Will the money tree grow another branch for us?

Service reform will require massive investment to become reality

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It would be churlish in the extreme to appear unimpressed by the government’s announcement of plans to increase staffing numbers in mental health services.

For too long, workforce planning seems to have belonged in the ‘too difficult to do’ box, and my encounters with the efforts made seem to be a sophisticated lifting of a wet finger in the breeze.

Plans announced by the Department of Health to create 21,000 new posts in England by 2021, including nurses, address some fundamental aspects of mental health services that have long been unaddressed. There has been a slow haemorrhage of mental health nurses, with more than 5,000 leaving in the past seven years, and this recognises the need for more.

Decades of bias

Early intervention in the mental health of children and young people has again been recognised as vital, and the expansion of crisis services will of course be very welcome.

This is a real opportunity to correct decades of institutional bias that have seen mental health services deprived of the resources they need. All these efforts will also address the aspiration of ‘parity of esteem’, which again is very welcome. So full marks for intent.

However, all of this hinges on two factors (we will take it that the capacity to actually deliver is a given). First, where will all these extra staff come from?

Will we see an influx of the many thousands of psychology graduates who cannot enter the clinical training route, but who could be employed in a new clinical role?

Will we see the return of all those mental health nurses who left at age 55, bringing with them all the skills and knowledge they have?

Just imagine what they could offer in the realm of preceptorship and mentoring.

Second, how will it be funded? Will the money released from the cessation of the nursing bursary be adequate? Probably not, considering applications were falling and the new liberalised opportunities for universities will still face the clinical bottleneck of placements.

Will the money tree that funds HS2 and Trident grow another branch for mental health service reform?

That really does seem like wishful, if not delusional, thinking.