

# **The Mental Health Act: A Guide**

## **A guide to The Mental Health Act**

There are two Mental Health Acts (MHA) the first was written in 1983 and a later revision with amendments to the original Act was drafted in 2007 which affected six key areas of the original document including : definitions of mental disorder, treatment test, supervised community treatment, safeguards, roles of new responsible professionals and reducing time limits for some mental health patients in appealing to the Mental Health Review Tribunal . You can read the Mental Health Act 2007 by [clicking here](#) The majority of individuals receiving treatment in hospitals or Mental Health Services are there on an informal basis, for example they have agreed to come in and receive treatment and it is their decision to do so. These people are called informal patients or voluntary patients.

However there are also a number of patients who are admitted without their agreement, this is because they have been sectioned (or detained) under the Mental Health Act (1983) and are therefore classed as a formal patient. If you or a family member has been admitted to hospital as a formal patient you are not free to leave and will lose some of your other rights which may be available to informal patients.

### **How does it work?**

The MHA gives approved mental health professionals (AMHP's) the power to make an application to admit you to hospital under a section of the act, if they consider it necessary. They will also consider the risk your illness poses to yourself and others, and look at how treatment may help your condition. Your nearest relative also has the right to apply for you to be detained under the Act, but for practical reasons it's the AMHP that usually makes the application. If your AMHP is making the application, they must consult your nearest relative.

A relative can object to the application for detainment if your AMHP is detaining you under section 2 of the Act, but they cannot stop the section going ahead. It is worth familiarising yourself with the code sections. Please [click here](#).

### **What happens once I am detained?**

Usually two doctors will examine and assess you – not necessarily at the same time. Following their assessment they will make recommendations to ascertain your suitability in meeting the criteria for the section. You will then remain in hospital or an appropriate setting for as long as your section lasts, and will receive ongoing treatment from a team of skilled and trained healthcare professionals.

## Your Treatment

Firstly it is important to remember that you can be treated with medication without your consent for 3 months from the date of your detention if you are under certain sections of the Act. However if you are still unhappy to consent after this time the commissioning bodies (responsible for finding the right healthcare for you) must gain recommendation from a second opinion appointed doctor.

## Our Services

Our Mental Health Services offer a wide breadth of patient services ranging from locked to medium secure and our patient mix are both formal and informally admitted to our hospitals and specialist centres.

Within our adult mental health services, we feel strongly that patients have a right to be valued and cared for in safe, therapeutic environments whilst receiving the professional, clinical care they require.

Our services encompass different 'levels' of security which allow the patient's very specific, and often complex needs to be met in a mental health setting that is appropriate for their needs and which respects the care and safety of all individuals on that site. This is determined at the patient's initial assessment by a clinician and a risk assessment would also be carried out at this stage to see if the patient is a risk to themselves or others. Some patients may be detained under the mental health act, others may not, and this also determines the level of security the patient will require.

We have 5 Hospitals that offer a 'secure' environment and this means the hospital is locked, patients have to be escorted and managed safely within a hospital environment. These Hospitals are suitable for patients who are detained under the Mental Health Act and whose risk of harm to others or escape from Hospital cannot safely be managed in other mental health environments. Some individuals may also be involved with the criminal justice system, courts and prison system and have Ministry of Justice restrictions imposed and have risk or violent/offending behaviour associated with their mental health condition. Our Hospital in East Yorkshire provides both a 'Medium' and 'Low' secure environment which essentially means that patients in the medium secure service have been assessed to need a higher level of security so that they can be safely managed. Ashley House, Cedar House, The Huntercombe Hospital Norwich and Beech house all offer a low secure security. The core objectives for secure services are to assess and treat mental disorder, reduce the risk of harm that the individual exhibits to others and support recovery and a move to a less restrictive environment.

Our specialist mental health and intellectual disability recovery services provide a hospital setting where patients are more likely to be informal (although some can be detained under the Mental Health Act but they do not require the restrictions of a secure hospital at this point).

Many of these services are unlocked and patients will not always need to be escorted as it is a more informal environment. These services help patients to progress further with their treatment, working towards goals and strategies for a more positive future. Our services offer help and support with daily living skills, communicating, relationship building, physical help and self care and help build self esteem and confidence. As patients mental health improves and they become more stable and independent, our teams help prepare patients to move on from the hospital – either back to their home environment or another placement within the community where they can recover further.

Our care homes with nursing can help in this transition where patients who are not quite ready to re-enter their home environment can undertake a further period of treatment and support in a homely, less structured setting.

Patients will receive treatment in the most appropriate setting and level of security which meet their needs at any given time and will move through a care pathway to lesser levels of security as they recovery. Patients are actively encouraged to become involved with the care plan their team put together – to air their views and choices and be involved at all stages of their pathway. It is always our aim for patients to progress to the least restrictive environment and they are encouraged to reach goals at their own pace and continue with social activities within the hospital and the community around the hospital or centre, where appropriate.

Quality of life is always maintained and families and support networks are encouraged to liaise with our teams regarding progress and visit patients regularly. With a variety of settings and levels of security across the Group, we can be very supportive in meeting patient's very individual needs in the right environment and if risk suddenly increases this situation can be managed very quickly where clinical teams can provide the appropriate support.