MENTAL HEALTH (SCOTLAND) BILL; FINANCIAL MEMORANDUM

SUBMISSION FROM ABERDEEN CITY COUNCIL

Consultation

Did you take part in any consultation exercise preceding the Bill and, if so, did you comment on the financial assumptions made?

1. Aberdeen City Councils Social Care and Wellbeing service did return a response to the consultation on the Draft Bill in February/March 2014. We commented that the proposed amendments would increase the workload of an already stretched MHO service. The additional duties being around the proposed provisions in relation to Named Persons, reports in relation to extensions, prisoners on Assessment Orders being moved to other hospitals and the travelling time involved for MHOs. Costs of training in the new provisions was also highlighted along with the need for updated local information leaflets for service providers and so on.

If applicable, do you believe your comments on the financial assumptions have been accurately reflected in the FM?

2. The Bill as it has been introduced differs from the Draft we commented on and it now places fewer duties on MHOs. Even taking this into account however the Financial Memorandum seriously underestimates the numbers of reports that will be required under S87A and S153A. The Financial Memorandum indeed contains inaccurate and misleading information about the legislation – both the 2003 Act and the Bill.

Did you have sufficient time to contribute to the consultation exercise?

3. If this refers to the consultation on the Draft Bill then yes, sufficient time was given. In relation to the Financial Memorandum and the Bill as introduced then no, there been very little time available. The consultation and the response to the Financial Memorandum has produced a fair degree of confusion.

Costs

If the Bill has any financial implications for your organisation, do you believe that they have been accurately reflected in the FM? If not, please provide details.

4. The Bill does have financial implications for our organisation which have not been accurately reflected in the Financial Memorandum. Reports under S87A and S153A – the FM refers only to S101 (2) (a) and S165 (2) (a) whereas it is clear from the Bill that S101 (2) (b) and S165 (2) (b) are also included. This has a significant impact on the estimated number of reports which will be required – instead of 20 it will be more like 600 across Scotland in any given year.

Do you consider that the estimated costs and savings set out in the FM are reasonable and accurate?

5. The estimated costs on local authorities are not accurate and are significantly underestimated.
If applicable, are you content that your organisation can meet any financial costs that it might incur as a result of the Bill? If not, how do you think these costs should be met?

6. The Bill will require a significant increase in the numbers of statutory reports from MHOs both as a result of S87A and S153A. Given that the current numbers of MHOs are currently failing to meet their statutory duties in relation to Social Circumstances Reports it is reasonable to surmise that an increase in the number of MHOs will be required. The training, recruitment and retention of MHOs within local authorities also requires to be reviewed. The costs of the above should be met by the Scottish Government as implementers of the legislation.

Does the FM accurately reflect the margins of uncertainty associated with the Bill’s estimated costs and with the timescales over which they would be expected to arise?

7. No comment.

Wider Issues

Do you believe that the FM reasonably captures any costs associated with the Bill? If not, which other costs might be incurred and by whom?

8. I think it is reasonable to expect that there will be increased costs associated with the need for MHOs to give consent to Transfer for Treatment Orders.

The proposals relating to application to the Tribunal for extension of Suspension from 200 to 300 days will result in the Tribunal calling for MHO reports to accompany such applications. The Tribunal will require to have relevant information to hand as to the reasons for such extensions as opposed to variations.

Requiring MHOs to send their report to the MHTS, the patient, their Named Person, RMO and the MWC potentially could incur costs particularly where short notice of intention to extend is given by the RMO. Special delivery or even courier costs may be necessary.

Do you believe that there may be future costs associated with the Bill, for example through subordinate legislation? If so, is it possible to quantify these costs?

9. As above, it is not possible to quantify these costs at present.