

**Maria Caulfield MP**

Parliamentary Under-Secretary of State  
Minister for Women's Health and Mental Health  
Department for Health and Social Care



25 March 2024

By email: [Psmcaulfield@dhsc.gov.uk](mailto:Psmcaulfield@dhsc.gov.uk)

Dear Minister,

The limited progress in addressing the poor quality and effectiveness of eating disorder services is causing avoidable harm to patients who are being repeatedly failed by the system. In 2019, the Government promised to prioritise eating disorder services. This is a life-threatening issue and I am writing to ask that the Government takes urgent action to fulfil that promise.

PHSO's landmark report '[Ignoring the alarms: How NHS eating disorder services are failing patients](#)' was one of the first major investigation reports I published as Ombudsman back in 2017. Our investigation found a general lack of awareness among clinicians about eating disorders, a lack of eating disorder specialists, poor transition between child and adolescent care to adult care and poor co-ordination across different services. We made a series of recommendations to improve quality of care and promote learning from these failings.

I note some progress has been made in improving eating disorders services since the publication of my report. For this I put on record my sincere thanks to the important work of Professor Tim Kendall and Jess Griffiths, co-chairs of The Adult Eating Disorder Delivery Group and their colleagues. Despite this excellent work, the current system is not working and patient safety is paying the price. Eating disorder services have not been able to keep pace with increasing demand. Stigma around eating disorders and severe mental illness, more broadly, remains across society. The challenges in accessing primary care, the lack of funding for and understanding of eating disorders, including within the medical profession, create multiple barriers that prevent people accessing the help they need.

I welcome the recent announcement from NHS England regarding the establishment of the 'All-age Eating Disorder Clinical Reference Group' that will continue work still outstanding to deliver on PHSO's previous recommendations. I also welcome the commitments made in the NHS Long Term Plan around improving access and accessibility of eating disorder services for adults, children and young people. However, to avoid further tragedies and make sure people with an eating disorder receive the care they deserve, we need to see ambition turned into concrete action.



Above all, I am gravely concerned when I hear from campaigners and clinicians alike that palliative care pathways, instead of active treatment, are being offered to patients deemed too difficult to treat. Eating disorders are treatable, and those affected have the right to access services that focus on recovery.

In my *'Ignoring the alarms'* report, I recommended that the Department of Health and NHS England should review the existing quality and availability of adult eating disorder services to achieve parity with those offered for children and adolescents. Almost seven years on, I echo our call for Government to ensure there is parity of access and quality of eating disorder services for all age groups across the country. Timely and early access to the right support is key and so it is pivotal that the Department supports the long overdue rollout of waiting time standards for adults and that the health system is sufficiently resourced to deliver this.

As I come to the end of my tenure as Ombudsman, PHSO's Chief Executive, Rebecca Hilsenrath, will be continuing leadership of our work in this area and would welcome the opportunity to meet you to discuss plans for Government action.

Instead of ignoring the alarms, it is time that Government truly begins to listen to them.

Yours sincerely,

*Rob Behrens*

Rob Behrens CBE  
**Ombudsman and Chair**  
Parliamentary and Health Service Ombudsman



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