

February 1st, 2012

Statement from the President and Honorary Officers of the Royal College of Psychiatrists on the Health and Social Care Bill

As it currently stands, the Royal College of Psychiatrists is not able to support the Health and Social Care Bill. We now believe that the consequences of the Bill will be entirely different from the principles which were originally set out, and do not consider that it will improve the health and care of people with mental illness. Indeed, we have strong concerns that it will have the opposite effect.

For the last 18 months, the College has actively engaged with the policy development process, from the publication in July 2010 of the Health and Social Care White Paper *Equity and Excellence: Liberating the NHS*, through to the various parliamentary stages of the Bill, including the Future Forum's 'Listening Exercise' last April and May.

We have endeavoured to secure provisions that will ensure a parity of esteem between physical and mental health, and have continued to work to bring about changes which we see as critical for high-quality care of vulnerable patients and for high-quality postgraduate medical education. Our commitment to securing the best outcomes for our service users, patients and carers has been demonstrated by the work we have done with the Royal College of General Practitioners to establish and run the Joint Commissioning Panel on Mental Health which will inform high-quality mental health and learning disability commissioning.

However, despite Government reassurances, we have become increasingly concerned about the Bill; in October 2011 84% of College members who responded to a survey believed the College should call for it to be withdrawn. We then surveyed members of our Council over Christmas, and have just completed a final survey, of the UK College membership. The latest survey found that 80% of respondents consider the Bill to be fundamentally flawed, and 85% believe the Bill will have a negative impact on the health and social care system. An analysis of the respondents based in England shows that 85% of them now believe the latter, an increase of 8% when compared to the view they held three months ago.

A breakdown of the quantitative results has been posted on the website today http://www.rcpsych.ac.uk/pdf/results_overview12_02_01.pdf. We are currently analysing responses to the qualitative questions to help inform our way forward, and will post the results of this analysis on the College website during the week of February 6th.

On the basis of these surveys, and recent discussions at the Academy of Medical Royal Colleges, we continue to have substantial concerns about the effects of the Bill on patients.

One of our strongest concerns is that increased competition will work against collaboration in the best interests of patients. While clinically appropriate choice is important for patients, competition must be used with caution, and only where it is clearly beneficial. Competition between providers can be particularly disruptive when dealing with the complex co-morbidities experienced by many people with mental illness. Any fragmentation of care will exacerbate their vulnerability, and work against providing the comprehensive, co-ordinated and consistent services which enable the development of supportive and trusting care relationships. To assist this, Clinical Commissioning Groups and the NHS Commissioning Board should be required to engage in meaningful and substantial consultation with users of mental health services, particularly with regard to ensuring that they commission services and pathways that are integrated and coherent.

We are also concerned that services which are competing will not collaborate by releasing senior staff to assist with providing local, regional and national clinical advice. In addition, fragmentation and loss of specific services to providers who may not provide medical training can also seriously compromise the training of the next generation of doctors.

It is time to recognise and act on the plentiful evidence that good mental health underlies all health: poor mental health is associated with diseases such as cancer, cardiovascular disease and diabetes and poor physical health increases the risk of mental illness. However, while mental illness represents 23% of the disease burden¹, it accounts for only 11% of the health budget². In the current climate of scarce resources, expenditure reduction, welfare reform and cuts to legal aid, mental illness and mental health problems are likely to increase.

It is vital that mental health spending should be proportionate to need, and that mental health must not be the 'poor relation' of physical health. We are therefore calling for the Bill to place explicit duties on the Secretary of State, the NHS Commissioning Board and the clinical commissioning groups to promote parity of esteem between mental and physical health.

In conclusion, we want the Bill to ensure:

- parity of esteem between mental health and physical health;
- a reduction rather than an increase in health inequalities;
- that integrated care is safeguarded over competition;
- that competition is only used in the NHS where it can be shown to clearly benefit patients;

¹ [HM Government \(2011\). No health without mental health: A cross-government mental health outcomes strategy for people of all ages.](#)

² [Department of Health \(2009\) Departmental Report 2009: The Health and Personal Social Services Programmes.](#)

- continuation of a system of effective postgraduate medical education and training;
- meaningful involvement of service users and carers in needs assessment and commissioning processes; and
- flexibility for clinicians to undertake work for the benefit of the wider NHS.

Meanwhile, we are continuing to work with government to address the above concerns, and await with interest the many amendments the Government is due to publish this week. We will scrutinise these closely to assess what they mean in real life for patients and what they will mean for members of the College. We will keep you informed of progress, and we encourage you to continue to contribute your views on these important issues.