

Royal College of Psychiatrists

Cite this as: *BMJ* 2022;376:o585

http://dx.doi.org/10.1136/bmj.o585

Published: 04 March 2022

## Why has mental health been forgotten in the government's recovery plans?

Adrian James president

Over the last few weeks, we've seen the publication of several major government strategies setting out plans for our recovery from covid-19, including the NHS elective backlog strategy and white papers on integration and levelling up. However, something obvious is missing. For those of us working in frontline services, the lack of comparative action on mental health is increasingly worrying. In some respects, we seem to be moving backwards.

When the Long Term Plan was launched in 2019, its commitment to mental health was encouraging and marked an enormous step towards parity of esteem between mental and physical health. It promised a considerable increase in funding, pledging that mental health would receive a growing share of the NHS budget, in real terms worth at least a further £2.3 billion a year by 2023/24. Yet, in the face of an unprecedented increase in demand for mental health services, including an over 80% increase in referrals to children and young people's mental health services compared to 2019, the government's plans for long term recovery have included almost no mention of mental health. As the Health and Social Care Select Committee raised at the end of last year, there is still no clarity as to whether any of the additional revenue funding announced for the NHS last autumn will be spent on mental health, despite around £7.5 billion of "NHS recovery funding" still being unallocated.

In this context, it's concerning to see that despite the Long Term Plan commitments, the overall proportion of the NHS budget going to mental health has fallen for three years running, with the total proportion of NHS England's Revenue Departmental Expenditure Limit spent on mental health (CCG+NHSEI) having dropped from 11.10% in 2018/19 to just 9.93% in 2020/21. While welcome efforts are made to ensure Clinical Commissioning Group (CCG) spending on mental health continues to grow as a proportion of their overall allocation through the Mental Health Investment Standard (MHIS), the tool simply isn't strong enough in isolation to ensure mental health isn't left behind as the NHS budget grows. A number of suggestions have been made to further strengthen the MHIS, such as those from the Healthcare Financial Management Association, but far greater action will be needed to ensure mental health services get the resources they need post-pandemic. That includes further amendments to the Health and Care Bill currently being debated in Parliament, but also requires a clear and properly funded recovery strategy for mental health.

The additional £500 million invested in 2021/22 seemed to indicate the government's understanding of the mental health impact of the pandemic, but now risks being a short term sticking plaster in the face

of the unprecedented increase in demand that will stretch far beyond the end of this financial year. One-off investments don't allow services to make longer term plans. As it stands, the mental health waiting list exceeds 1.5 million people, referral rates are still far above pre-pandemic levels, and estimates about the increased prevalence of mental disorders, particularly among children and young people, give us a sense of the challenge to come. As the government focuses efforts on plans for the recovery of elective care, we have to remember that it is often the very same patients waiting for support for mental health services.

As it stands, it seems that the scale of the government's ambition on mental health is failing to keep up with the scale of the post-pandemic challenge. Already at breaking point, the mental health workforce will be stretched even further as it struggles to meet increasing demand while also being asked to transform services without any additional funding other than the much welcomed Long Term Plan funding predicated on pre-pandemic predictions of need. Patients will invariably be the ones paying the price. Any strategies that don't respond to this situation will fail in their efforts to deliver a full recovery from covid-19 for the health system and the people that rely on it. We also know that an agenda that places mental health at the heart of the country's recovery will have enormous knock-on benefits, preventing ill health, improving outcomes, and supporting long term recovery. Achieving this will require a clear and funded plan. Patients simply cannot wait any longer-it is high time for the government to deliver one.

Competing interests: none declared

Provenance and peer review: not commissioned, not peer reviewed