

Mental Health Act 1983

Correspondence between the President and the Director of the National Schizophrenia Fellowship

There continues to be lively discussion on the Code of Practice of the Mental Health Act. One particular issue is the fact that the Act states that a person can be detained on the grounds of health *or* safety – not health *and* safety. The National Schizophrenia Fellowship is very concerned that this important point has been overlooked. Following a recent meeting, the President of the College and the Director of the NSF agreed to an exchange of letters in the *Bulletin*.

Dear Dr Birley

A little error can cause so much misunderstanding

So often when the health of people who suffer from schizophrenia is deteriorating, their carers find that they are denied hospital treatment because they are not yet considered a danger to others or themselves. By the time they meet this criterion a great deal of pain, suffering and hurt have been experienced and their health is much deteriorated.

Yet to the NSF this often seems to be so unnecessary; if only psychiatrists knew their Mental Health Act correctly and took action early in the interest of the patient's health. The nub of the problem seems to lie in the fact that the Mental Health Act says that compulsory admission can be made if detention is necessary for the health *or* safety of the patient *or* for the protection of other persons. Yet so many apparently authoritative guides to the Mental Health Act use the word "and" where the Act actually says "or".

Over the last few years we have pointed out this error in numerous otherwise authoritative texts and received apologies from their authors and publishers. This includes the *Oxford Text Book of Psychiatry* and now it seems we have to add to our list the Royal College of Psychiatrists *Mental Health Act 1983: A Summary*.

With so much apparently authoritative yet erroneous material around perhaps it is hardly surprising that ordinary psychiatrists, social workers and others seem to be convinced that a person cannot be detained only in the interests of their health. The NSF are weary of pointing out the error and receiving assurances that next time the book, article, leaflet, etc. is printed it will be corrected. We feel that the

only way to prevent further avoidable suffering is for a respected organisation such as the Royal College of Psychiatrists to state publicly and forcibly what the Act really says and the implications of this section of the Act for helping seriously mentally ill people.

The National Schizophrenia Fellowship feels that the Royal College of Psychiatrists have a responsibility to give leadership in this area. Please will you rise to the challenge?

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National Director

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Dear Mrs Weleminsky

Thank you for your letter. I agree with you that members of our College should have an accurate knowledge of the Mental Health Act. I should mention that the errors which you found in our original press briefing had already been detected, and the document withdrawn. A revised version will be available very soon. As you say we are not alone. I have detected incorrect references to "health *and* safety" in the Departments' own Memorandum (1983) on the Mental Health Act – on pages 7 and 9, (Sections 26 and 33). Another misleading phrase which tends to cloud issues of compulsory admission is "a danger to himself and others". I am not sure of its origins, but it is not part of the 1983 Mental Health Act.

In England, Wales and Scotland (but not, I understand, in Northern Ireland) it is possible to admit a person compulsorily solely on the grounds of "health". I regard this provision as highly desirable and indeed essential. Many patients who require treatment do not need to be admitted for the sake of their safety or safety of others, but to prevent further deterioration of their mental health. In countries where physical danger to self or others is the only criterion for admission, there is evidence that patients are in fact admitted, for instance in states of mania, on grounds of their health.

At the same time, psychiatrists have to strike a balance. They possess potentially a great deal of power, and they must use it in a way which assures, wherever possible, their patients' continued trust and

confidence. When I admit a patient compulsorily, on grounds of health alone, I try to act at a point when the patient recognises, at some level, that he needs help, even if he does not ask for it very obviously. I may have to wait for this point to be reached. If I wait too long, however, even if his health does not deteriorate further, his social reputation or his social network, whether of family, friends, neighbours or workmates may be severely damaged or irretrievably broken.

So a judgement is involved, which may be difficult, and there is room for different opinions – which is why others must be consulted. But we should all know and agree on the basic rules which govern these decisions.

I hope our letters will provoke some further correspondence.

JIM BIRLEY
President

Miscellany

Research prize in psychiatry

The Welsh Division Annual Research Prize in Psychiatry was awarded for the first time in December 1989 and was shared by Dr Michael Morris and Dr Alison Linnington. Entries are now invited for the 1990 prize, the closing date for which is 1 September 1990. Trainees in approved posts in psychiatry in Wales are eligible to apply as are trainees currently employed elsewhere but who have previously carried out research in Wales during either a clinical or research appointment. Further details regarding entry regulations can be obtained from Dr D. D. R. Williams, Cefn Coed Hospital, Cockett, Swansea SA2 0EH (telephone 0792 561155).

AUTP postgraduate training in behavioural psychotherapy 1990–91

The Association of University Teachers of Psychiatry with the Institute of Psychiatry runs an annual course in behavioural psychotherapy. The course will begin with a two-day workshop on 20 and 21 September 1990. This will include the following components: theoretical background, demonstration of treatments and participant practice. After the workshop participants will be asked to undertake behavioural treatment of their own patients in their own centres, and later also to supervise other trainees. Participants will be supervised in small groups at monthly intervals in half-day sessions over the following academic year. During the two-day workshop and throughout the course eminent guest speakers from round the UK will run seminars on

behavioural treatment in acute and chronic disorders in adults, the elderly, children, mental handicap, and liaison psychiatry. A certificate will be awarded to those completing the course. The course is organised on lines which qualify for local funding assistance under Study Leave Regulations of the BPF. Cost of the combined workshop, monthly supervision and reading materials over the following academic year is £375. Applicants should write, stating their qualifications and current appointment, to Professor Isaac Marks at the Institute of Psychiatry, De Crespigny Park, Denmark Hill, London SE5 8AF, where the course will be held.

New publications

Rights, Risks and Responsibilities is a conference report which examines the dilemma for medical and social workers, and domestic carers, trying to look after frail older people without denying them their right to make their own choices. Price: £1.95. Further information: Age Concern Scotland, 54A Fountainbridge, Edinburgh EH3 9PT.

Care of the Elderly is a new multidisciplinary medical journal for all health professionals, medical and paramedical, who are involved in the care of elderly people. It is published monthly and is free on request to NHS health professionals. Further information: Ms Toni Lury, Care of the Elderly, Newbourne Health Services, Greater London House, Hampstead Road, London NW1 7QQ.