The College of Occupational Therapists

Mental Health (Scotland) Bill

The College of Occupational Therapists (COT) is pleased to provide written evidence for the Bill. The College of Occupational Therapists is the professional body for occupational therapists and represents over 28,000 occupational therapists, support workers and students from across the United Kingdom, of whom around 3000 are in Scotland. Occupational therapists work in the NHS, Local Authority social care services, housing, schools, prisons, voluntary and independent sectors, and vocational and employment rehabilitation services.

Occupational therapists are regulated by the Health and Care Professions Council, and work with people of all ages with a wide range of occupational problems resulting from physical, mental, social or developmental difficulties.

The philosophy of occupational therapy is founded on the concept that occupation is essential to human existence and good health and wellbeing. Occupation includes all the things that people do or participate in. For example, caring for themselves and others, working, learning, playing and interacting with others. Being deprived of or having limited access to occupation can affect physical and psychological health.

In general COT supports the proposed amendments all of which are reasonable and which should lead to genuine improvements for people who use services including their families and carers. We support the overarching objective of the Bill to help people with mental disorder access effective treatment quickly and easily. We believe this is the correct policy direction and occupational therapists have been working towards ensuring that their services are accessible particularly in order to address health inequalities.

COT believes that the proposed amendments in Part 1 of the Bill are sensible and will enhance this section of the legislation. We also believe that the minor, technical changes set out in Part 2 of the Bill regarding those involved in criminal proceedings are relevant and required. In addition the victim notification scheme in Part 3 is timely and will address current difficulties in this area. COT feels that the McManus Report has been adequately addressed.

However, while COT is in general agreement with the direction of the amendments we feel an opportunity has been lost by not considering how extending professional roles could also contribute to ensuring rapid access to effective interventions. During the 2009 Consultation on the Review of the Mental Health (Care and Treatment) Scotland Act 2003, COT asserted that extending traditional roles under the Act to involve a wider group of professionals would be another method to enhance the efficiency of the Act and improve service user experience. This point was not addressed at the time and has also been neglected in this call for evidence.
In England and Wales, occupational therapists, as well as nurses and psychologists are now able to take on roles under the Mental Health Act (1983) previously held by social workers and doctors. These changes to mental health legislation have ensured that we can deliver modern mental health services fit for the 21st century, staffed by healthcare professionals that are employed not because of their job title but because they are competent practitioners who are the best people for the job. Cross boundary working of this nature has been supported by service user and carer groups and the professional colleges.

The Draft Mental Capacity Bill (Northern Ireland) will amalgamate both capacity and mental health legislation and is currently out for consultation. It will include a clause which will allow for role extension for professionals at a future date. In part, this is an acknowledgment that workforce predictions indicate a shortfall due to retirement of certain professional groups with statutory roles under mental health legislation.

COT would like to see a similar clause inserted into the Mental Health (Care and Treatment) Scotland Act 2003 which would allow for professional role extension at a future date as the need arises. This pre-emptive action would ensure that Scotland’s mental health services are primed to be able to continue to offer timely access to effective treatment as workforce and population demographics change.

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