

MHB004 – Cyngor Abertawe

Senedd Cymru | Welsh Parliament

Bil arfaethedig – Datblygu'r Bil Safonau Gofal Iechyd Meddwl (Cymru) |
Proposed Development of the Mental Health Standards of Care (Wales) Bill

Ymateb gan: Prif Swyddog Iechyd Meddwl ac Anabledau Dysgu, Cyngor Abertawe | Evidence from: Mark Campisi, Principal Officer for Mental Health & Learning Disabilities - Swansea Council

Enshrining overarching principles in legislation

**Question 1: Do you think there is a need for this legislation?
Can you provide reasons for your answer.**

There may be a need for this legislation but should dovetail with the rest of the UK. The amendments to the MHA 83 in the UK have not been agreed. It would be best to enter into a joint agreement Nationally for this as it will cause further confusion for MH service throughout the UK as the MH Measure has done already.

Question 2: Do you agree or disagree with the overarching principles that the Bill seeks to enshrine?

Overall I disagree as the main issue of available therapeutic treatment would severely limit services without any consideration or resourcing of community services.

Specific changes to existing legislation

A. Nearest Relative and Nominated Person

Question 3: Do you agree or disagree with the proposal to replace the Nearest Relative (NR) provisions in the Mental Health Act 1983 with a new role of Nominated Person?

Can you provide reasons for your answer.

Yes, this is sensible as people can choose who they want to represent them as often family may not be the persons choice.

B. Changing the criteria for detention, ensuring the prospect for therapeutic benefit

Question 4: Do you agree or disagree with the proposal to change in the criteria for detention to ensure that people can only be detained if they pose a risk of serious harm either to themselves or to others?

Can you provide reasons for your answer.

No. The weight of evidence and the formula for deciding what was “serious” and a “risk” would pose practical problems. Unless there is a nationally agreed criteria for assessing the degree of risk then this would be impractical and pose an undue burden on professionals. Who decides on the seriousness of the risk. The referring agent or the receiving hospital?

Question 5: Do you agree or disagree with the proposal to change in the criteria that there must be reasonable prospect of therapeutic benefit to the patient?

Can you provide reasons for your answer.

No. There has generally been the principle that admission to hospital is for treatment and to prevent deterioration in someone’s condition and because of risk to public or patient. However, without resource to provide the best services, cash strapped Health Boards may take the opportunity to suggest that treatment is not available to prevent admission to already overcrowded wards. It is also the case that low and medium secure hospitals would struggle to evidence the therapeutic value of continued detention as many people remain resistant to treatment and therapeutic interventions and remain a risk

C. Remote (Virtual) assessment

Question 6: Do you agree or disagree with the proposal to introduce remote (virtual) assessment under ‘specific provisions’ relating to Second Opinion Appointed Doctors (SOADs), and Independent Mental Health Advocates (IMHA)?

Can you provide reasons for your answer.

Not under any circumstances. It is of vital importance that anyone assessing someone for initial detention and continued detention speak to the individual

personally. It is the principle of examining an individual face to face that I believe should be upheld. This does not mean via a screen.

D. Amendments to the Mental Health (Wales) Measure 2010

Question 7: Do you agree or disagree with the proposal to amend the Measure to ensure that there is no age limit upon those who can request a re-assessment of their mental health?

Can you provide reasons for your answer.

Yes I agree with this as age should not be a barrier to any request for health or social services.

Question 8: Do you agree or disagree with the proposal to amend the Measure to extend the ability to request a re-assessment to people specified by the patient?

Can you provide reasons for your answer.

YES I agree as in some instances people may need the help of an advocate.

General Views

Question 9: Do you have any views about how the impact the proposals would have across different population groups?

Children would be adversely affected by this as the availability of appropriate in patient facilities is very limited and could be used as a reason to decline admission. On the grounds that there were no beds as available therapeutic care. LGBTQ individuals may also be unfairly disadvantaged as the environments to accept such people into psychiatric care are lacking.

Question 10: Do you have any views about the impact the proposals would have on children's rights?

The right for children to be safe in hospital care would be potentially limited if availability was used as a criteria.

Question 11: Do you have any general views on the proposal, not covered by any of the previous questions contained in the consultation?

The alternatives to admission and treatment are not available in the community to accept and manage people safely who were acutely ill at present. Without

investment in community services which were well resourced and available to all then this would create a risk for many and be unsafe.
