health in December 2017 which sets out proposals to expand and improve early intervention for children and young people.
- We announced an independent review of the Mental Health Act 1983 which is currently underway and will put parity of esteem at the heart of treatment.

19 Jan 2018 | Written questions | Answered | House of Commons | 123157

Date tabled: 16 Jan 2018 | **Date for answer:** 19 Jan 2018 | **Date answered:** 19 Jan 2018

- [Mental Health Services](#)

Asked by: Lavery, Ian | **Party:** Labour Party

To ask the Secretary of State for Health, what the average waiting time has been for a patient to receive mental health support after being referred by their GP in the most recent period for which figures are available; what targets are in place for such treatment post-referral; and whether such targets are being achieved.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party | **Department:** Department of Health and Social Care

NHS Digital does not currently hold combined average waiting time data for all services that provide mental health support. This is because there are a wide range of services that offer mental health support and there are varying degrees of complexities about measuring waiting times, particularly where patients have a range of comorbidities.

There are a number of targets for waiting times that the Government has signed up to, these include targets for the Improving Access to Psychological Therapies programme, waiting times targets for eating disorders services and waiting times targets for Early Intervention in Psychosis services. Updates against these are published on the Five Year Forward View for Mental Health Dashboard at:

<https://www.england.nhs.uk/publication/mental-health-five-year-forward-view-dashboard/>

11 Jan 2018 | Written questions | Answered | House of Commons | 120959

Date tabled: 21 Dec 2017 | **Date for answer:** 08 Jan 2018 | **Date answered:** 11 Jan 2018

- [Mental Health Services](#)

Asked by: Lamb, Norman | **Party:** Liberal Democrats

To ask the Secretary of State for Health, with reference to the Five Year Forward View for Mental Health, what progress has been made on the development and publication of a comprehensive set of mental health care pathways; and what steps he is taking to ensure that such

pathways include clear access and waiting time standards, quality standards, workforce requirements, and guidance for commissioners.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party | **Department:** Department of Health

Significant progress has been made in relation to the development of a comprehensive set of mental health care pathways, including the publication to date of pathways for early intervention in psychosis, community services for eating disorders in children and young people and urgent and emergency mental health liaison.

The pathways are intended to provide clear guidance to both commissioners and providers in relation to the commissioning and implementation of services to improve access and outcomes for people with mental health problems, and contain a set of quality benchmarks against which local systems can understand their progress in implementing them. The introduction of new access and waiting time standards would only be made in areas where it was clear that the funding and workforce were in place to support this.

An updated timetable for the publication and delivery of the mental health pathways was provided within 'Implementing the Five Year Forward View for Mental Health'.

The pathways for crisis care, perinatal mental health, children and young people's mental health, and acute mental health care have been developed in draft and will be published in due course. Whilst much of the content has been finalised, it is still being reviewed to ensure that it is in line with the wider Five Year Forward View strategy and that it provides the most helpful guidance to both commissioners and providers within the current context.

20 Nov 2017 | Written questions | Answered | House of Commons | 113064

Date tabled: 14 Nov 2017 | **Date for answer:** 20 Nov 2017 | **Date answered:** 20 Nov 2017

- [Mental Health Services](#)

Asked by: McCarthy, Kerry | **Party:** Labour Party

To ask the Secretary of State for Health, what steps his Department is taking to implement the recommendation in the Independent Mental Health Taskforce's Five Year Forward View for Mental Health on the need for more thorough capturing of data.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party | **Department:** Department of Health

Significant progress has been made on data for mental health services, including the publication of the Five Year Forward View for Mental Health (FYFV MH) Dashboard and improvements to the Mental Health Services Dataset (MHSDS)

The Department is working with NHS England, NHS Digital and Public Health England to develop a five year plan that will set out next steps for substantially improving data across mental health services.

NHS England has been working with NHS Digital to ensure changes are made to the MHSDS and the Improving Access to Psychological Therapies dataset to capture information on key FYFV MH priorities.

Where existing national datasets have not been able to capture data on certain priority areas, bespoke collections have been implemented. This includes Out of Area Placements, Early Intervention in Psychosis and Children and Young People with Eating Disorders.

NHS England is also leading data quality improvement work with NHS Digital, NHS Improvement, Public Health England and the Care Quality Commission across specialised and clinical commissioning group commissioned mental health services. The aim of this work is to ensure that the coverage and quality of national data is sufficient to report on all FYFV MH priorities.

13 Nov 2017 | Written questions | Answered | House of Commons | 112063

Date tabled: 07 Nov 2017 | **Date for answer:** 13 Nov 2017 | **Date answered:** 13 Nov 2017

- [Mental Health Services](#)

Asked by: Lord Brooke of Alverthorpe | **Party:** Labour Party

To ask Her Majesty's Government what assessment they have made of the link between good community mental health services and lower rates of detention under the Mental Health Act 1983.

Answering member: Lord O'Shaughnessy | **Party:** Conservative Party | **Department:** Department of Health

On 4 October 2017, the Prime Minister announced an independent review of mental health legislation and practice to tackle the issue of mental health detention. The independent review will look at a range of issues, and central to this will be a consideration of why rates of detention are increasing and what can be done to reduce inappropriate detention and improve how different agencies respond to people in crisis. The review will make recommendations to Government in 2018.

The Government recognises that improved community mental health services need to be in place, to support people before their mental health deteriorates to the point they need to be detained under the Mental Health Act. Crisis Resolution and Home Treatment Teams will therefore receive £400 million in additional funding by 2021, to ensure that they can offer a responsive service at all times of the day.

The Government is also investing £247 million to 2021 in mental health support in hospital emergency departments, and police forces are working National Health Service partners to deliver street triage services

to support people with immediate mental health needs. The Government has already introduced a waiting time standard to help ensure that people receive rapid access to Early Intervention in Psychosis services, and in August 2017, 75.3% of patients started treatment within two weeks of referral.

On 18 October, the Government launched a new £15 million scheme, Beyond Places of Safety. This will seek to fund services in 2018/19 and 2019/20, including places of calm and crisis cafes, that offer support to people who are at risk of mental health crisis.

02 Nov 2017 | Written questions | Answered | House of Lords | HL2253

Date tabled: 19 Oct 2017 | **Date for answer:** 02 Nov 2017 | **Date answered:** 02 Nov 2017

- [Mental Health Services](#)

Asked by: Cable, Sir Vince | **Party:** Liberal Democrats

To ask the Secretary of State for Health, what the average waiting time was in each month since April 2015 for patients referred for primary care having suffered psychosis.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party | **Department:** Department of Health

Average waiting times for patients experiencing psychosis referred for primary care are not centrally held. NHS England publishes interim data on the percentage of patients with first episode of psychosis starting treatment within two weeks of referral, in line with the Early Intervention in Psychosis standard. This data has been available since December 2015 and it can be found at:

<https://www.england.nhs.uk/statistics/wp-content/uploads/sites/2/2016/04/EIP-Waiting-Times-Timeseries-August-2017.xlsx>

26 Oct 2017 | Written questions | Answered | House of Commons | 108997

Date tabled: 23 Oct 2017 | **Date for answer:** 26 Oct 2017 | **Date answered:** 26 Oct 2017

- [Mental Health Services: Children and Young People](#)

Asked by: Baroness Walmsley | **Party:** Liberal Democrats

To ask Her Majesty's Government what action they are taking to reduce the waiting time for treatment by Child and Adolescent Mental Health Services.

Answering member: Lord O'Shaughnessy | **Party:** Conservative Party | **Department:** Department of Health

We have introduced a new waiting time standard for treatment of children and young people with eating disorders, setting an expectation

that by 2020, 95% of those referred will start treatment within one week if the case is urgent and four weeks if the case is non-urgent.

National data on the number of young people receiving treatment within this timeframe in England shows that over 73% of patients started urgent treatment within one week in Quarter 1 2017-18 (206 out of 281 patients started treatment within one week) and nearly 78.9% of patients started routine treatment within four weeks in Quarter 1 2017-18 (1,067 out of 1,355 patients started treatment within four weeks).

This is positive initial progress some three years before the 95% level of the standard comes into force.

We are also currently exceeding the waiting time standard for Early Intervention in Psychosis, with nearly 75% of patients starting treatment within two weeks in July 2017.

The upcoming children and young people's mental health Green Paper, which will be published by the end of the year, will include plans to improve timely access to specialist mental health services for those children and young people who need it most.

12 Oct 2017 | Written questions | Answered | House of Lords | HL1692

Date tabled: 02 Oct 2017 | **Date for answer:** 16 Oct 2017 | **Date answered:** 12 Oct 2017

- [Mental Health Services](#)

Asked by: Lamb, Norman | **Party:** Liberal Democrats

To ask the Secretary of State for Health, what assessment he has made of the effectiveness of processes within NHS mental health trusts for monitoring whether patients have been offered NICE-recommended psychological therapies.

Answering member: Jackie Doyle-Price | **Party:** Conservative Party | **Department:** Department of Health

NHS Improvement's Single Oversight Framework (SOF) is designed to help National Health Service providers meet and exceed the standards required of them. Two of the standards in the SOF for mental health providers which can trigger action relate to improving access to National Institute for Health and Care Excellence-recommended psychological therapies: Improving Access to Psychological Therapies (IAPT) and Early Intervention in Psychosis (EIP).

Additionally, NHS England employs a Mental Health Intensive Support Team. This team undertakes work with mental health providers to improve their operational processes, information systems and data submission to support delivery and monitoring of both the IAPT and EIP waiting and access standards.

NHS England expects that clinical commissioning group contracts with providers include the monitoring of providers' delivery against defined service specifications.

12 Sep 2017 | Written questions | Answered | House of Commons | 7736

Date tabled: 04 Sep 2017 | **Date for answer:** 06 Sep 2017 | **Date answered:** 12 Sep 2017

- [Mental Health Services: Waiting Lists](#)

Asked by: Berger, Luciana | **Party:** Labour Party · Cooperative Party

To ask the Secretary of State for Health, what proportion of people experiencing psychosis received a NICE-approved package within two weeks of referral in each year since 2010.

Answering member: Nicola Blackwood | **Party:** Conservative Party | **Department:** Department of Health

Waiting times data for early intervention in psychosis are published from two datasets: from the interim management level data in NHS England's Unify2 collection, and from experimental data in the Mental Health Services Dataset through NHS Digital. Links to these publications are below:

<http://www.england.nhs.uk/statistics/statistical-work-areas/eip-waiting-times/>

<http://content.digital.nhs.uk/mentalhealth>

The provision of National Institute for Health and Care Excellence approved care will take longer to measure. The Royal College of Psychiatrists' Centre for Quality Improvement is currently undertaking assessment and quality improvement work, supported by an annual self-assessment by all early intervention in psychosis services. The first results of this will be published in April 2017.

13 Jan 2017 | Written questions | Answered | House of Commons | 59429

Date tabled: 10 Jan 2017 | **Date for answer:** 13 Jan 2017 | **Date answered:** 13 Jan 2017

- [Mental Health Services](#)

Asked by: Berger, Luciana | **Party:** Labour Party · Cooperative Party

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 | **Party:** Conservative Party | **Department:** Department of Health

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 | Answered | House of Commons | 23475

Date tabled: 20 Jan 2016 | **Date for answer:** 25 Jan 2016 | **Date answered:** 25 Jan 2016

- [Mental Health Services: Finance](#)

Asked by: Hayes, Helen | **Party:** Labour Party

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 | **Party:** Conservative Party | **Department:** Department of Health

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 | Answered | House of Commons | 21223

Date tabled: 06 Jan 2016 | **Date for answer:** 11 Jan 2016 | **Date answered:** 15 Jan 2016

- [Mental Illness](#)

Asked by: Baroness Redfern | **Party:** Conservative Party

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 | **Party:** Conservative Party | **Department:** Department of Health

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 | Answered | House of Lords | HL3515

Date tabled: 10 Nov 2015 | **Date for answer:** 24 Nov 2015 | **Date answered:** 23 Nov 2015

- [Mental Health Services: Children](#)

Asked by: Berger, Luciana | **Party:** Labour Party · Cooperative Party

To ask the Secretary of State for Health, pursuant to the Answer of 23 March 2015 to Question 228266, what proportion of children and young people who were referred for early intervention treatment in psychosis services started that treatment within two weeks of that referral in the latest quarter for which data is available.

Answering member: Norman Lamb | **Party:** Liberal Democrats |
Department: Department of Health

Data is not available on the proportion of children and young people who were referred for early intervention treatment in psychosis services and started treatment within two weeks of referral. This is because this information is not collected centrally.

The new Child and Adolescent Mental Health Services (CAMHS) Minimum Dataset will provide comparative data for NHS services that will be used to improve clinical quality and service efficiency; and to commission services in a way that improves health and reduces inequalities. Current plans are for data from the CAMHS Minimum Dataset to begin to flow no later than January 2016.

Achieving Better Access to Mental Health Services by 2020, published October 2014, introduces the first waiting time standards for mental health. It includes a standard which will ensure that by 2016 at least 50% of people of all ages referred for early intervention in psychosis services will start treatment within two weeks. This waiting time standard will come into effect from 1 April 2015. This is backed by £33 million investment.

The Deputy Prime Minister announced on 14 March that £250 million additional funding would be available each year, over the next Parliament, starting in April 2015. This will fund improved access for children and young people with mental health problems - at least 100,000 more children and young people will receive treatment by 2020 and the funding will pay for the introduction of new access and waiting time standards.

The Government report of the Children and Young People's Mental Health and Well-Being Taskforce's findings, *Future in mind*, published on 17 March 2015, sets out a clear national ambition in the form of key aspirations that the Government would wish to see by 2020. This includes more access and waiting time standards for services so that children and young people can expect prompt treatment when they need it, just as they can for physical health problems.

26 Mar 2015 | Written questions | Answered | House of Commons |
228775

Date tabled: 23 Mar 2015 | **Date for answer:** 26 Mar 2015 | **Date answered:** 26 Mar 2015

2.2 Parliamentary debates

- [Psychosis: Early Intervention](#) (HC Deb 7 September 2016 cc141-165WH)

3. Press material

[This Former Health Minister Says The Government Is Breaking Its Promises On Mental Health](#)

Buzzfeed News, 22 February 2018

[A report outlining the key points of Mr Lamb's recent research]

[Psychosis patients 'not getting best care'](#)

BBC News, 1 February 2018

[The government's commitment to mental health parity is simply not reflected in the numbers](#)

Prospect, 25 January 2018

[An article which analyses Government measures to fulfil its commitment to "parity of esteem" for mental health. It cites a [recent King's Fund report](#) which examines funding and staffing of NHS mental health providers]

[Culture of 'steady and sustained improvement' in Welsh NHS](#)

ITV News, 7 April 2017

[Cap on waiting times for children seeking mental health treatment faces delay](#)

The Times, 24 November 2017 [available on parliamentary subscription]

[A report about delays to implementing plans for a maximum four-week waiting time for children with anxiety and depression]

[Children with mental health problems 'guaranteed' treatment in four weeks](#)

The Guardian, 23 November 2017

[Mental health target being ignored](#)

BBC News, 10 August 2016

[A report outlining initial concerns, based on FOI responses, that around a quarter of CCGs were not meeting the new EIP standard]

[Government is breaking pledge on mental health policy, warns former minister](#)

The Independent, 28 March 2016

[A report in which Mr Lamb outlined concerns that Government commitments on NHS mental healthcare, such as waiting time targets, may go unfulfilled]

[New quality standard on psychosis and schizophrenia](#)

National Institute for Health and Care Excellence, 25 February 2015

[A press notice from NICE outlining its most recently updated quality standard on psychosis and schizophrenia]

[First ever NHS waiting time standards for mental health announced, GOV.uk, 8 October 2014](#)

[Government press notice announcing its new NHS waiting time standards for mental health, including for early intervention in psychosis]

4. Further reading

- Commons Library briefing CBP0547, [Mental health policy in England](#), 23 August 2017
- Commons Library briefing CBP07171, [NHS maximum waiting times and patient choice policies](#), 6 May 2016
- Norman Lamb MP, [Discrimination at the Heart of the NHS](#), January 2018
- Health Education England, [Stepping forward to 2020/21: The mental health workforce plan for England](#), July 2017
- HM Government, [The Government's response to the Five Year Forward View for Mental Health](#), January 2017
- CCQI, [Standards for Early Intervention in Psychosis Services: Pilot Edition](#), August 2016
- NHS England, [Implementing the Five Year Forward View for Mental Health](#), July 2016
- CCQI, [Report of the Early Intervention in Psychosis audit](#), July 2016
- NICE, NHS England, and the National Collaborating Centre for Mental Health, [Implementing the Early Intervention in Psychosis Access and Waiting Time Standard: Guidance](#), April 2016
- Mental Health Taskforce, [The Five Year Forward View for Mental Health](#), February 2016
- Department of Health and NHS England, [Achieving better access to mental health services by 2020](#), October 2014

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