Independent Commission launched to review the provision of inpatient psychiatric care for adults - call for evidence

4th February 2015

An independent Commission to review the provision of inpatient psychiatric care for adults in England, Wales and Northern Ireland has been launched today [4th February].


The Commission has been established by the Royal College of Psychiatrists (RCPsych) to respond to widespread concerns about the provision of inpatient psychiatric care for adults in many parts of England, Wales and Northern Ireland. Concerns highlighted by the Commission include:

- The number of patients in England travelling out of their local area for emergency mental health treatment more than doubled in two years from 1301 in 2011/12 to 3024 in 2013/14. One person was sent 300 miles, from Devon to West Yorkshire.
- A 2014 analysis of English coroners’ reports found that seven suicides and one homicide were linked to a psychiatric bed not being available between 2012-2014.
- In Wales, psychiatric wards have been operating at above the RCPsych’s recommended figure of 85% occupancy every year since 2010/11.
- In Northern Ireland, psychiatric wards have been operating at above the RCPsych’s recommended figure of 85% occupancy every year since 1998/99.
- In a 2014 survey of UK psychiatric trainees, 24% said that a bed manager had told them that a patient would only get a bed if they were sectioned under mental health legislation.

Call for Evidence

The Commission is today launching a call for evidence. The Commissioners would like to hear from patients, carers, staff, commissioners, charities, academics, social workers and anyone else who has knowledge or experience of acute inpatient care in England, Wales or Northern Ireland. The Commission is particularly interested to hear about innovative solutions to bed pressures which are already being put into practice.

Anyone wishing to submit evidence to the Commission can do so by visiting the Commission website - www.CAAPC.info - before Wednesday 18 March.

Lord Nigel Crisp, Commission Chair, said: “It is simply unacceptable that patients are being turned away from services or sent hundreds of miles away from home because there isn’t a bed available for them locally.

“The Commission will be visiting services and meeting patients and staff in order to understand both what the causes of these problems are and to look for solutions."

Professor Sir Simon Wessely, President of RCPsych said: “Throughout my career I have seen recurring crises in the provision of mental health beds, with wards running at full capacity and patients in crisis having nowhere to go.

“Now is the time to look at these crises more closely, identify the underlying causes and move towards finding practical and sustainable solutions. The Commissioners have a huge level of
expertise in mental health and represent diverse voices from across the sector including clinical staff, NHS management, service users and carers.

“I hope that this Commission will find solutions that ensure that anyone in need of inpatient psychiatric care has access to local, high quality services.”

The Commission will review the current provision of acute inpatient services, investigate the causes of pressures on beds, and examine the relationships between inpatient services and other aspects of the health and social care system.

Commissioners will meet with clinical staff, mental health experts and service users and carers in England, Wales and Northern Ireland. They will also review available research and best practice.

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Notes to Editors
The review will be carried out throughout 2015 and the commission will report its findings in early 2016.

The Royal College of Psychiatrists is funding the Commission, and providing secretariat support. However, the Commission has agreed its own terms of reference and will operate independently of any influence.


Scotland is excluded from the Commission’s scope as it is undertaking its own programme of work to review psychiatric beds. The Commission’s scope does not include CAHMS services, forensic services or specialist adult services (such as perinatal or dementia) as these services are commissioned separately and are subject to different service pressures and constraints.