

Better mental health support for people in crisis

People experiencing a mental health emergency will be able to access more care in the community, such through as crisis houses and safe havens, and those detained under the Mental Health Act will benefit from landmark reforms which provide patients with more control over their care and treatment.

A £150 million investment over the next three years will bolster NHS mental health services, better support people in crisis outside of A&E and enhance patient safety in mental health units. These were all recommendations from Professor Sir Simon Wessely's independent review of the Mental Health Act which will now be implemented to improve patient care.

The funding includes £7 million for specialised mental health ambulances across the country to reduce the use of general ambulance call outs for those experiencing a mental health crisis and prevent the inappropriate use of police vehicles as a way to take people to hospital. This will ease pressure on services, improve response times and outcomes for people in crisis which will help save lives, as well as ensuring patients experiencing a crisis are treated with dignity and respect.

The government has also published its draft Mental Health Bill today setting out wide-ranging reform to the Mental Health Act to ensure greater choice and autonomy for patients in a mental health crisis. They will also aim to tackle the racial disparities in mental health services, better meet the needs of people with a learning disability and autistic people and ensure appropriate care for people with serious mental illness within the criminal justice system.

The draft bill is now subject to pre-legislative scrutiny where a parliamentary select committee will examine the draft in detail before the government publishes a final version.

Health and Social Care Secretary Sajid Javid said:

This is a significant moment in supporting people with serious mental health issues.

We're investing more money to ensure NHS patients have tailored services and support, so people in a mental health emergency get the right care at the right time.

Our reforms to the outdated Mental Health Act are another important milestone in better supporting those with serious mental health issues and giving people greater control over their treatment, particularly those from ethnic minority backgrounds who are disproportionately detained under the Act.

Funding will also support local communities to invest in alternatives to hospital admission for people experiencing a mental health crisis, such as 'crisis houses' run by the voluntary sector which will ensure people can access the treatment they need within their community.

Increasing local capacity will reduce avoidable hospital admissions and inappropriate out of area hospital placements. This will result in improved patient outcomes as people in crisis will be able to receive specialised treatment in appropriate environments, reducing the risk of readmission to hospital.

Ensuring patients are receiving the appropriate care from the start will help to free up hospital beds, assisting the government's continued mission to bust the Covid backlogs.

Minister for Mental Health Gillian Keegan said:

It's crucial NHS's mental health care and treatment works for people.

I've heard first-hand the anguish of patients and their families when they have been subject to inappropriate care. Bolstering the mental health support available to people in a crisis will ensure patients are at the centre of decisions about their own care if they're detained under the Act.

I look forward to receiving the committee's feedback on the draft Bill so we can bring the Act into the twenty-first century.

NHS Mental Health Director Claire Murdoch said:

This is a significant and welcome milestone towards the much needed reform of the Mental Health Act and I look forward to working with the Government on developing a plan for implementing these changes.

The NHS Long Term Plan is expanding and improving mental health services across the country – from specialised mental health ambulances, opening new buildings, and refurbishing older ones – this much needed funding will modernise facilities and most importantly, ensure mental health patients get access to the best and suitable care when they need it.

Reforms to the Mental Health Act will help tackle deep seated health disparities, ensuring everyone is treated with the dignity and respect they deserve and ending the stigma of mental illness once and for all. This includes the disproportionate number of people from black, Asian and ethnic minority communities detained under the Mental Health Act. Black people are over four times more likely to be detained under the act and over 10 times more likely to be subject to a community treatment order.

Work is already underway – improved culturally appropriate advocacy services are being piloted in four areas in England so people from ethnic minority backgrounds can be better supported by people who understand their needs and NHS England are developing a Patient and Carer Race Equalities Framework to provide mental health trusts with practical steps to improve the experience of care within mental health services for people from ethnic minority communities.

The reforms will also change the way people with a learning disability and autistic people are treated in law by setting out that neither learning disability or autism should be considered reasons for which someone can be detained for treatment under section 3 of the Act. Instead, people with a learning disability or autistic people could only be detained for treatment if a mental health condition is identified by clinicians.

The benefits of reform will also be felt by people with serious mental illness within the criminal justice system. A 28-day time limit will speed up the transfer of prisoners to hospital, ending unnecessary delays and ensuring they get the right treatment at the right time and the outdated practice of using prisons as ‘places of safety’ for defendants with acute mental illness will end. Instead, judges will work with medical professionals to ensure defendants can always be taken directly to a healthcare setting from court.

Prisons Minister, Victoria Atkins, said:

It is essential that those in the criminal justice system get the right mental health support, so we can keep them and the public safe while also cutting crime.

The new Mental Health Bill will speed up access to treatment, enshrine important protections for vulnerable people and ensure prisons are not used as an alternative to hospital treatment.

Reforms will also take steps to ensure parity between mental health and physical health services. The government is already investing over £400 million to eradicate dormitories in mental health facilities as part of its response to Sir Simon’s recommendations so people admitted to hospital can receive care in a modern and genuinely therapeutic environment.

More widely, the government is expanding and transforming mental health services to meet rising demand by investing an additional £2.3 billion a year to expand and transform services in England, which will help 2 million more people to access mental health services by 2023/24.

Honorary Queen's Counsel nominations: deadline Monday 29 August 2022

The Ministry of Justice (MOJ) is inviting nominations for the award of Queen's Counsel Honoris Causa.

Nomination forms must be completed and returned to MOJ by 12pm on 29 August 2022.

To make a nomination, please [submit your nomination here](#)

QC Honoris Causa or Honorary QC

This is an honorary award unique to the legal profession. It is a dedicated opportunity, made by royal prerogative, to recognise those in the profession who have made a major contribution to, and impact on, the law of England and Wales outside the courtroom.

The award is not a working rank, and is separate to substantive QC appointments administered by Queen's Counsel Appointments. Where someone is eligible to apply for substantive QC in their role, we would not normally consider them for an Honorary QC award.

Please note that anyone nominated may be subject to criminal record checks with ACRO Criminal Records Office.

What is the award for?

The award is for:

A significant, positive impact either on the shape of the law of England and Wales, or on the profession. This is for work outside the courtroom.

This criterion can be interpreted broadly, either as:

- a major contribution to the development of the law of England and Wales (for example, by dedicated research, influencing case law/ legislation and promoting initiatives), or,
- to how it is advanced (for example, by positively impacting the shape of the profession).

What is most important is that nominations clearly evidence the significant, positive impact an individual's efforts have had.

It is not a long-service award. Honours may be awarded for a significant impact over a long period of time, but they may equally be awarded for such

an impact over a shorter period – it is the scale of impact that is important.

We are keen to recognise diversity within the profession, with awards that reflect the range of different legal careers that make up the profession. You can see examples of previous successful nominees by viewing their [case studies](#).

Examples of what these different contributions may look like

Influencing legislation

- Making an impact on the law by influencing legislation or case law (e.g. through outcome of research, creating awareness or campaigning, pro bono work or other advocacy outside the courtroom).

Social mobility and Diversity

- Making a considerable impact on the legal profession (e.g. through initiatives that have an impact on social mobility or diversity, and increase the competitiveness of the sector).

Innovation

- Making an impact through a standout achievement or through innovation (e.g. by breaking through into new territory, such as making an impact through work on Lawtech, innovation in legal education, or that promote UK legal services overseas).

Academic work

- Making an impact through outstanding academic work that makes a positive contribution to the law and/or legal system

Who is eligible?

- To be eligible for the award, the individual must be a qualified lawyer or legal academic.
- The nomination must be for achievement outside practice in the courts. In other words, an award would be made for non-advocacy work.
- The award is open to foreign qualified professionals. There is no residency requirement.

Examples of those eligible may include (but are not limited to):

- Solicitors without higher rights of audience
- Legal executives
- In-house lawyers, including Counsel
- Non-practising lawyers
- Legal academics

Holding a fee-paid judicial office in addition to normal practice would not exclude lawyers who meet the eligibility criteria above.

How are awards made?

The process is administered by Ministry of Justice (MOJ). Nominations are considered against the criterion by a panel of representatives from the legal profession, civil service, judiciary, and academia, which is chaired by MOJ.

The panel of representatives provide the Lord Chancellor with recommendations of appointable nominees. The Lord Chancellor, whose role is to ensure that the process has been carried out in a fair, open and transparent way, will then consider and decide the final recommendations. The recommendations are then referred to the Queen for agreement, who grants the awards under the royal prerogative.

How is the information about nominees used?

In order to assess suitability for the award and as part of the selection process, information about the nominees will be used to carry out:

- Cross-Whitehall checks to confirm whether the individual or their work may be known by, or of interest to, another government department
- Checks against nominees on the main honours system as per the eligibility criteria
- Evaluation by the selection panel of the individual's legal qualifications and evidence of their contribution and impact on the law of England and Wales
- Shortlisted nominees will undergo a criminal record check

Nominees from outside the legal profession

Where someone from outside the legal profession has made a significant impact on the law of England and Wales, or how it is advanced, they would not qualify for this award. We would welcome those nominations as part of the [main honours system](#).

Scotland and Northern Ireland

There is no exact equivalent in Scotland or Northern Ireland. However, this does not mean that achievements of a similar nature cannot be recognised in those jurisdictions. If you would like to nominate someone for an honour whose work is in Scotland or Northern Ireland, you can contact the [Scottish Government](#) or the [Honours Secretariat for Northern Ireland](#).

Nominees and recipients of national honours

Someone who has been honoured in the main honours system within the last two years, or who has been nominated for such an honour this year, would not be eligible to receive an Honorary QC award. Where someone was awarded an honour more than two years ago, the panel will consider the individual's contribution to and impact on the law since that honour was awarded.

How to make a nomination

Please [submit your nomination form](#) using our digital form.

If you are unable to use our digital form, or have any other questions, please get in touch on HonoraryQC@justice.gov.uk.

Frequently Asked Questions (FAQ's)

1. What is the process and timelines ?

These dates are provisional and subject to change:

- 27 June 2022: applications open
- 29 August 2022: applications close
- October 2022: Panel meet and shortlist nominees
- Early November 2022: ACRO criminal checks are conducted
- Late November 2022: Lord Chancellor makes final recommendations to the Her Majesty The Queen
- December 2022: successful nominees are informed
- March 2023: Ceremony awarding the appointment of new Honorary Queen's Counsel

2. Who can make a nomination?

Anyone can make a nomination. You do not need to have a legal background or reside in the UK.

3. Do I need to be a practising barrister or solicitor to be nominated?

No. You do not need to be practising, although you do need to be a qualified lawyer or legal academic to be eligible. The award is for achievements outside the court room

4. Can I make more than one nomination?

Yes. You may nominate as many people as you like, but please ensure that you submit separate nomination forms.

5. Is there a limit to the number of nominations for an individual?

No. An individual can be nominated by many people

6. Can I nominate a foreign national?

Yes. There are no nationality or residence requirements for the award.

7. In order to be considered for the award, do I need multiple nominations?

No. The scoring is not based on how many nominations an individual has received.

8. What happens if I miss the deadline to apply?

Unfortunately, we cannot consider any nomination past the deadline. We encourage you to submit your application when the next round of nominations open.

SLC introduces new feature to help customers avoid over-repayment

Press release

The Student Loans Company (SLC) has introduced a new feature to its Online Repayment Service (ORS) to make it easier for customers to avoid over-repayment.



In the final months of the loan term, customers are notified by SLC and encouraged to switch to Direct Debit repayment to ensure they don't make unnecessary over-repayments. As part of a range of improvements to the ORS, customers no longer have to call SLC directly to switch to the repayment method as they can update their preference using the new feature in their online account.

ORS was launched in July 2020 to make it easier for customers to check their balance or refund, keep their contact information up-to-date and manage the end of their loan options. Since launch, over 3.6 million customers have used the service.

Bernice McNaught, Executive Director for Repayments and Customer Compliance,

at SLC said: “SLC is committed to improving the customer experience, and our strategy is to ensure our services are supportive, intuitive, and trusted by customers. We have made a number of improvements for our repayment customers in recent years as we want our customers to be able to do more in their online accounts. This includes having essential information in the one place and being able to access a number of self-serve tools at their fingertips.

“This new feature is another welcome enhancement and will help our customers to take control of their end of loan repayments.”

Customers can log into their online account 24/7 at a time that suits them by visiting: <https://www.gov.uk/sign-in-to-manage-your-student-loan-balance>

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[Joint outcome statement: India-UK round four FTA negotiations](#)

News story

Round four of negotiations for a Free Trade Agreement between the Republic of India and the United Kingdom.



On 24 June 2022, the Republic of India and the United Kingdom concluded the fourth round of talks for an India-UK Free Trade Agreement (FTA).

Negotiation officials undertook these technical talks in a hybrid fashion – with some of the teams meeting in London and the majority of officials joining virtually.

For this round of negotiations, detailed draft treaty text was advanced across the majority of chapters. Technical experts from both sides came together for discussions in 71 separate sessions covering 20 policy areas.

The fifth round of negotiations is due to take place in July 2022 in New Delhi.

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[The data strategy: a blueprint for the evolution of a trustworthy data system?](#)

I believe that our ability to successfully achieve better things through data and digital hinges on the strength of the relationships that will deliver this change. And whether it's ICSs working together to innovate well, or organisations looking at how best to engage the public on data matters, understanding, trust and respect are central to these relationships. It is with this belief in mind that I read and considered the government's new data strategy, [Data Saves Lives](#) – asking to what degree the commitments it makes provide a blueprint for the evolution of a trustworthy data ecosystem, and whether it provides for all of the conditions that must be met in order to create an environment in which innovation can flourish.

I had [advised on an earlier draft](#) that the importance of public trust needed a greater emphasis, and so was pleased by the strong focus it was given in the published version, alongside the recognition that “The data we talk about is not an abstract thing: there is an individual, a person, a name behind each piece of data.” This is important. People need to know that the government understands just how unique this highly private information is – and that as such, commitments will be needed to demonstrate how confidentiality will be protected and respected. The data pact (or ‘charter’) it is proposing to co-author with the public will be a good start.

Also important was the government's admission that it made mistakes with the [General Practice Data for Research and Planning \(GPDPR\)](#) programme by taking people's trust for granted, and that it needed to do better to rebuild and strengthen that trust. The strategy outlines that to tackle this, it will:

- keep data safe and secure
- be open about how data is used
- ensure fair terms from data partnerships
- give the public a bigger say in how data is used
- improve the public's access to their own data

Maslow's ‘hierarchy of need’ is useful here. It is a concept from developmental psychology that describes the conditions needed for humans to reach their full potential. It is visualised as a layered pyramid: at the

bottom are our most basic requirements (food and shelter) with successive layers incorporating more complex emotional and social needs. I found it helpful to think about the data landscape in these terms. What are the conditions that must be satisfied before our health and care data ecosystem can reach full maturity in terms of its trustworthiness to patients and professionals alike? And does what the strategy is proposing sufficiently meet them?

I would suggest that in this parallel, those conditions are:

- legal compliance
- strong privacy protections
- a commitment to transparency
- establishing and demonstrating public benefit
- ensuring appropriate mechanisms for choice
- sharing power with the public

Legal compliance

At the most basic level, a data system must demonstrate legal compliance. However, whilst lawful data use is a necessary foundation, it is insufficient alone. Previous failed national data initiatives have been lawful. To earn trust, organisations need to do more than not break the law, as the final version of the data strategy implicitly recognises.

Strong privacy protections

All health and care data is collected within a relationship of trust. Maintaining confidentiality is essential for people to feel able to share information with those caring for them; the consequences of not doing so are great. Given this, the strategy's commitment to privacy enhancing technology is reassuring.

In particular, the shift towards data access in secure data environments (SDEs) – of which trusted research environments (TREs) are a subset – and away from routine disseminations is a significant development and a move that I strongly support. The ethical framework that underpins the use of the SDEs through the use of the [ONS's '5 safes'](#) is also key. For those who haven't read it, what Professor Ben Goldacre says about TREs in his [recent review](#) is very informative. It is important that the government gets the governance wrapper and accreditation framework right for SDEs so that standards and safeguards are consistent, and what is in place as the 'gold standard' in the national SDE is scalable and achievable elsewhere.

A commitment to transparency

We know that whilst privacy remains a key concern, it is not the only concern that people have. There is good evidence, including from empirical research during the pandemic, that how data is being used and why, and who is making decisions about it – and what motivates those decisions – are also questions that matter. I'd therefore place transparency as the next condition to be met. This includes good public engagement and dialogue – providing people

with clear, accessible information about who will be accessing their data and why, the safeguards that are in place and what choices they have about it. There should also be a commitment to working out in the open as all of these changes are implemented.

The strategy makes strong commitments in these areas. I was pleased to see pledges to make it clearer to people how and why data is being used, including the provision of information about the benefits and risks of use, the safeguards in place, and how people can opt out of sharing for purposes beyond than their own care if they choose. The plan for rebuilding public trust will be a pivotal deliverable that I am keen to get into the detail of. I have also been asked to feed into work on the data pact, which the strategy says will “set out how we will use health and care data and what the public has the right to expect”. As a product that will set the scene for the public in terms of their data, we need to get this right.

Establishing and demonstrating public benefit

Taking us to the next level is how a system ensures, evaluates, and demonstrates, the public benefit from data use. Society’s familiarity with the beneficial uses of data has improved thanks to its prevalence in conversations around the pandemic. However, this does not mean that an enduring trust can be presumed which grants a social licence for all future uses of data collected in providing care for other purposes that may benefit the public. Trust is context and use-case specific. The likely public benefit of any new data use needs to be established. This must include demonstrating credible, authentic engagement with potential risks and their mitigations, as well as the exciting opportunities from data use.

When it comes to public benefit, transparency remains key. There must be clarity about the role of third-party data access, including by profit-making commercial companies. The strategy speaks simply of ‘innovators’ which masks the complexity; it is important to be clear about who may benefit from any data use in addition to the public, whether that is a commercial company or an academic institution – and also why that may be necessary and justifiable. The system must be straight about the ‘who’ if it is to develop the maturity for more complex discussions about ‘how, when, what and why’ of fair data partnerships.

Also of note here is the reference in the strategy to the [Centre for Improving Data Collaboration’s](#) work on a value-sharing framework to support good data partnerships. I hope to see this framework evolve in a way that will support better conversations with the public about the value of data and what ‘fair’ terms for the NHS might look like in practice.

Ensuring appropriate mechanisms for choice

As public sector organisations and systems evolve and become more complex, with increasing ambitions to deliver public good, the rights, agency, and experiences of individuals – both the professionals within it and the public it serves – can get lost as the system strives to ‘deliver’. In this context, actively maintaining individual choice regarding how data about them is used

is an important ethical safeguard.

It was reassuring, therefore, to see opt-out, which was absent from the draft strategy, now included in it. I am looking forward to hearing more about, and getting involved in, the plans for ensuring that the opt-out landscape is simplified. Opt-out choices need to be clear, coherent, simple to action and – perhaps most importantly – authentic: we need to ensure that they are doing what people expect them to do. There is work to be done with the public to navigate the tension between providing for the common good (through more efficient and safe individual care, planning, research, and innovation) and establishing what people should have a right to determine for themselves regarding when and how their confidential data is used.

Sharing power with the public

Finally, I'd propose for any organisation or system to reach full maturity it needs to develop the capacity to be self-reflective about how power is exercised and experienced, both by those working within it and receiving its services. I was very struck by the repeated use of the word power in the data strategy. But what does a mature exercise of power look like? It is demonstrated by a system confident enough to genuinely engage, listen and respond to what it hears, and strong enough to think how power can be meaningfully shared. This has to involve independent scrutiny and challenge, and public involvement in decision-making.

I was therefore pleased to see the strategy commit to undertaking in-depth public engagement, including working with seldom-heard groups, to consider policy questions such as the delivery of SDEs and the future of opt-outs. I was also delighted to see the commitment to a statutory safe haven for health and care data in NHS England, where data access decisions will be subject to independent scrutiny, as well as the commitment to the sharing of decision-making power with the public in the strategy's draft guidelines for SDEs: "secure data environments must ensure that patients and the public are actively involved in the decision-making processes to build trust in how their data is used".

These are good examples of how systems can improve and strengthen trust by being open to challenge. There is much that can be learned here from the experience and expertise within existing independent bodies such as the Independent Group Advising on the Release of Data (IGARD) and the Confidentiality Advisory Group (CAG). If delivered well, these commitments will demonstrate system maturity in action: transforming words around power to meaningful deeds.

Some final thoughts

Some of the strategy's commitments have very ambitious delivery timescales, which I hope are achievable. As the strategy now transitions into delivery, much detail still needs to be worked through around many of the commitments. This includes the sizeable pledge to engage with the public to build trust. It is important to move at pace where this is practical and achievable, but some things will take time to get right, and I think working with the public,

and working out how best to involve and engage them, is one of those things. Equally, determining the nature and intent of any legislative changes concerning identifiable data will also be critical.

This is an exciting time to be NDG. My panel and I are hopeful for the future as outlined in the strategy, and we look forward to supporting all those working hard to improve health, care and treatment experience and outcomes through better use of one of our most valuable national assets: our health and care data.