

MHB022 – Public Services Ombudsman for Wales

Senedd Cymru | Welsh Parliament

Bil arfaethedig – Datblygu'r Bil Safonau Gofal Iechyd Meddwl (Cymru) |
Proposed Development of the Mental Health Standards of Care (Wales) Bill

Ymateb gan: Tanya Nash, Pennaeth Polisi Dros Dro, Ombwdsmon
Gwasanaethau Cyhoeddus Cymru | Evidence from: Tanya Nash, Acting Head of
Policy, Public Services Ombudsman for Wales

General comments

Thank you for the opportunity to respond to this consultation.

I will respond in more detail to the specific proposals when the white paper is published. However, I am generally supportive of the overall purpose the Mental Health Standards of Care Bill is seeking to achieve where patients are more empowered, have more choice and influence over their treatment and receive the dignity and respect they deserve, where this lead to less injustice and maladministration.

The four proposed principles appear to be in line with the Articles of Human Rights and the established FREDA human rights principles of fairness, respect, equality, dignity and autonomy, that are adopted and promoted across a range of public and health care settings. In delivering justice for people in Wales, we utilise these principles daily when investigating complaints. They show us that human rights and equality issues are often inseparable from people who are being treated unfairly.

The four proposed principles should seek to enhance these established values and not add further complexity to the already difficult pathways for people who are often the most vulnerable.

I thought I would share some examples from our case work to illustrate the types of injustice people with mental health conditions face.

[Hywel Dda Health Board 202002558](#)

We found that Hywel Dda Health Board failed to take steps to meet the clinical needs of Mr C following the abrupt closure of a psychology service, or put a plan in place to meet those needs. Mr C's main carer, Ms B, was left without sufficient

support to manage his challenging behaviours. The communication with Ms B was inadequate and left her uninformed.

[Gwynedd Council, Betsi Cadwaladr University Health Board and Cartrefi Cymru – 201806533 201806536 201806537](#)

Mr N suffered from drug-induced psychosis and acquired brain injury. He received a package of care funded by Gwynedd Council and Betsi Cadwaladr University Health Board which was provided by Cartrefi Cymru. Sadly, Mr N choked while eating alone in his bedroom. Following a complaint from Mr N's mother, Mrs M, that failings in communication resulted in Cartrefi Cymru not receiving risk assessments and care plans for Mr N, we found no documentation relating to the awarding of the contract, the specific terms relating to Mr N and the responsibilities of the parties involved.

[Cardiff and Vale University Health Board – 201701616](#)

After being detained under the Mental Health Act in Wales, Ms A was transferred to a secure hospital in England. She agreed to remain at the hospital voluntarily after her discharge from detention, until aftercare and supported accommodation was arranged for her. She remained at the hospital in a locked rehabilitation ward for nearly a year after her discharge from detention because of a failure of the local Community Mental Health Team to accept the referral from the Welsh Health Board. Our recommendations included the need for cross-border health guidance and an audit by the Health Board to ensure others were not similarly disadvantaged.
