1. Do you agree with the general policy direction set by the Bill?

Yes. We support the policy direction set out in the Bill. However as the Bill proposes further increases to the existing duties and responsibilities of staff this needs to be considered within the context of the existing workforce and workload capacity. This will have potential resource implications that need to be addressed.

2. Do you have any comments on specific proposals regarding amendments to the Mental Health (Care and Treatment) Scotland Act 2003 as set out in Part 1 of the Bill?

The proposed amendments to the Advance Statement are welcomed. Clarity around the timescales, evaluations and Health Board processes to inform the Mental Welfare Commission would be useful, especially in noting the future role of Health and Social Partnerships.

There are also questions around the need for 24 hour accessibility to the Advance Statement for those who may require access. This may require additional systems infrastructure.

Further consideration should be given to the expansion of the proposed Advance Statement register to incorporate a Named Person Register.

The proposal to extend Nurses holding power from 2 to 3 hours to enable an informal patient to be detained for the purposes of enabling medical practitioner examinations irrespective of whether a doctor is immediately available or not was viewed positively.

It was noted however that Nurses should notify both the RMO and the MHO at the start of the holding power to facilitate attendance at the earliest opportunity.

The proposal to extend cross border transfer to include patients from outwith the UK from other EU member states was welcomed but would require further guidance.

3. Do you have any comments on the provisions in Part 2 of the Bill on criminal cases?

We note the continued underprovision of female, adolescent and low secure services. We hope that the spread of appeals against security in the medium secure estate will lead to development of low secure services.
4. Do you have any comments to make on Part 3 of the Bill and the introduction of a victim notification scheme for mentally disordered offenders?

The proposal to extend the Criminal Justice Victim Notification Scheme to the victims or their relatives of mentally disordered offenders is welcomed although will require clear guidance on definitions, entry and exit points, roles, responsibilities, boundaries, accountabilities and any inconsistencies in applicability addressed.

Is there anything from the McManus Report that’s not been addressed in the Bill and that you consider merits inclusion in primary legislation? If so, please set out why.

It was generally agreed that the proposals were positive in most areas although, there were concerns highlighted that certain proposals could potentially be discriminatory to particular care groups such as those with a learning disability, those with capacity issues and mentally disordered offenders in some instances.

We would welcome the removal of (Care and Treatment) from the name of the Mental Health Act Scotland 2003 as this focus on care and treatment is adequately enshrined in the Act without the need for it to be in the title.

NHS Forth Valley
August 2014