



# Ideas for making the new Mental Health Bill better

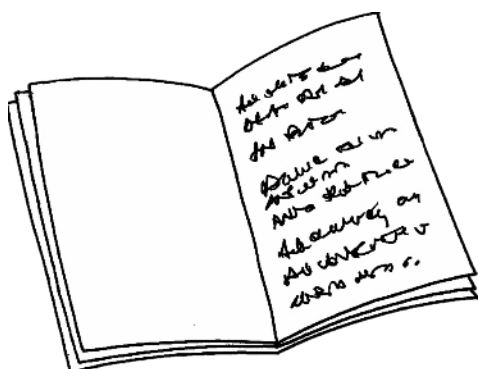
From Parliament's Joint Committee  
on the Mental Health Bill



An easy read version of:  
Report from the Joint Committee on the  
draft Mental Health Bill



This is an easy read version of the Committee's report on the new draft Mental Health Bill.



Mental Health laws use a lot of difficult words and this Bill has added some new ones. We have made a list of them with what they mean at the end of this report.

# Bold

When we have had to use them in this easy read we have put them in **bold**.



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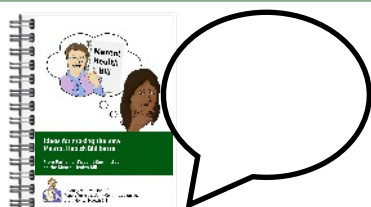
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# About us

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This work was being done by a Committee in Parliament made up of people from both the House of Commons and the House of Lords.



Parliament has groups or committees that look at different things the Government is doing.



They think about how the Government can change things to make them better.



You can find out more about the Committee from the link in more information at the end.



# What this report is about

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We looked at new changes the Government wants to make to the laws on Mental Health.



This was after a report looked at:

- why more people are being kept in hospital
- why there were more black people than we would expect being kept in hospital.



The easy read report can be seen here:  
**[tinyurl.com/MHA-changes](http://tinyurl.com/MHA-changes)**



The Government has made a new draft Mental Health Bill and the Committee were asked for any ideas we had to make it better. The easy read report can be seen here: [tinyurl.com/draft-mentalhealth](https://tinyurl.com/draft-mentalhealth)



## How we did this

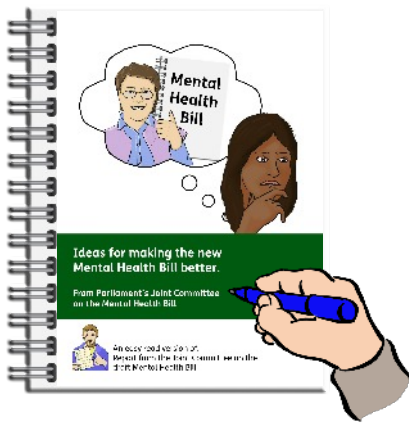
We had lots of people with good experience on the committee.



We also listened to lots of people about what they thought.



This included people with learning disabilities, mental health service users, professionals and organisations.



And then we wrote this report.

## What we said in the report

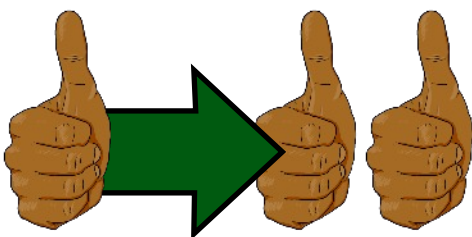


We thought the draft Mental Health Bill was good, especially the changes to:

- give people more choice about their care and

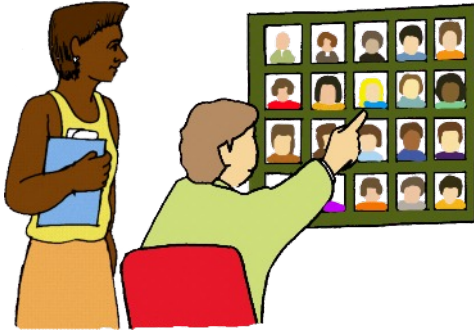


- checking how the law was used.



But we still looked at how these things could be done better as well as what other things could be done in the future.





We said there should be 4 main points through the whole Bill, these should be:

1. giving people more choice



2. giving people as much freedom as possible



3. giving people the help they need



4. giving people respect as an individuals.



## Treating people from black and ethnic minorities more fairly

We saw people were still being treated unfairly in things like **Community Treatment Orders** where black people were 11 times more likely to be given one.



We said 4 changes should be made:

1. the Bill must include respect for treating people equally and fairly in how things are done



2. each health organisation should have someone whose job it is to check if people are being treated unfairly and make plans to change that



3. most people should not be given **Community Treatment Orders**, for a small group of people **Community Treatment Orders** should be looked at to see if they are working



4. the NHS should also make plans so people are treated more fairly.



## Money and change

There needs to be enough money and staff to make these changes happen, to make community care better so people don't have to stay in hospital.



We said 2 changes should be made:

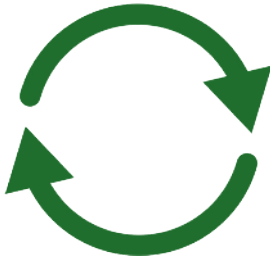
1. the Government should make a plan showing how much money and staff there will be to make the changes happen



2. have a new person that:
  - makes sure the changes are happening



- checks how well they are working



- helps change happen



- speaks up for patients and their families



- speaks up about how people with mental illness are thought about



- makes a plan to get people treated more fairly



- helps people complain



- looks at what else needs to change.



## Being made to stay in hospital

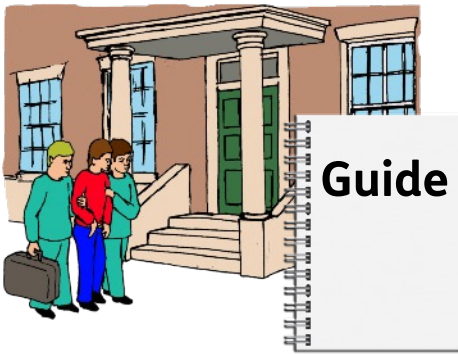
Before someone can be made to stay in hospital there needs to be more proof it will help them. But this shouldn't stop people getting help when needed.



These changes are only for people who are not **forensic patients**. These are people who are mental health patients but have been accused of breaking the law or have broken the law.



We said 2 changes should be made:



1. there should be a clear guide showing when someone can be made to stay in hospital that does not stop anyone from getting help when they need it.

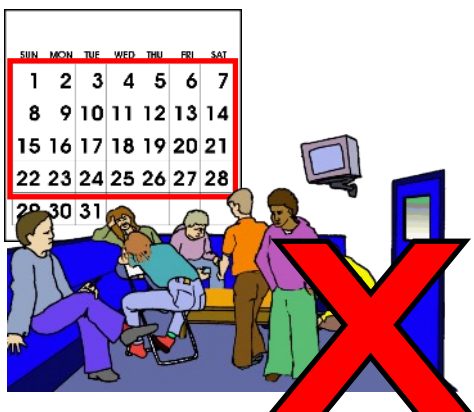


2. these changes should be the same for **forensic patients** as well.

## People with learning disabilities and autism



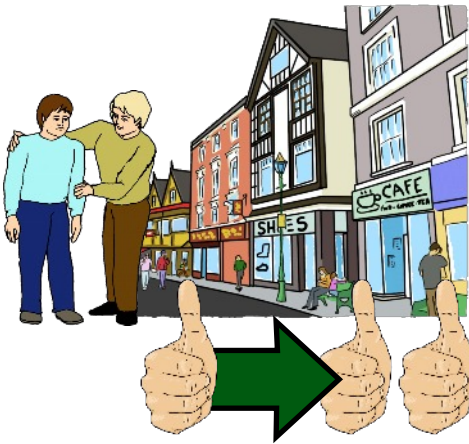
Too many people are still being kept for too long in places that are not right for them under the Mental Health Act.



The Government wants to change the Mental Health Act so people with learning disabilities or autistic people can't be kept in hospital for longer than 28 days unless they also have a mental illness. They will be looked after in the community instead.



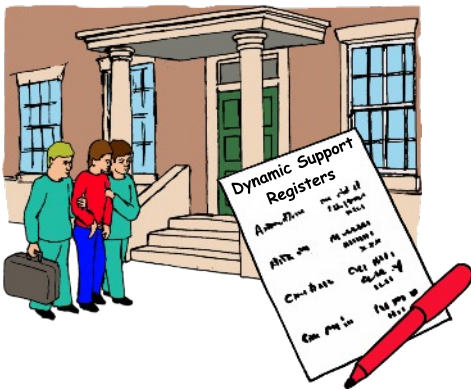
These changes are only for people who are not **forensic patients**.



We said 3 changes should be made:

1. To make sure people can live in the community we think that:
  - community care must get better before any changes are made to the Act.
2. To make things better in the community we think:
  - Councils and **Care Boards** should be made to do the things said in **Care (education) and Treatment Reviews**





- there are new lists in the Bill for people who are at risk of being taken into hospital. These should be called **Dynamic Support Registers** and people on these lists should get more support



- the Government should ask people with learning disabilities and autism what can be done to get their trust in this law

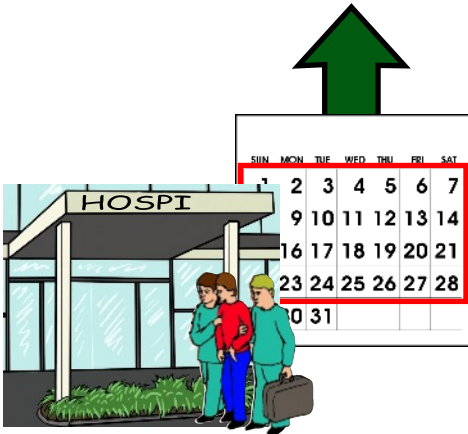


- Councils and **Care Boards** should have more power to pay for services for people on **Dynamic Support Registers**

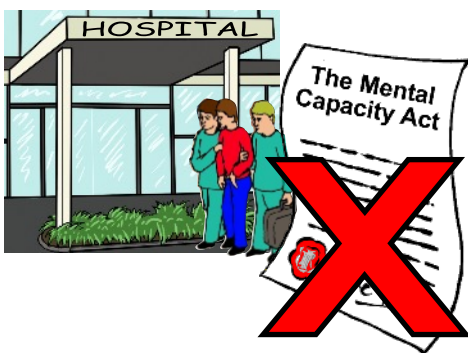


- the Government should look at making care and support carry on for more people after they have left hospital.

3. We worried that people might be kept in hospitals for a long time in other ways:



- for a few people who have more complicated problems, they may need to be kept in a hospital for longer than 28 days, but this should be decided by a tribunal who know about learning disabilities or autism



- the **Mental Capacity Act** could be used to keep people in hospital for longer, we said it should not be used to do this



- because these changes aren't the same for **forensic patients**, we were worried people could be treated as criminals and kept in hospital for longer. We said the change should be the same for **forensic patients** so this doesn't happen.

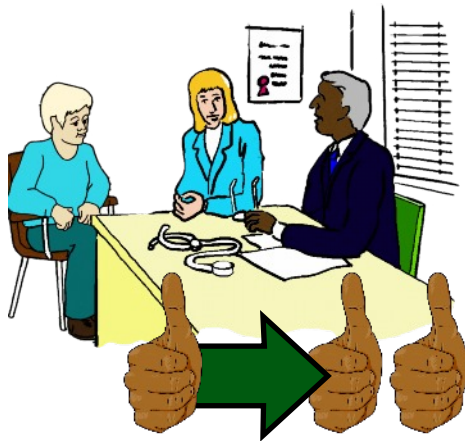




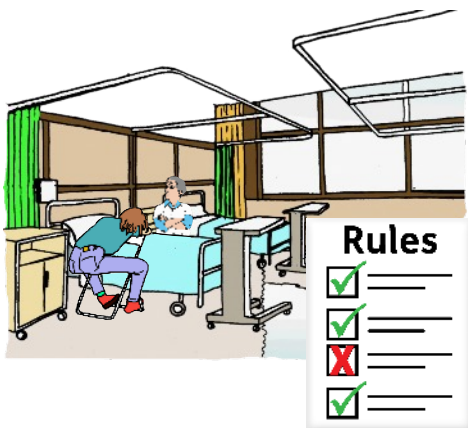
## Children and young people

This new law has the chance to make children's rights and protections stronger.

We said 2 changes should be made:



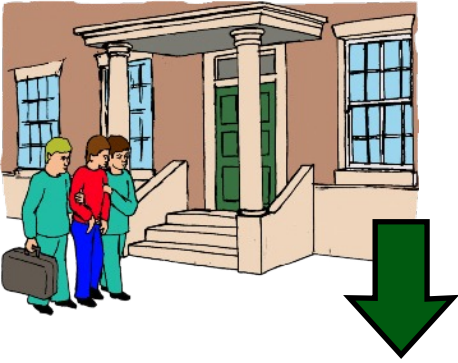
1. the Bill gives people more choices, but children can't make these choices unless the doctors think they understand what it means. The test doctors use to decide whether children can understand isn't very clear. The Government should make a better test



2. there should be stronger rules to stop children being kept in adult wards or sent far away from their families.



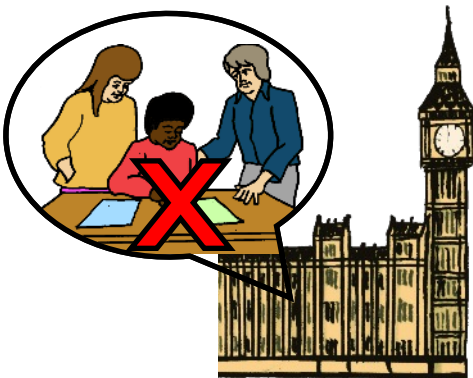
## Having choice



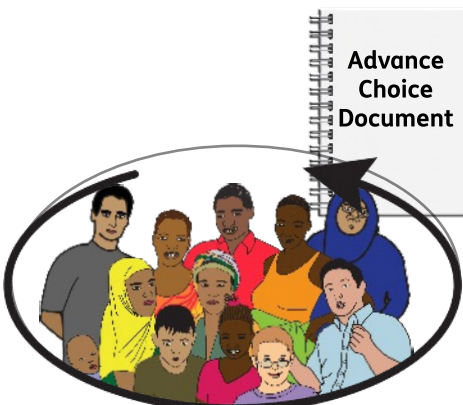
We know having more choice about care and treatment can lower the need to take people into hospital and make things fairer for everyone too.



We like the idea that people have to have **Care and Treatment plans**. We also like that people can choose the person who can make some decisions for them when they can't.



But the Government said no to making a law that everyone can make choices about how they would like to be treated in the future.



We said 2 changes should be made:

1. every patient should have the right to make an **Advance Choice Document** with support if needed



2. the Government should think more about how children will be able to choose people to make their decisions safely.



## Advocacy

The new Bill allows all mental health patients in hospital to have an **Independent Mental Health Advocate** if they want one.

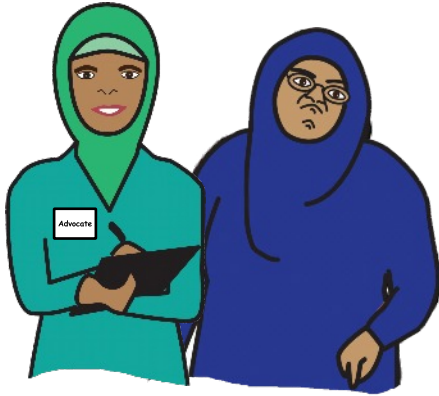


The Government thought about having advocates who are from the same background as you but didn't include this in the Bill.

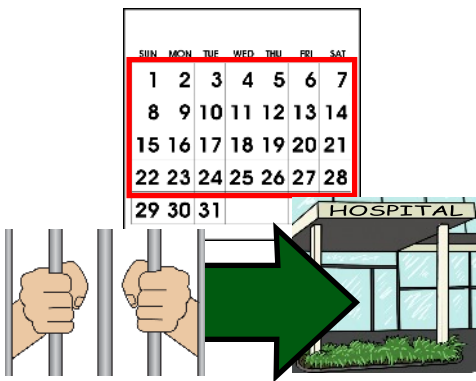


We said 2 changes should be made:

1. everyone who can make this decision themselves should be asked if they want an advocate

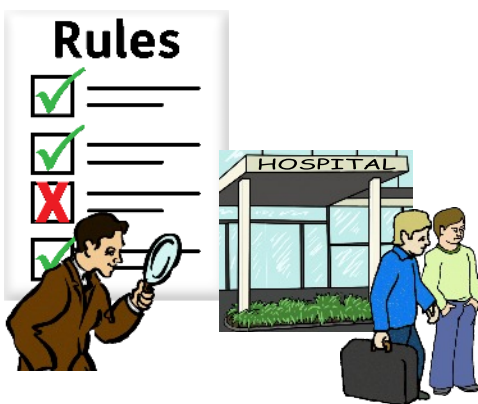


2. people should have a right to have an advocate from the same background as them.



## Forensic patients

The new Bill says people should be moved from prison to hospital in 28 days or less, and prisons and police cells should not be used as **places of safety** anymore. We agreed.

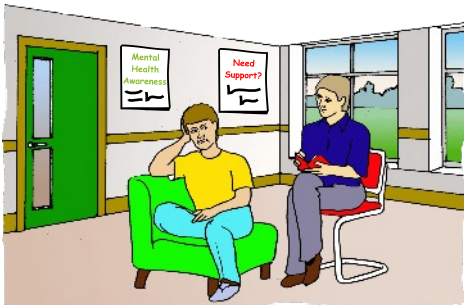


The Bill has new rules for some **forensic patients** to let them leave hospital but without all their freedoms. We said that these rules need to be closely checked over the next 3 years and stopped if they are not being used correctly.



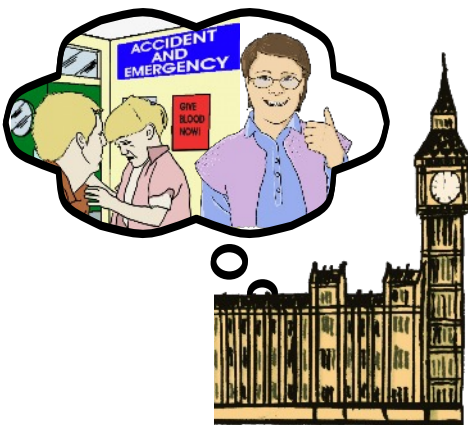
## Emergencies

There have been problems supporting people with their mental health when they go to A&E in emergencies.



We said:

1. there should be more places of safety and mental health support for people going to A&E



2. the Government should think more about how they can keep people safe in A&E when needed.

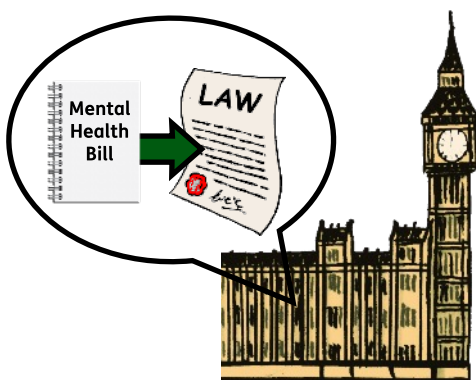
# What happens next



This report has now been sent to Government and our work on this committee is finished.



The Government has to say what they think about our report and what changes they will make to the Bill in 2 months time.



It is up to the Government to decide whether the Bill goes on to the next steps to become law.



# For more information not in easy read

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You can read the draft Mental Health Bill here:

**[tinyurl.com/draft-mental-Health-bill-2022](https://tinyurl.com/draft-mental-Health-bill-2022)**



The House of Commons Library briefing note here:

**[tinyurl.com/mental-health-act-reform](https://tinyurl.com/mental-health-act-reform)**



The Joint Committee on the draft Mental Health Bill here:

**[tinyurl.com/draft-mental-health-bill](https://tinyurl.com/draft-mental-health-bill)**

# What the words mean

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Mental Health laws use a lot of difficult words. This Bill has added some new words. We have made a list of new and old ones and what they mean below.

**Advance Choice Documents (ACDs)** – a new idea that allows patients to say what they want about care and treatment when they are well. People can also say who they want to see and who to look after their money.

**Care and Treatment Plans** – a new idea for some patients in England. Plans should show people's needs and how they will be met.

**Care (education) and Treatment Reviews** – a meeting to see how an autistic person or someone with learning disabilities is being cared for so they don't need to be in hospital.

**Code of Practice** – rules for professionals to follow about giving good and safe care.

**Community Treatment Orders (CTOs)** – when a patient leaves hospital they might be given a CTO. This means they can go home if they follow certain rules like take medicines.

**Conditional Discharge** – when a patient who had broken the law leaves hospital they might have a Conditional Discharge. This means they can go home if they follow certain rules.

**Conditional Discharge that amounts to a Deprivation of Liberty** – when a Conditional Discharge includes rules that stop your freedoms in some way to keep you or others safe.

**Culturally Appropriate Advocacy** – an advocate from the same background as you.

**Forensic Patients** – people who are mental health patients but have been accused of breaking the law or have broken the law.

**Dynamic Support Registers** – see risk registers

**Independent Mental Health Advocate (IMHA)** – an advocate for someone kept in hospital.

**The Independent Review** – a Government review in 2018 looking into why more people are being kept in hospital.

**Integrated Care Board (or ICB)** – and NHS organisation that plans services.

**Mental Capacity Act (MCA)** – a law on what to do if someone can't make their own decisions.

**Mental Health Act (MHA)** – a law on the care and treatment of people with mental health illness.

**Mental Health Tribunal (MHT)** – a group that people being kept in hospital can ask if they want to go home or have changes in their treatment.

**Nominated Person (NP)** – a new name for nearest relative. The NP has to be asked about certain changes to care and treatment.

**Place of Safety** – somewhere people can be taken by a police officer when in a mental health emergency where they can see a doctor.

**Part II (civil) of the MHA** – a part of the law for people who are kept in hospital but have not broken the law.

**Part III (forensic) of the MHA** – a part of the law for people kept in hospital as forensic patients.

**Risk register** – a list of people who are at risk of being taken into hospital to help them get support. We have said should be called Dynamic Support Registers.

**Secretary of State** – the Government Minister in charge of a certain area like Health.

**Section 3 for the MHA** – an order that is needed to keep someone in hospital for treatment.

**Section 117 (aftercare)** – care and support for people after leaving hospital.

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making EasyRead information.



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