MHA White Paper Consultation: People with a learning disability and autistic people

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Four Principles of the proposed reforms to MHA

- Choice and autonomy ensuring service-users' views and choices are respected
- Least restriction ensuring the Act's powers are used in the least restrictive way
- Therapeutic Benefit ensuring patients are supported to get better, so they can be discharged from the Act
- The Person as an Individual ensuring patients are viewed and treated as rounded individuals

Proposed Reforms

- For the purposes of the act we do not consider autism or a learning disability to be mental disorders warranting compulsory treatment under section 3
- The proposed revisions would allow for the detention of people with learning disability and autistic people for assessment, under section 2, of the Mental Health Act, when their behaviour is so distressed that there is a substantial risk of significant harm to self or others (as for all detentions)

Proposed reforms

- The assessment process under section 2 should seek to identify the driver of this behaviour, and whether a mental health condition, physical health condition, response to environmental or life change
- If it is identified that a mental health condition is the driver, there may be continued justification for detention under the MHA, and the patient might in such cases follow a treatment pathway under section 3 for the mental health condition.

Proposed reforms

Where the driver of this behaviour is not considered to be a mental health condition, for example due to an unmet support need, unmet social or emotional need, or an unmet physical health need (including untreated pain), grounds for a detention under the MHA would no longer be justified and the detention should cease.

Consultation Questions

- Do you agree or disagree with the proposed reforms to the way the Mental Health Act applies to people with a learning disability and autistic people?
- Do you agree or disagree that the proposed reforms provide adequate safeguards for people with a learning disability and autistic people when they do not have a co-occurring mental health condition?
- Do you expect that there would be unintended consequences (negative or positive)

Care (Education) Treatment Review

Proposal: a statutory requirement on the RC to consider the findings and recommendations of C(E)TRs in the patient's care and treatment plan

Deviation from the recommendations should be justified and explained by the RC

Community services for people with a learning disability and autistic people

- Proposal: new duties on local authorities and CCGs to ensure an <u>adequate</u> supply of community services for people with a learning disability and autistic people with the intention of reducing the use of and need for mental health inpatient services.
- Pooled Budgets
- Local 'At Risk' Registers

Intellectual Disability Compulsory Care and Rehabilitation (IDCCR) Act 2003:New Zealand

- Provisions of compulsory care and rehabilitation to individuals with an ID who had been charged with, or convicted of an imprisonable offence.
- Two categories of care:
 - A Special care recipient must receive care and rehabilitation in a secure facility so effectively a hospital
 - A Care recipient who can receive care in a secure facility or in a supervised setting
- Regional Community Forensic ID teams of nursing, OT, psychology and psychiatry input were set up

Services for Adults with Intellectual Disability in Aotearoa New Zealand. McCarthy J & Duff M. (2019). British Journal of Psychiatry International, 16(3), 71-73.