

Parliamentary News

(January 1984–March 1984: Part I)

National Advisory Council on Employment of Disabled People

Mr Alan Clark (Department of Employment) announced that this Council had been reconstituted from 1 January 1984 for a further period of three years. The Chairman is the Hon. Mrs Sara Morrison and the members include one psychiatric member, Dr B. Morris.

State Hospital, Carstairs

On 20 January 1984 Mr John MacKay for the Secretary of State for Scotland replied to questions about the State Hospital at Carstairs. He said that the arrangements for the transfer of patients to other mental hospitals or their discharge to the community are generally satisfactory, although particular problems occasionally arise which lead to delay in the transfer to another hospital of a patient who would otherwise be fit to leave the State Hospital. In 1983 there were seventy-four total movements out during the year, thirty-seven patients were transferred to other mental hospitals, nineteen were discharged to the community and the total patient population on 31 December was 268.

Mental handicap hospitals (costs)

In reply to a question from Dr David Owen the Minister stated that the average annual cost of caring for a patient in a mental handicap hospital in England and Wales at 1983–84 prices is £10,180.

Shoplifting

On 17 January Mr Greville Janner, QC (Leicester West) introduced a Bill relating to thefts from shops. He said that the first purpose of his Bill was to require that all prosecutions for shoplifting should be brought by the police, and secondly to ensure that elderly and especially ill people and sometimes young people, including those who have not committed offences, are not prosecuted when a caution or hospital treatment is society's best response to the commission of an offence. He said that when committed by elderly women this is sometimes a minor form of suicide, some cases actually leading to suicide. He referred to a list of some thirty-three people who had recently committed suicide as a result of shoplifting prosecutions according to the Portia Trust. The Bill was read a first time and ordered to be read a second time on 23 March (subsequently deferred to 6 July).

Mentally handicapped people (reports)

On 17 January Mr Kenneth Clarke said that it is proposed that in the future the National Development Team for the mentally handicapped should routinely publish summaries of its main conclusions and recommendations

following visits, and full reports which follow a few months later should normally be published by the authorities concerned who commissioned the visit.

Mental Health Review Tribunals

The Home Secretary was asked if he would introduce legislation to extend the powers of the tribunals contained in Section 72(3) of the 1983 Act to tribunals considering the application of patients detained under Sections 37 and 41 of the same Act. In reply it was said that the Home Office has no plans to amend the law on this point. The lack of an express statutory power to recommend leave of absence or transfer in the case of a restricted patient need not prevent mental health review tribunals from making such recommendations where they consider it appropriate to do so.

Mental Health (Scotland) Bill

This Bill, a consolidation measure, was introduced and had a Second Reading in the House of Lords on 24 January 1984. The Bill consolidates the Mental Health (Scotland) Amendment Act 1983 and the Mental Health (Scotland) Act 1960.

Medical students

On 27 January in reply to a question Mr Brooke gave details of the proportion of United Kingdom medical students enrolling in each of the last fifteen years who were female. Details were given in *Hansard*. In summary: in the years 1968–69, 25 per cent were female; in 1975–76, 34 per cent; and in 1982–83, 44 per cent.

Social workers

On 25 January a question was asked about the availability of social workers on 28 October 1984 to act as approved social workers under the new Mental Health Act. The NALGO ballot to boycott approved social worker examinations had raised concern. In reply the House was told that 550 social workers sat for the assessment at the first sitting on 30 November and another 1,100 places had been booked for the sitting in February. It was considered that there would be sufficient approved social workers in October (but in June there was still anxiety).

Section 136

The Home Secretary was asked on 24 January what progress had been made to implement an undertaking given by the Government during the passage of the Mental Health Bill that separate figures would be kept detailing the number of people detained in hospital as a place of safety under

Section 136 and those detained in a police station. Mr Hurd, in reply, said that the DHSS already keeps statistics of admissions to hospital but it would require a new national reporting system for police forces to collect statistics in relation to police stations. He said this would be expensive and, particularly because of the 'relatively infrequent use of this power', might not lead to wholly reliable conclusions. The Department was however continuing to consider whether there are alternative measures which might usefully be taken to improve upon the records currently available.

Prohibition of Female Circumcision Bill

The Committee Stage of this Bill began in the House of Lords on the 23 January. The House was in general agreement about the main aim of the Bill which is the prohibition of female circumcision in the United Kingdom but the Government did not wish to prevent other surgical operations upon female genitalia which are justified because of physical or mental disorders. Lord Glenarthur for the Government moved to insert a new Clause into the Bill which would allow operations necessary for the mental health of the person. The House divided after a debate, but the Clause was not agreed.

Solvent abuse

In reply to a question on 3 February, Mr Patten (for the DHSS) gave figures for confirmed cases of deaths associated with solvent abuse—exact figures were not available. There were a total of fifty-seven deaths associated with solvent abuse in 1983, twenty cases were as a result of asphyxia and fourteen inhalation of vomit. Details of other cases of deaths were given in *Hansard*.

Data protection

Mr Kilroy-Silk asked a question on this topic on 3 February. In reply it was confirmed that the provisions of the Council of Europe convention for the protection of individuals with regard to automatic processing of personal data are set out in annex A to the Government's White Paper on data protection (Cmnd 8539) published in April 1982. The Data Protection Bill originating in the House of Lords, taken as a whole, implements those provisions of the convention which require statutory expression. In particular, the provisions in the Bill establish a register of data users and the office of data protection registrar, with powers to supervise and ensure compliance with the principles set out by the convention.

Mrs Renée Short asked the DHSS on 6 February what proposals there were to guarantee confidentiality of medical information held in hospital computers when the Data Protection Bill became law. She asked under what circumstances patients and doctors will be able to check the use to which information held by a health authority is put. In reply, Mr Waddington (DHSS) said that the provisions of the Bill will apply to personal health data as they would to any other

personal data. Any person controlling the contents and use of automatic processed personal health data would be required to register as a data user and to comply with the data protection principles set out in Schedule 1 to the Bill. The use to which personal health data are put will therefore be set out in the register which both patients and doctors will be able to inspect. The Bill would not affect existing arrangements within the NHS governing the use and disclosure of personal health information. But the Government recognized the fundamental importance of maintaining the confidentiality of health records, and the DHSS is discussing with representatives of the health professions how these arrangements might be put on a more formal footing.

Offenders (drug treatment)

The Home Office replied to a question about advice to magistrates offering drug treatment as an alternative to prison. In reply it was indicated that this is available as a requirement of a probation order and although the Home Office does not keep wide statistics it was understood that Horseferry Road magistrates' court had made about thirty probation orders in the last 18 months requiring offenders who have an alcohol problem to receive treatment with Antabuse. This was an experiment which was being watched with close interest.

Women consultants

In reply to questions from Mrs Short the House was informed that 11.8 per cent of all consultants in medical and dental specialties in England were women. Of medical academic and research staff, 12.8 per cent are women.

Mental Health Act 1983

On 31 January the Secretary of State was asked for an estimate of the additional resources required by local authorities to implement the Act. In reply Mr Clarke said that the appointment of approved social workers will involve some new expenditure by some local authorities in providing extra training. This should not be significant, varying between authorities according to their need to improve on the standards they maintained previously. Additional resources were included in the 1983–84 rate support grant settlement to cover this.

Consultant posts

On 17 February the Minister of Health answered a number of questions about consultant expansion since 1981 and the advertising of posts. He said that at 30 September 1983 there were 964 consultant posts in England (including the Special Hospitals) without a permanent holder, of which 345 were partially or fully occupied by locums. Some 624 consultant posts in medical and dental specialties had not been advertised in the previous 12 months.

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