

Dame Meg Hillier DBE MP  
Chair, Public Accounts Committee  
House of Commons  
London SW1A 0AA

NHS England  
Wellington House  
133-155 Waterloo Road  
London  
SE1 8UG

By email to: [pubaccom@parliament.uk](mailto:pubaccom@parliament.uk)

**4 May 2023**

Dear Dame Meg,

**Public Accounts Committee session on progress in improving mental health services on 20 April 2023 – follow up letter.**

At the PAC oral evidence session on progress in improving mental health services, NHS England committed to writing to the panel to provide further information on the use of restraint, the international recruitment of mental health nurses, when the standards for Children and Young People's eating disorders were introduced, and data collection around GP referrals to mental health services that are rejected.

**Use of Restraint**

All NHS commissioned providers must ensure that relevant staff have received training in restrictive practices that complies with the Restraint Reduction Network Training Standards. This is set out in both the NHS Standard contract and the Use of Force Act statutory guidance (2021) as well as CQC inspection standards. The standards apply to all training that has a restrictive intervention component and focus on protecting human rights and reducing the use of restrictive practice and is applicable across all health settings where training on restrictive practices is provided.

With regards to mental health, learning disability and autism settings, NHS England commissions the National Collaborating Centre for Mental Health and Academic Health Science Networks across England, to improve the safety and outcomes of people using inpatient mental health, learning disability and autism (MHLDA) services by reducing the incidence of restrictive practices.

The initial pilot programme saw 38 hospital wards adopt new measures to tackle restrictive practices, with most of them seeing a significant reduction ranging from 25% to 100% in one or more measure of restrictive practice (number of physical restraints, seclusions and rapid tranquillisation episodes).

The programme is now being scaled up across all MHLDA Trusts in England – with mental health patient safety networks set up across all regions to drive improvement: currently involving 98% of all MHLDA Trusts, all of the major private providers of NHS inpatient services and 261 inpatient wards working to reduce restrictive practices.

NHS England is working with partners (DHSC, CQC) to ensure the legislative requirements for reporting restrictive interventions as part of the Mental Health Units (Use of Force) Act 2018 are met. As part of this work, NHS England has just launched [CQUIN 17 Reducing the Need for Restrictive Practice in Acute Adult and Older Adult Inpatient Settings](#). This CQUIN incentivises the reporting of restrictive interventions as an additional lever to support quality improvement programmes to reduce the harm caused by restrictive practice. A similar CQUIN has been introduced to incentivise the reporting of restrictive interventions in children and young people's inpatient mental health settings ([CQUIN 16 Reducing the need for restrictive practice in CYPMH inpatient settings](#)).

Mental Health Services Data Set (MHSDS) restrictive intervention reporting in Adult Acute and Adult Learning Disabilities inpatient services can be found [here](#).

The HOPE(S) model is a human rights-based approach to working with autistic people and people with a learning disability in long term segregation (LTS). In partnership with Mersey Care NHS Foundation Trust, NHS England is piloting this model across mental health inpatient services in England. The pilot is due to conclude in 2024 with an evaluation underway to consider impact and outcomes. The programme has trained 274 staff in the HOPE(S) 2-day clinical team training and 749 staff have received the HOPE(S) awareness training.

The CYP Eating Disorder Guidance is currently being updated; it will include an updated steer on managing medical emergencies in line with RCPsych guidance ([Medical emergencies in eating disorders - MEED](#)) and a strengthened national steer in relation to NG tube feeding.

### **International Mental Health Nursing Recruitment**

At the hearing, the international recruitment of nurses was discussed and there was interest in which countries the 2,000 nurses referred to were being recruited from. We do not currently hold this level of detail within NHS England. We will be exploring with the Nursing and Midwifery Council what can be provided from their register of information.

### **Children and Young People's Eating Disorder Standard publication date**

The original CYP ED standard was published alongside guidance in 2015. Full details are published here: [NHS England » Children and young people's eating disorders programme](#). In 2019 the updated version of the Eating Disorder guidance was published.

### **Data Collection around GP Referrals**

NHS England data sets capture 'accepted' referrals as this is required in order to for the details pertinent to the referral to flow through the system. Once a referral is accepted, we are then able to capture all demographic, activity and outcome data related to that person, subject to data quality.

NHS England does not have plans to capture data around rejected referrals. It would be challenging to justify the creation of new records with patient identifiable information for this purpose, and doing so would add an avoidable data burden for providers.

Yours sincerely,



**Claire Murdoch**

National Director for Mental Health  
NHS England