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Response to	No voice unheard, no right ignored – a consultation for people with learning disabilities, autism and mental health conditions
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Q2. In making decisions on living arrangements (whether suitable accommodation or inpatient stays or both) LAs and NHS commissioners should have regard for factors which support inclusion in the community. This could include staying close to home, links with family and friends, opportunities for participation and least restriction. What do you think of this idea?

In relation to people with support needs, who might have offended or come in to contact with the criminal justice system, the MA supports the idea that both LA and NHS commissioners should have regard to factors which support inclusion in the community. It is recognised that there is a positive correlation between maintaining links with the community and preventing youth and adult re-offending.

Q4. What are your views on how this might impact on LAs and the NHS?

The MA acknowledges that there might be a cost implication for all partners; however, the total cost to the state should reduce through better management of an individual's needs and less duplication of resources. Poor living arrangements can often be a trigger for offending. The overall cost implication for state resources could therefore also be minimised by reducing offending.

Q5. We think that local authorities and the NHS could have to think about how to ensure enough community based support and treatment services (for example, for people with learning disability or autism most at risk of going into hospital). What do you think of this idea?

In relation to people with support needs, who might have offended or come in to contact with the criminal justice system, the MA would support any proposal which would promote community based support, sufficiently robust to enable the young person or adult to stay in the local community.

Q7. What is your view on the likely costs or impact of such a duty on the NHS? Local Authorities?

The MA acknowledges that there might be a cost implication for all partners, however, the total cost to the state should reduce through better management of an individual's needs and less duplication of resources.

Q8. What do you think about the idea to change the information which is required by Mental Health Act regulations applications for detention and supporting medical recommendations? This would mean that Approved Mental Health Professionals and doctors have to consider and record whether assessment and treatment could be provided without detention in hospital.

Additional information for decision makers is beneficial in ensuring fair consideration of all aspects, including whether assessment and treatment could be provided in the community.

Q10. We want to explore whether a person and their family/carer or other nominated person, should be given clear, easy read or accessible information by a named professional about their rights. What do you think of this idea?

It is important to have easy read information for individuals coming in to contact with the criminal justice system. It is also important nominated advocates have access to the information so they can support and advise these individuals. There should also be a requirement of a named professional to provide easy read information, to ensure it is clear whose responsibility it is.

Q36. What is your view on the proposal that children and young people aged under 18 detained under sections 135 or 136 should never be taken to police cells?

The MA would be wary of young people under 18 detained under section 135 or 136 being held in police cells due to lack of suitable accommodation. The utmost must be done to provide suitable alternative accommodation.

Q37. What is your view on the proposal that the use of police cells for people aged over 18 should be more limited in terms of frequency and length of time they can be detained?

The MA does not consider police cells to be a place of safety for people of any age with mental health problems detained under section 135 or 136.

Q38. What is your view on any other recommendations in the Review?

The MA supports the proposals outlined under 3.22.

These are:

- bring an end to the use of police cells for under 18s;
- significantly reduce the use of police custody as a place of safety for adults so that it becomes a genuinely exceptional event;
- encourage and enable innovation in using alternative places of safety;
- remove barriers preventing a person in mental health crisis from accessing help wherever they are while protecting human rights and civil liberties;
- encourage more rapid assessment and to ensure a person is not detained for longer than the minimum time necessary;
- reduce inappropriate use of section 136;
- improve the operation of section 135; and
- ensure that police, paramedics, AMHPs and health professionals have appropriate powers.

Q48. We want to explore whether providers of specialist hospital services and residential care services should be allowed or have a duty to share confidential patient information with case managers and other relevant commissioners directly involved in arranging a person's care in certain circumstances. What do you think of this idea?

The MA can see the benefit of this proposal. Where a patient of specialist hospital services or a resident of residential care services goes on to offend, the court needs to be reassured that the relevant agency is in possession of all facts when they provide a report to the court, for example when requesting an order such as a Mental Health Treatment Requirement. Currently there is some evidence of poor liaison between agencies and/or reluctance to share information. However a duty to share

confidential information has to be balanced against a patients' rights to privacy and to have their information protected.

Q50. Thinking about all the things described in the document: which would have the greatest impact and benefit on people's lives? (So we know what should be highest priority.)

Many of the people who do come into the court have learning disabilities and/or mental health issues and the MA would like to be confident that they can receive appropriate support which will hopefully minimise the chances of them having repeated contact with the criminal justice system.