

# We must bring the Mental Health Act into the 21st century

With permission, I'd like to make a statement on reforming the Mental Health Act.

Even in the midst of the pandemic, I am enormously grateful for the work that my team and the NHS have done, led by Sir Simon Wessely and Claire Murdoch, and my honourable friend the Minister for Mental Health, to deliver this [white paper](#) which we publish today to bring mental health legislation into the 21st century.

We're committed as a government and as a nation to see mental health treated on a par with physical health.

We are increasing funding of mental health services to record levels, with £2.3 billion extra each year being invested through the NHS Long Term Plan, and an immediate £500 million in place to support mental health services with the very significant pressures they are under today.

Our mental health services are now helping more people than ever before.

Services are there for the most serious mental illnesses, although these of course are under significant pressure. Services are there for better community support through 24/7 crisis services and establishing liaison in A&E, and supporting people to manage their own mental health.

## **Mental Health Act**

Madam Deputy Speaker, this programme of transformation is ambitious and as we support mental health services now, so we must bring up to date the legislative framework also for the long term.

The Mental Health Act was created so people who have severe mental illnesses and present a risk to themselves, or others, can be detained and treated. For their protection and the protection of those around them.

But so much has changed since the act was put in place, nearly 40 years ago. We now understand a lot more about mental health. Public attitudes around mental health have changed significantly for the better, and we now have a better understanding and practice of how we can best support people with learning disabilities and/or autism.

We are also concerned by the growing number of people being detained, inequalities among those who are detained and the length of time that people are spending detained under the act.

So, after a generation, we must bring the Mental Health Act into the 21st century.

The previous Prime Minister, my Right Honourable Friend, the member for Maidenhead, asked Professor Sir Simon Wessely to lead a [review into what a modern mental health act should look like](#), and I thank her for her work. And I'm so grateful to Sir Simon, and his vice-chairs, for their dedication.

As I said in the House last year on its publication, the Wessely Review is one of the finest pieces of work on the treatment of mental health that has been done anywhere in the world.

I know that the review was welcomed across the House. We committed in our manifesto to deliver the required changes, and I am grateful to the Prime Minister for his emphatic support.

Sir Simon's review compellingly shows that the Mental Health Act does not work as well as it should, for patients or for their loved ones.

That the act goes too far in removing people's autonomy and does not give people enough control over their own care.

So Madam Deputy Speaker, today I am delighted to set out our full response to the Wessely Review in our white paper which, together with my Right Honourable Friend, the Lord Chancellor, we have laid before the House.

The white paper sets out plans for a landmark new Mental Health Act.

The new act will ensure patients are put at the centre of decisions about their own care, that everyone is treated with respect and the law is only used to compel treatment where absolutely necessary.

The white paper has been developed in close consultation with those with the greatest expertise – the Royal Collage of Psychiatrists, Rethink Mental Illness, Mind, the Centre for Mental Health and countless practitioners on the frontline, and I thank them all.

There are 4 pillars to this work and I'd like to take a moment to update the House on them.

## **Giving patients a voice**

First, Madam Deputy Speaker, we will be giving patients a voice in their own care, which we know leads to better engagement in treatment.

So we will put care and treatment plans and advance choice documents into statute for the first time so patients are more closely involved in the development of their care, and so they can have confidence that if they lose capacity because of illness, their preferences will be properly considered.

We're making it easier for patients to challenge decisions about their care, creating a new right to choose a nominated person who is best placed to look after their interests and increasing patients' access to the independent tribunal, to provide vital independent scrutiny of detention.

In his report, Sir Simon recommended that one of the best ways to ensure

dignified care is to ensure that patients can expect the privacy of their own en suite room.

We have already committed £400 million of funding to deliver this and we are building new mental health hospitals, with 2 schemes already approved and with more to come.

## **Tackling disparities**

Second, Madam Deputy Speaker, we will address the disparities that currently exist within the application of the Mental Health Act.

Black people are currently 4 times more likely to be detained under the Mental Health Act than white people, and black people are 10 times more likely to be placed on a community treatment order.

We also know that people from black and minority ethnic backgrounds can often engage with services later, and our plans to enhance patient choice, increase scrutiny of decisions and improve a patient's right to challenge will help us to improve service provision for all.

On top of this, we have already announced our new Patient and Carer Race Equality Framework, as recommended by the review.

And we're also looking at how we can use culturally appropriate advocates, so patients from all backgrounds can be supported in making their voice heard.

## **Criminal justice system**

Third, Madam Deputy Speaker, it is important that the act supports patients within the criminal justice system.

We will make sure that where people in prison require treatment in a mental health hospital, they are transferred in a timely way.

And we will support rapid diversion from custody to care where appropriate so people in our criminal justice system can get the right care, in the right place, at the right time, while we fulfil our fundamental duty to keep the public safe.

## **Learning disabilities and autism**

Finally, Madam Deputy Speaker, in our manifesto we committed to improve how people with a learning disability and autistic people are treated under the act.

Until now, the use of powers in the act did not distinguish between people with mental illness on the one hand, and people with learning disabilities and or autism on the other. This is wrong.

Needs are different and the law should be different too. This is all part of treating everyone with respect.

We therefore propose reforms to limit the scope to detain people under the act, where their needs are due to their learning disability or autism alone.

In future, there will be a limit of 28 days for these detentions, which would be used to assess clinical need and, wherever possible, we will work to ensure appropriate support is available in the community, rather than in institutional settings.

I want to thank Baroness Hollins, Ian Birrell, Mencap and the National Autistic Society for their advocacy and for their support for these reforms.

## **Conclusion**

Madam Deputy Speaker, this act is there for all of us, and we want to hear as many views as possible on our plans.

So [we will consult widely on this white paper](#), and we will respond later this year, before we bring forward a new Mental Health Bill.

I believe that everyone in our society has a contribution to make, and I believe everyone should be respected for the value they bring.

It is the role of government to support people to reach their potential, even at the most difficult of times. And to protect people when they are at their most vulnerable. That is what I believe.

And I believe these reforms will help put those values into action and help give patients the dignified treatment that they deserve.

I commend this statement, and I commend this white paper, to the House.