

# General Debate on the future of the NHS, its funding and staffing on Thursday 23 February 2023, House of Commons

## Background:

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This is a briefing in advance of a General Debate on the future of the NHS, its funding and staffing led by Kate Osborne MP, (Labour, Jarrow).

## Key Points:

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- Workforce constraints have an enormous impact on staff wellbeing. At present, members of the College report high workloads, poor work-life balance, and pressures on continuing professional development.
- As of October 2022, only 236.5 Full Time Equivalent (FTE) consultants have been added to the workforce since March 2016, against the HEE/NHSE target to have an additional 750 (31.5%) in post by March 2022 or 910 (26.0%) by March 2023.
- It takes 13 years to train a consultant psychiatrist, so longer-term planning is essential.
- It is vital the Government addresses the need for the long-term reform of adult social care, if it is to ease pressures in the NHS and its capacity to tackle the backlog due to delayed discharges.

## About the Royal College of Psychiatrists:

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We are the professional medical body responsible for supporting psychiatrists throughout their careers from training through to retirement, and in setting and raising standards of psychiatry in the United Kingdom.

We work to secure the best outcomes for people with mental illness, intellectual disabilities and developmental disorders by promoting excellent mental health services, training outstanding psychiatrists, promoting quality and research, setting standards and being the voice of psychiatry.

## Mental Health Workforce:

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There are already currently not enough psychiatrists to meet the demand on Mental Health services, and that gap is growing.

The RCPsych 2021 Workforce Census shows that since 2017, there has been a 30% increase in the number of vacant or unfilled consultant posts in England. The specialities with the highest number of vacancies were child and adolescent psychiatry, eating disorders psychiatry and addictions psychiatry.

Over the past year (October 2022- October 2023), there has been an increase of just 6.3 Full-Time Equivalent (FTE) consultant psychiatrists in post, across the NHS workforce, equivalent to a year-on-year rise of just 0.1%. This also means that only 236.5 FTE consultants have now been added to the workforce since March 2016, as against the HEE/NHSE target to have an additional 750 (31.5%) in post by March 2022 or 910 (26.0%) by March 2023.<sup>1</sup> Without the workforce in place, it will mean patients will suffer for longer, at a time when demand is increasing, and the existing workforce will be under even greater pressure.

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<sup>1</sup> NHS Digital, [NHS workforce statistics](#) (October 2022)

There was an increase in three of the six specialties reported by NHS Digital: psychiatry of learning disability, 4.0%; child and adolescent psychiatry, 2.0%; and general psychiatry, 0.1%. The other three specialties had decreases in consultant numbers: old age psychiatry, 0.1%; forensic psychiatry, 3.8%; and medical psychotherapy, 20.2%.<sup>2</sup>

NHS England have set a target to increase the consultant psychiatric workforce by 1,040 by March 2024 compared to March 2016. Assuming current trends continue, seven out of ten of these posts will be unfilled (based on NHS Digital workforce data from March 2016 - March 2022).

Similarly, for Mental Health nurses we can expect only around 4,000 more to be in post by March 2024 compared to March 2016, as against the 12,320 required according to Stepping Forward and the Long-Term Plan.

### **Children and Young People's Services:**

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Child and adolescent psychiatry is one of the specialties with the highest consultant vacancy rates.

The mental health impact of the pandemic on children and young people has been vast, and most significant for those children who were already more vulnerable to Mental Health problems. When comparing July 2022 to July 2021, referrals to child and adolescent Mental Health services have increased by 24% (from 59,405 referrals in July 2021 to 73,874 in July 2022).<sup>3</sup>

Pressure points also emerged over the course of the pandemic, with some specialist services facing much more significant demand than others. Children and young people's eating disorder services are one particular area of concern, where performance against the waiting time standard has dropped to a worrying low.

NHS England data published for the first quarter 2022-23 shows that of the 230 children and young people currently on the waiting list for urgent treatment for eating disorders, 44% have been waiting for more than 12 weeks.<sup>4</sup>

### **Recruitment:**

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COVID-19 has created an unforeseen growth in medical school places because of an unexpectedly high number of students qualifying for an offer to study medicine in 2021. In response, the government decided to provide extra funding to medical and dental schools across England and to increase the number of available medical school places to 9,000.

This is a positive development for the future of the psychiatric workforce and the uplift should be retained and expanded year on year, towards reaching the 15,000 medical school places needed by 2028/29. This should be accompanied by assertive action over the longer term to ensure medical students become trainees in under-resourced specialties, including psychiatry. This is necessary to deliver a sustainable supply of psychiatrists for the long-term.

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<sup>2</sup> NHS Digital, [NHS workforce statistics](#) (October 2022)

<sup>3</sup> NHS Digital, [Mental Health Monthly Statistics](#) (dataseries CYP32, 'End of Year' data used for July 2021)

<sup>4</sup> NHS England, [Statistics » Children and Young People with an Eating Disorder Waiting Times \(england.nhs.uk\)](#)

## **Choose Psychiatry:**

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[Choose Psychiatry](#) is a yearly campaign run by the Royal College of Psychiatrists aimed at encouraging medical students and foundation doctors to Choose Psychiatry as their specialty. It's been running since 2017 and has led to year-on-year improvements in the fill rate for trainee psychiatry posts, until we reached nearly 100% in 2020 and 2021.

With secondary mental health referrals at record levels of 4.6m over 2021/22 and a backlog of 1.4m people still waiting to start treatment, pressure on the NHS is likely to reach unprecedented new levels and there are currently not enough psychiatrists to meet this ever-increasing demand.<sup>5</sup>

## **Workforce Planning:**

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It takes 13 years to train a consultant psychiatrist, so longer-term planning is essential. There is an urgent need for a funded multiyear workforce strategy that outlines how the Government will grow and retain the psychiatric workforce and consistently monitor progress so that it can change course where necessary.

The Government's commitment to publish a comprehensive NHS workforce plan with independently verified forecasts for the numbers of doctors, nurses and other professionals that will be needed in five, 10, and 15-years' time is a promising step forward. This is something [we - and over 100 other organisations](#) – have called for and supported.

The Government committed to publishing the plan by 2023 and we believe it should be published in early 2023. The Government must also ensure the plan is backed by adequate investment and that it aligns with HEE's strategic framework. Meanwhile, patients seeking Mental Health support and the workforce face significant challenges now and it is important for the government to recognise that major reform programmes need to be implemented as soon as possible.

In the Autumn Statement, the government also announced they would introduce measures to support and grow the workforce and improve performance across the health system. We seek clarity from the Government on what these measures will be and what plans they have for any future engagement with key stakeholders in the Mental Health sector.

## **Retention:**

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Workforce constraints have an enormous impact on staff wellbeing. At present, members report high workloads, poor work-life balance, and pressures on continuing professional development (CPD). This means that older consultants are more likely to retire early due to work-related stress, which has been exacerbated by the pandemic.

Across the sector, there has been an increase in the number of doctors taking early retirement, with NHS figures showing that the numbers have tripled in the past decade. The Royal College of Psychiatrists 2021 workforce census shows a total of 193 consultants were reported to have retired in England in 2020/21, signalling a 49.6% increase from 2016/17.

There needs to be significant investment in retention and in mental health support for health and care staff, particularly after the strain put on them during the pandemic. This is needed both as a duty of care towards staff, and also to mitigate the impacts of mental health-related absence, which has consistently been the most reported reason for sickness

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<sup>5</sup> <https://www.england.nhs.uk/wp-content/uploads/2021/11/board-item-5-251121-update-on-mental-health-services.pdf>

absence. NHS trusts also need to be supported to meet an annual 4% improvement target in retention of mental health staff.

We recommend:

- Job plans for all mental health professionals in multi-disciplinary teams that enable sufficient time for required tasks and access to professional development activities.
- A focus on existing staff wellbeing, addressing high workloads, poor work-life balance, and pressures on CPD.
- Flexible working - adaptable posts as post holders get older and seek to pursue specific interests within job roles. It should be easier for people to return to services post-retirement.
- Improving the revalidation process for retired psychiatrists wishing to return to work - for instance revalidation for this cohort could be cheaper.
- An increase in the number of trust-supported academic activities with academic sessions safeguarded.
- A graded scheme to offer senior MH professionals paid sabbaticals based on length of service.

### **Integration and Training:**

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As Integrated Care Systems (ICSs) develop so too will new ways of working, including collaborative care, distributed risk responsibilities and shared clinical responsibilities. New roles will also develop, including staff working across the primary/secondary interface.

Within this context there is a need for healthcare professionals to hold generalist skills, including physical health competencies for mental health staff and mental health competencies for 'non-mental health professionals. This could also help overcome challenges of "over-specialisation". Psychiatrists would need to be involved in overall system design which we hear is often not the case.

Delivering the right care at the right time in the right place will require consideration of integrated training opportunities. Key areas include general practice and psychiatry, psychiatry and community pharmacy and psychiatry and neurology. One example of where this could work effectively is GPs being trained to assess and prescribe treatment for those with ADHD safely. Our members tell us that some patients are waiting over two years for ADHD assessments which in turn impacts on their ability to receive treatment.

All healthcare professionals will need to hold appropriate skills and training to minimise inequalities, and possess the competences to deliver fair, non-judgemental, and least restrictive care.

### **The Gap in Mental Health Funding:**

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In addition to the challenges facing the Mental Health workforce, we have significant concerns about mental health funding being affected by rising inflation.

In the autumn statement, the chancellor announced an increase in the NHS budget by £3.3 billion in each year for the next two years. However analysis shows that inflation and

demographic changes will mean the NHS gets just £800m to improve services over the next two years.<sup>6</sup>

With 9 in 10 adults affected by the cost-of-living crisis and exposed to the potential mental health impact it can have on their lives, we urgently need a cash boost of around £570m on the basis of the latest inflation data from HM Treasury just to address the 'funding gap' in mental health funding caused by inflation alone and to ensure the Government's commitment of £2.3bn in real terms for mental health services by 2023/24 is delivered.

### **Addressing the Shortfall in Mental Health Adult Social Care:**

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It is vital the Government addresses the need for the long-term reform of adult social care, if it is to ease pressures in the NHS and its capacity to tackle the backlog due to delayed discharges.

Mental health social care is an important part of adult social care and is vital in maintaining the nation's mental health, however this role is not always well understood or recognised.

Mental health social care supports people of all ages who live with a severe mental illness. This support helps people get appropriate aftercare after a stay in a mental health hospital, and to stay well, live independently and contribute within their local communities.

Local authorities and mental health social care providers are still awaiting the investment needed to deliver the vision set out in the recent white paper on adult social care, so they can address the challenges currently facing the sector and properly deliver their duties under the Care Act, Mental Health Act and Mental Capacity Act.

### **The Draft Mental Health Bill:**

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The Mental Health Act is the main piece of legislation covering the assessment, treatment and rights of people with a mental disorder. An independent review, chaired by former RCPsych President Professor Sir Simon Wessely, recommended a series of essential reforms to the current legislation and wider Mental Health services.

We welcomed the Government's commitment to taking forward the large majority of the review's recommendations. However, the current workforce constraints mean that the proposed changes to the Mental Health Act cannot be absorbed within the existing workforce.

In October 2021, we commissioned a [report](#) in response to the Government's White Paper on the Mental Health act to estimate what the effect reforms to the Act would have on workforce. Based on DHSC's estimated rate of detention growth, the research found that:

- By 2023/24, an additional 333 FTE (Full Time Equivalent) psychiatrists will be needed, costing £40m per year by 2023/24.
- By 2033/34, a further 161 FTE psychiatrists will be needed, costing £60m per year by 2033/34 (including £40m cited to 2023/24).

These numbers relate only to the impact of the proposed reforms and are additional to those required to deliver NHS Long Term Plan commitments.

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<sup>6</sup> [NHS spending: Inflation and demand growth to wipe out almost all of £3.3bn extra funding announced by chancellor | UK News | Sky News](#)

In its recent report the Joint Committee on the Draft Mental Health Bill recommended that the Government should publish a comprehensive implementation and workforce plan, alongside the Bill. The committee advised that it should contain clear actions and key milestones detailing the implementation of the Bill and how they link to milestones in the implementation of the 10 Year Plan and other relevant Government policies. We endorse this recommendation.

### **Mental Health Service Buildings:**

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The quality of the buildings used to deliver mental healthcare in England has a significant impact on the mental health workforce and on those receiving care.

In the Autumn statement the government announced it will continue with the New Hospital Programme to deliver healthcare more efficiently. We welcome the continuation of this programme, however the government must ensure there is open competition for any plans to build new hospitals

Many of the buildings used to deliver mental healthcare in England are not fit for purpose, posing serious challenges to those who receive treatment and those who work in those facilities. The COVID-19 pandemic and its impact on areas such as infection control and social distancing highlighted further the unacceptable disparity in estate provision for mental health services. The high-risk maintenance backlog across mental health and learning disability sites increased by 122% in 2021/22 compared to 2020/21, reaching over £48m.

As the Government invests in updating the healthcare infrastructure, it is imperative that mental health services are not left behind and additional, targeted investments are made to begin addressing this urgent need.

### **More information:**

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