

## **Scottish Mental Health Law Review**

### **Minute from the Meeting of the Compulsion Workstream**

**12 November 2020**

#### **Video Conference Meeting**

Present: John Scott, Laura Dunlop, Gordon McInnes, Michael Craggs, Elinor Dawson, Laurence Nicholson, Arun Chopra, Rodger Smyth

Secretariat: Kirsty McGrath and Nicola Paterson

#### **1. Welcome**

John welcomed the group and introduced Arun from the Mental Welfare Commission (MWC).

Arun asked for the group to introduce themselves and a bit about their work.

#### **2. Update on the Review**

- John is meeting with the Minister in early December.
- Given where the five working groups are it is too early to provide interim recommendations in the report.

#### **3. Data to support the work of the Compulsion Group**

The group were presented with stats from the Mental Health Tribunal for Scotland relating to an increase in applications.

Data was also presented from the Mental Welfare Commission which showed:

Short term detention is a period of 28 days.

- 10,000 are revoked on day 28 however some are released before this.
- 15 days is the average stay for a short term detention
- Monday's are the most common day people are released and a Friday is the most common day to be detained.
- There is no data to show whether gender or ethnicity have any effect on detention.
- The older you are the more likely you will stay in hospital.
- Stats have gotten better. In 2006 / 2007 45% were being revoked on the last day compared to 2019 / 2020 dropped to 45%.

Compulsory Treatment Orders (CTO)

Hospital CTO

Non – institutional (home, care home) CTO

Last year was the first year to show that there are just as many non-institutional CTOs as there were hospital CTOs.

It is proven that while some jurisdictions find the non – institutional CTOs effective other jurisdictions may find that sort of treatment doesn't work.

### DMP Safeguard

Only 6% of cases a DMP will go out to someone who's been on detention for 2 months and say that treatment needs to change. CQC shows 27% of cases.

MWC have introduced a new process where they require the treatment plan to come before the DMP goes out.

Last month the MWC released a report on detention of 16 / 17 year olds. The reason they choose 16 / 17 year olds was because this was the group who had the highest rate of change in the detention.

Why was it going up?

- There had been more self-harm reports from 10 years prior
- 80% of detention certificates were taking place in non-working hours.

What's available in working hours compared to non-working hours?

- Resources and alternatives

Inequalities – it has been shown that if you come from a more deprived area you are more likely to be detained compared to a more socio-economic area.

50% of data regarding ethnicity is missing so therefor makes it hard to analyse.

Question for the group to think about;

Is the safeguard structured in the best way to make it most useful?