



Department of Health

*From Nicola Blackwood MP
Parliamentary Under Secretary of State for Public Health and Innovation*

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Mrs L C Brown
HM Coroner – Leicester City and South Leicestershire
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Dear Mrs Brown

Thank you for your letter to Secretary of State about the death of Victoria Halliday. I am responding as the Minister with responsibility for mental health policy at the Department of Health (DH).

I was saddened to read of the circumstances surrounding Ms Halliday's death. Please pass my condolences to her family and loved ones.

You have raised concerns about the availability of psychiatric intensive care beds locally for women. Psychiatric intensive care beds are commissioned locally by clinical commissioning groups (CCGs) as they are best placed to assess and meet the needs of their local communities.

You may be aware that the Commission to review the provision of acute inpatient psychiatric care for adults, led by Lord Crisp, published its review in 2015. The review found that access to mental health beds nationally was not so much an issue of bed capacity but an issue of discharge policies and alternatives to hospital admission in the community. We are committed to providing a full response to the review by the end of 2016/17.

Over the past decade acute mental health bed capacity has been steadily reduced, reflecting the shift toward more provision of care in the community. However, we acknowledge that effective community provision is variable across the country and in some areas the lack of high quality community care, including crisis resolution home treatment care, as a viable alternative to hospital admission has placed pressure on beds. This has resulted in more people being admitted to hospital out of area.

We are committed to delivering the vision set out in the Five Year Forward View for Mental Health published last year. The Prime Minister reaffirmed the Government's

commitment to this aim this month when she set out the Government's response to the Five Year Forward View and further mental health reforms.

We want to eliminate unnecessary out of area placements for adult acute mental health care by 2020/21 and reduce significantly delayed transfers of care so that people can move from hospital to care in the community, ensuring that beds are available for those most in need. We appreciate that this will not happen overnight but we are committed to delivering change. Also, through the Five Year Forward View, we will implement a comprehensive set of community-based mental health pathways of care so that people have access to care at the right time in the right place.

You have raised concerns about the quality of local community mental health provision. We recognise that the quality of community mental health provision can vary and this is unacceptable.

The Government announced an additional £400m investment up to 2020/21 to improve the quality of community mental health provision as an effective and safe alternative to hospital admission. This builds on the successful National Mental Health Crisis Care Concordat which has seen every local area develop a crisis care action plan to ensure that no-one in crisis is turned away.

You may also be aware that the Government made available £15m to develop more health based places of safety as appropriate places for people with mental health problems who are detained by the police. The Prime Minister announced this month that we will make further additional funding available, up to £15m, to build on this successful work.

You have raised concerns about the quality of care planning in Victoria Halliday's case. We published a revised Mental Health Act 1983 Code of Practice in 2015 which strengthened the guiding principles of the Code. This included strengthening the rights of patients and better involvement of patients' family, carers and friend in their care so that they can provide the much needed support for patients to manage their condition and support recovery and independent living in the community.

The Code of Practice is clear that we expect mental health providers to take a multi-agency approach to robust care planning, through the Care Programme Approach, to ensure that people are supported while in hospital and when they are discharged.

I expect all mental health providers to adhere to the Code of Practice and I would expect the local mental health commissioner and mental health provider responsible for Victoria Halliday's care to take necessary action where shortfalls have been identified in their approach to care planning.



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I hope that this information is useful. Thank you for bringing the circumstances of Ms Halliday's death to our attention.

Yours sincerely

Nicola Blackwood

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