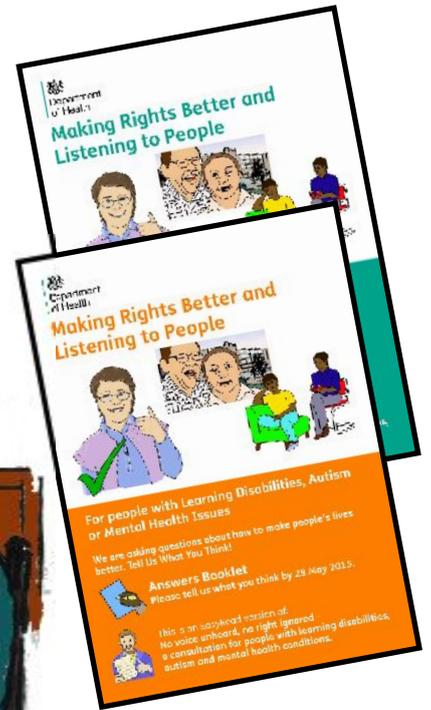




Department
of Health

Making Rights Better and Listening to People



For people with Learning Disabilities, Autism and Mental Health Conditions

The Government's reply to what people said and what happens next.



This is an EasyRead version of:
**Government response to No voice unheard,
no right ignored – a consultation for people with
learning disabilities, autism and mental health
conditions.**

What is in this booklet

Page



About this booklet

1



A few words from the Minister,
Alistair Burt MP

3



What needs to change?

5



What people told us and what we
plan to change

11



What happens next?

24

- **Stage 1**

24

- **Stage 2**

26

- **Stage 3**

28



What the words mean

29

Some words are in **bold**. We explain what they mean the first time we use them and at the end of this booklet.

About this booklet



Too many people are still living in hospital when they do not need to. When we mention people, we are talking about people with learning disabilities, autism or **mental health conditions**.



Things have changed in some parts of the country. In other places, people are still sent away from where they live, and from their relatives and friends.



This is often not right for them and it is not their choice.



The old government asked how to make people's lives better.



They asked questions about:

- making sure people are only in hospital when they need to be



- having the right health and care support where people choose to live



- using the **Mental Health Act** properly.

This is a law that says what your rights are and how you can be treated if you have a **mental health condition**.



The new government looked at what everyone said. This paper is about its plans for what should happen next.



A few words from the Minister, Alistair Burt MP



We want everyone to be treated with dignity and respect. People should be involved in decisions about their care and not have to take what is given to them.



We must stop thinking only about the things people cannot do and help them with things they can.



People need better care and support in the place they choose to live.



They should only go into hospital if it is the only way to get the treatment they need.



We need to do more to make this happen for people.



They have rights and everyone must respect these rights.



This needs a big change. Services must work together to find out what people need and help them to be as independent as possible.



We want to see real changes between now and 2020. I hope you will check whether national and local organisations do the things we talk about in this paper.

Rt. Hon. Alistair Burt MP
Minister of State for
Community and Social Care.

What needs to change?



We listened to what people said. Our plans are about giving everyone their rights and the health and care support they need.



The way care and support is planned and checked is changing, but many people still miss out.



We want to make sure public money is spent carefully so that things get better wherever you get your care.



We want people to:

- get the right care in the right place



- have support to live independently as part of their community in a home they choose



- be able to say if they think a decision about their care is wrong



- be involved in their care and use a **personal budget** to have more control.

A **personal budget** is money given to you to pay for your care. It lets you choose what care is right for you.



- have clear rights under the **Mental Health Act**



- know who is responsible for all their care and support, including their physical health.



Some people will still need care in hospital.

But this should be for as short a time as possible and near where the person lives or wants to be.



We will keep asking what people think as we make the changes happen.



Transforming Care

Transforming Care is a plan to make sure people have more choice and control and get the right care in the right place.



The last government and NHS England and others started a lot of work to stop people being in hospital when they do not need to.



The Transforming Care plan will make some big changes to move care closer to where people live. Our plans go with these big changes.



Our plans

This paper says what our plans are.

We need to do more work and can only make them happen if there is enough money to pay for them.

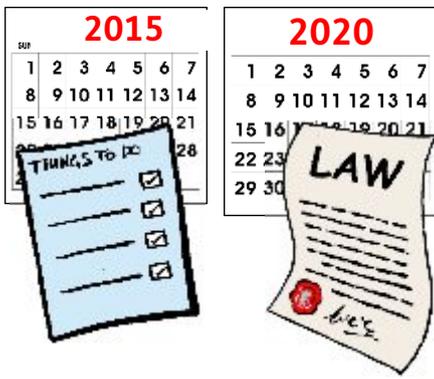


The plans are for England.



The National Assembly for Wales would have to agree any changes to the **Mental Health Act** in Wales.





Some of our plans can be started now. Others, like the ones that need new laws, will take longer.



Our plans are in 3 stages:

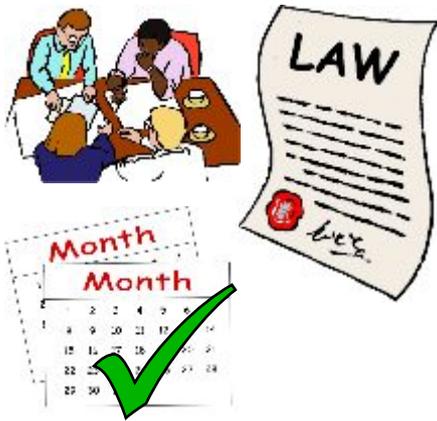
1. Things that can happen now using laws we have and work already happening.



2. Other things that need the law to change.



3. Bigger changes that would take longer to happen.



Some of these can happen at the same time.

The new Government thinks these plans will:



- make life better for people and their families



- give people better care



- mean more people get care in their community, instead of in hospital.



What people told us and what we plan to change



1. The right to live in the community in a home you choose



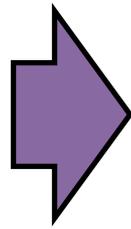
People, their families and carers said this was very important. There needs to be a choice of good places to live for this to happen.



They said people should only be sent to hospital if they really need to be there. They should only stay as long as they need to be there for treatment.



Our plans:



We will give **guidance** and information to **commissioners** to help them plan a mix of good community services to help people to live where they choose.



Commissioners plan and buy services. These rules would help **commissioners**:

- respect people's choices



- think about what people need in their home, to live by themselves where they live



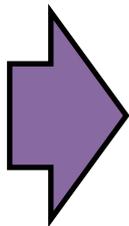
- involve people in planning services



- have a mix of good community services in their local area



- make sure people have support for their physical health as well as their mental health.



We will make changes to the questions on **Mental Health Act** forms. This is so doctors write down whether the person can be **assessed** or treated where they choose to live.

2. The right to be listened to and say if you disagree with decisions about care



People said many people do not understand their rights or have help to use them.



We want services to listen to people and involve them in making decisions about their care. They should know what to do if they do not agree with those decisions.



This includes making sure people know about their rights, have the right support from family, friends and advocates, and have clear information about their care.

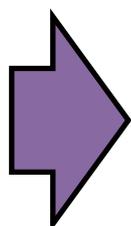


People often have to stay a long way from home if there are not the right services in their community.

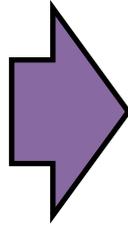


Our plans:

Care and Treatment Reviews are a way of planning that avoids people being sent to or staying in hospital when they do not need to be.



We will think about how **Care and Treatment Reviews** can also be used for services run by local councils and other organisations.



We will also think about learning from **Care and Treatment Reviews** to help make care planning better.



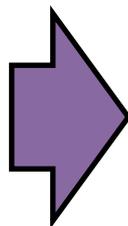
The **Law Commission** is looking at **advocacy** and **Deprivation of Liberty**.



Advocacy means having someone to speak up for you.



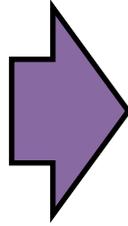
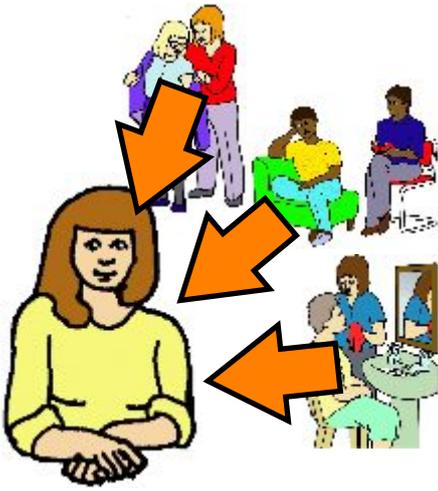
Deprivation of liberty can happen when someone has to live somewhere that they are not free to leave.



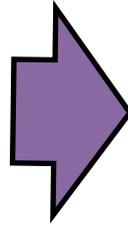
We will think about bringing together all the different advocacy the law says people have a right to into 1 type.



Anyone who does not have **capacity** to be able to make decisions would have an advocate to do this unless they choose not to.

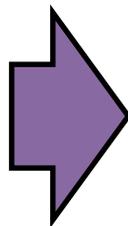


We will try out giving people 1 named social worker. They will link with all the services that support the person and help them with their rights.

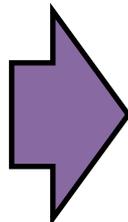


We will help people get:

- information about their rights that is clear and they can understand
- information about support to help them say what they want to say.



We will give **guidance** and information to **commissioners** to help involve people in planning services.



We will check if we need to change the law to make sure **commissioners** plan better.



3. Rights and the Mental Health Act

People said they are still not getting all their rights under the Mental Health Act. Things are better in some places than others.



Some people thought the Mental Health Act should not apply to people with learning disabilities or autism unless they also have a mental illness.



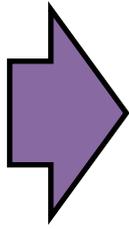
It is important to involve people better and make sure everyone understands how to use the **Mental Capacity Act**.



People involved with the police and courts need better support and services that are right for them.



Our plans:

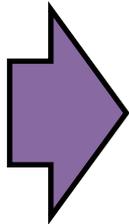


We will change the law to cut down on police cells being used as a **place of safety** where people can be taken if they have a mental health crisis:

- to make sure no children or young people are kept in police cells



- if adults are kept in police cells, to make sure it is no more than 24 hours without an **assessment**.



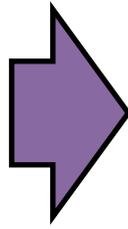
We will look at changing the **Mental Health Act** so people have the right to say:

- whether what they wanted was listened to when the decision was made to keep them in hospital

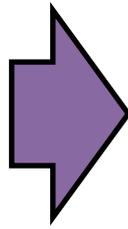


- who they want to be their **nearest relative**. The **nearest relative** has important rights and responsibilities for the person.

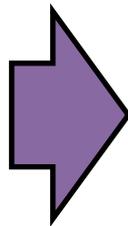
NHS



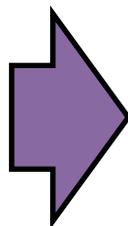
We will look at making the **Mental Health Act Code of Practice** also apply to people who plan and pay for NHS services.



We will think about making it more difficult for people to be held in hospital when they are ready to leave.



We will also look at the law about **deprivation of liberty** for people who live in the community.



We will look at whether the **Mental Health Act** is the right law to use for people with a learning disability and people with autism who do not have a **mental health condition**.



4. The right to control your own support and services with a personal budget

People said the most important thing is to get good local care. It does not matter who plans and pays for it.



Things work best when health and social care services share their money and plan together.



Personal budgets are a good way for people to have more control over their care. They let people decide what care is best for them



They let you choose how you want to spend it to meet your **assessed needs**. We need to get better at checking if this happens everywhere.

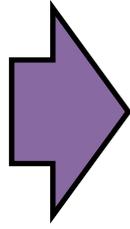
Assessed needs are a check that is made on your needs for health and social care support.



People said it can hold things up when services do not share information with each other to help the way they plan a person's care.



Our plans :



We will look at providing clear information to help check what is happening locally and nationally with:

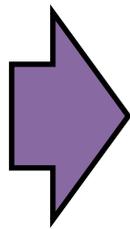
- people staying in hospital when they are ready to leave



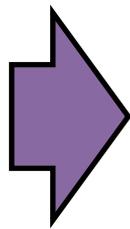
- **personal budgets**



- services working together to make sure people get the right care and support.



We will make clear rules for better sharing of information between organisations to help plan a person's care.



We will also think about what else we can do about sharing information. It should make care and treatment better for everyone, instead of causing problems.

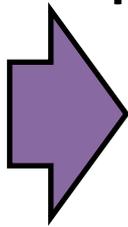


5. Know who is in charge of supporting your physical as well as your mental health

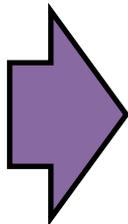
People said it can be difficult to know who is looking after your physical health. If you are in a hospital away from home for a long time, your GP cannot do this.



Our plans:



We will make sure NHS and social care services know they must look after a person's physical health as well as their mental health.



We will think about changing the law so people who are in mental health hospitals are on the list of a GP who can look after their physical health.



Children and Young People

All these issues affect children and young people as well as adults.



People said services must get better at working together to involve and support young people and their families.



What we are doing:

- using better information to plan the services young people and their families need



- spending more money on mental health services for children and young people.

What happens next?

2015						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

2017						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Stage 1

From 2015 to 2017.

These things can happen now using laws we have and work already happening:



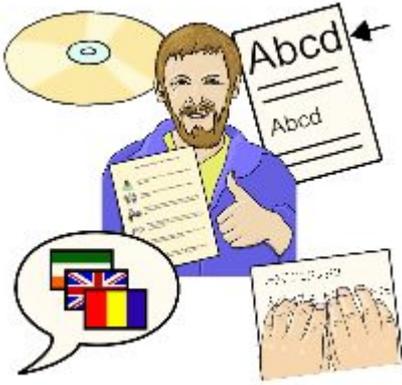
- provide information and rules to help **commissioners** plan better services for people



- try out having 1 named social worker to support the person and their family



- change the questions on **Mental Health Act** forms to ask why the person cannot be **assessed** or treated in the community



- provide clear information about people's rights and support to help them make their views clear



- have better ways to share information, in order to give people the right care and make care better for everyone



- have clear information to help check what is happening locally and nationally



- cut down on police cells being used as a **place of safety**.

Stage 2

These plans need changes to the law.

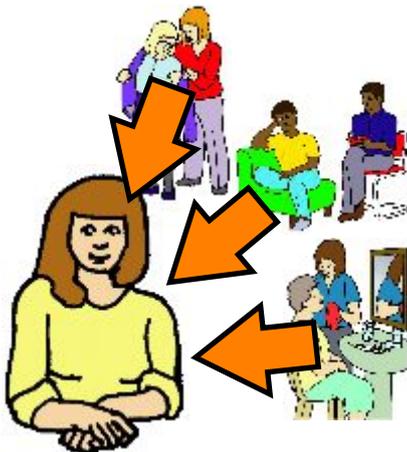
We need to think about them more, ask what people think then make the changes as soon as we can.



They can only become law if Parliament agrees to them.



- think about how **Care and Treatment Reviews** can be used for services run by local councils and other organisations. This is to make Care Planning better



- if the trial works, have 1 named social worker to support the person and their family



- talk to people about changing the **Mental Health Act** so people can say a decision is wrong and who they want as their **nearest relative**



- make people in the NHS who decide which organisations run services follow the **Mental Health Act Code of Practice**



- make sure people in mental health hospitals have a GP who looks after their physical health



- make sure people are not held in hospital when they do not need to be



- think about changing the law about **deprivation of liberty** for people who live in the community



- think about bringing together all types of **advocacy**. Anyone who does not have **capacity** should have an advocate unless they choose not to.



Stage 3

These are bigger changes that would take longer. We will check whether they make things better.



We will need to think carefully and also find out what people think before we make big changes to the **Mental Health Act**.



We will:

- check the new way for **commissioners** to plan care for people going into hospital, moving to another service or leaving hospital



- decide if we need to change the law to make this work better



- keep checking whether the **Mental Health Act** is the right law to use for people with learning disabilities and people with autism.



Putting it all together

All these ideas together will make the changes we need to make care better for people.

What the words mean

Advocacy

Having someone to speak up for you.

Assessment

Being **assessed** under the Mental Health Act is when a doctor decides if you can be kept in hospital even if you do not want to.

Assessed Needs

A check that is made on your needs for health and social care support.

Capacity

Mental capacity means being able to make your own decisions. You can have support to do this.

Care and Treatment Review (CTR)

This is a way of planning that stops people with a learning disability or autism being sent to hospital when they do not need to be. It also tries to make sure that, if people do go to hospital, it is for a short time.

Commissioners

People who work for the NHS or local council and plan and buy services.

Deprivation of Liberty

When someone has to live somewhere that they are not free to leave.

Guidance

Help and information about the right thing to do.

Law Commission

An independent organisation that checks the law is fair and up to date and says if laws need to change.

Mental Capacity Act

The law that helps people make their own decisions and says how others must support this.

Mental Health Act

The law that says what your rights are and how you can be treated if you have a mental disorder.

Mental Health Act Code of Practice

This gives guidance about good care for people who are treated under the Mental Health Act.

Mental Health Condition

There are lots of different types of mental health conditions, they are mainly to do with how you think, feel and behave. They include things like eating problems, feeling very sad all the time, hearing voices, having panics, wanting to hurt yourself or others.

Personal budgets

A personal budget is money to pay for your care. You choose how you want to spend it to meet your **assessed needs**.

Place of safety

Somewhere people are taken if they have a mental health crisis.



This document has been user-checked by the **Making It Easier Group** of people with learning disabilities.



This paper meets the European EasyRead Standard.



Inspired pics

Artwork includes material from the Inspired EasyRead Collection and cannot be used anywhere else without written permission from Inspired Services.

www.inspired.pics

© Crown Copyright

2904436 November 2015

Prepared by Williams Lea for the Department of Health