

# Foreword: Chris Dzikiti

Many of the issues discussed in this year's Monitoring the Mental Health Act Annual Report are all too familiar for people with lived experience of being detained, their friends and family, and mental health staff.

We have seen examples of good practice, with staff doing their best in difficult circumstances to provide people with safe and effective care. However, there are still many people struggling to access care, not being involved in planning their care or being put at risk of experiencing restrictive practices that are not proportionate, justified or in line with their human rights.

The golden thread linking many of these issues is the ongoing pressures on limited workforce which, as we highlighted in [our 2022/23 State of Care report](#), have continued to rise over the last year.

Throughout this report, we describe how workforce retention and staffing shortages remain one of the greatest challenges for the mental health sector, and highlight the effect this is having on the quality of care and the safety of both patients and staff. This is a particular problem for patients detained in the three high secure hospitals, where we have seen examples of inadequate staffing numbers and issues leading to patients being kept in their rooms during the day, and spending longer in their rooms at night. Staffing difficulties are also significantly restricting patients' access to therapies and activities, and patients have told us about the impact this had on their care, treatment and recovery.

We are pleased to see steps being taken to tackle the systemic issues around the NHS workforce. We welcome commitments to increasing nursing staff numbers in the NHS Long Term Workforce Plan, and are encouraged that there are now 50,000 more nurses in post than in 2019. However, as the majority of these new posts are not specifically for mental health care, we are concerned that the current shortfall in the mental health workforce is not being sufficiently addressed.

Nowhere is the impact of this shortfall more profound than for children and young people. As demand for children and young people's mental health services continues, staff shortages mean more and more children and young people are having to wait too long for mental health support, care and treatment. As at November 2023, nearly half a million children and young people were undergoing or waiting for mental health care.

This cannot continue. As well as the devastating impact on individuals, not providing children and young people with the care they need early enough presents a real risk to the future sustainability of NHS mental health services.

Without this early intervention, too many children and young people are reaching crisis point – in some cases this includes attempting suicide – before they can get the help they so desperately need. However, the lack of specialist beds then means that many of those in most need are ending up in inappropriate settings and/or in hospitals far away from home. As an organisation, we are committed to understanding why this is continuing to happen and working with stakeholders to design and implement solutions for now and the future.

Integrated care boards and integrated care systems will play a key role in bringing services together to provide care, at the right time, that meet the needs of their local population. But they will also be crucial in ensuring that services are joined up so people who are well can be discharged from hospital into the community in a timely way, with the support they need. As part of our new powers, we will be assessing how well systems are working to provide services that meet the needs of their local populations.

The draft Mental Health Bill also included important amends to the Mental Health Act 1983, which aimed to increase the safeguards for people who are detained. Despite this recognition of the need for change, we are disappointed that the bill was not mentioned in the King's speech as a priority, and that people continue to be denied improved safeguards. But legislation alone won't bring the changes needed. Better funding, improved community support and investment in workforce are essential in improving mental health care and better outcomes for patients.

**Chris Dzikiti**

Director of Mental Health

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