

Legislation Committee 3

LC3(3)-07-10 Paper 3

Proposed Mental Health (Wales) Measure

Written Evidence Submitted By Royal College of Nursing

Thank-you for the opportunity to respond to the proposed Mental Health Measure. The Royal College of Nursing was a strong supporter of the original Mental Health Legislation Competence Order and we welcome the development of this Measure.

We have accompanied this written evidence with our Get it Right Briefing on Mental Health. This sets out our views on the key priority areas in mental health and will provide a policy context to the views below.

Consultation Questions:

1. Is there a need for a proposed Measure to deliver the following aims:

providing local primary mental health services at an earlier stage for individuals who are experiencing mental health problems to reduce the risk of further decline in mental health, and in some cases, reduce the need for inpatient treatment and compulsory detention;

ensure that all individuals accepted into secondary mental health services in Wales have a dedicated care coordinator and receive a care and treatment plan, and that service users previously discharged from secondary mental health services have access to those services when they believe their mental health may be deteriorating;

extending mental health advocacy provision beyond current arrangements?

Yes. The Royal College of Nursing believes there is a need to expand mental health services in primary care, increase access and care coordination in secondary care and develop advocacy arrangements. These steps will improve patient care.

How will the proposed Measure change existing arrangements, and what impact will such changes have?

Are the sections of the proposed Measure appropriate in terms of achieving the stated aims?

In considering this question, respondents may wish to consider the nature of the provisions in the proposed Measure that:

Provide that there will be local primary case mental health services throughout Wales delivered by local health boards and local authorities working in partnership (part 1, sections 1-10)

This is clearly a welcome development and will support the delivery of mental health services in non-stigmatising settings. We would welcome clarification about how a growing expectation of the receipt of psychological services will be met. Psychological skills within the workforce are currently under utilised.

Provide for care and treatment plan for individuals receiving secondary mental health care (part 2, sections 11-17)

This is an area of consistent service user and carer concern. The review of the Care Programme Approach in Wales revealed a disappointing level of compliance in services. It is clearly essential for there to be clearly planned care delivered in a collaborative manner. This will require a "step change" in approaches to service user involvement and the support and development of staff to deliver.

Provide an entitlement to assessment by the providers of secondary mental health services for previous service users in particular circumstances (part 3, sections 18-28)

This is perhaps the boldest change, circumventing traditional patterns of referral and empowering service users to re-access the services they need. This clearly has implications for the secondary services which will require capacity to screen and assess referrals that would normally be handled by GPs.

Make provision in relation to Independent Mental Health Advocacy schemes in respect of patients subject to the compulsory powers of the Mental Health Act 1983, and 'informal patients' (part 4, sections 29-37).

This expansion of advocacy entitlement and access will require investment in both support and development of advocates specifically trained and educated for this complex field. .

What are the potential barriers to implementing the provisions of the proposed Measure (if any) and does the proposed Measure take account of them?

Insufficient numbers of healthcare professionals employed to provide an appropriate service are causing unacceptable delays in treatment for patients in Wales. This lack of staffing is not entirely due to recruitment difficulties. In many cases LHBs have not created a sufficient number of posts to respond to patient need. The Royal College of Nursing calls for a clear workforce planning strategy for mental health nurses in Wales, that will meet the future mental health needs of the people of Wales, be they children or adults.

What are the financial implications of the proposed Measure for organisations, if any? In answering this question you may wish to

consider Part 2 of the Explanatory Memorandum (the Regulatory Impact Assessment), which estimates the costs and benefits of implementation of the proposed Measure.

LHBs will have to make significant financial investment in their workforce to develop the services envisaged by this Measure.

I hope you find this evidence useful and we look forward to our evidence session on the 4th May.

Should you have any queries please do not hesitate to contact us.

Kind regards
Yours sincerely

Tina Donnelly
Director RCN Wales

About the royal College of Nursing (RCN)

The RCN is the world's largest professional union of nurses, representing 400,000 nurses, midwives, specialist community public health nurses, health care support workers and nursing students, including over 23,000 members in Wales. The majority of RCN members work in the NHS with around a quarter working in the independent sector. The RCN works locally, nationally and internationally to promote standards of care and the interests of patients and nurses, and of nursing as a profession. The RCN is a UK-wide organisation, with its own National Boards for Wales, Scotland and Northern Ireland. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing.

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.