



What To Expect If Your Relative Or Friend Is In Hospital

October 2016



Introduction

This guide gives information on what you can expect if your relative or friend is in hospital for their mental health problem.

In this guide we have used the term 'relative', but the information also applies where the person in hospital is your friend.

Your relative's rights vary depending on whether they are in hospital voluntarily (as an informal patient), or detained compulsorily (sectioned) under the Mental Health Act.

If your relative is detained under the Mental Health Act, their rights also depend on what section they are detained under.

Why is my relative in hospital?

If your relative is detained under the Mental Health Act, this means they are in hospital because a team of mental health professionals have decided they need to be assessed and/or treated for their mental health problem.

This is because they think your relative is too unwell for that to happen without them being in hospital. They are using legal powers given to them under the Mental Health Act.

If your relative is in hospital voluntarily, they have agreed to go into hospital of their own free will to be assessed and/or get treatment for their mental health problem.

How will hospital help my relative?

Being in hospital should help your relative get the support and treatment they need to recover and feel well enough to go home.

Assessment

The professionals working with your relative will assess what type of mental health problem they are experiencing and what treatment they need to help them.



This can involve your relative answering some questions and talking to staff about the way they have been feeling and what has been happening in their life. Your relative might also be offered treatment while they are being assessed.

Treatment

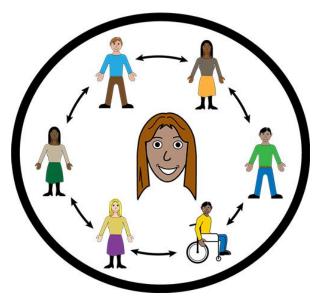
Different people need different treatments, even when they seem to experience similar mental health problems. Any treatment given must be appropriate for the person concerned, and should be the best, evidenced based, option available. People may also be offered a choice of treatments.



Treatment might include nursing care, medication, talking to doctors or psychologists, taking part in activities that can help your relative feel better, or learning new skills.

It can also involve treating physical health if it is part of, or supports treatment for, your relative's mental health problem, such as for self-harm injuries.

Who decides what happens to your relative?



Your relative will be at the centre of their care and treatment and should be given all the information they need to make informed decisions about their treatment options. There are a number of people responsible for supporting your relative to make decisions about their care and treatment.

Responsible clinician

This is the approved clinician in charge of your relative's care and treatment while in hospital. They do not have to be a doctor, but will be the most appropriate person.

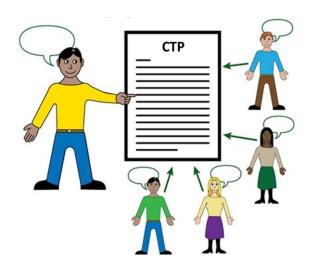
Care co-ordinator

A care co-ordinator must be appointed as soon as possible following your relative's admission to hospital. If your relative was receiving support from secondary mental health services before they were admitted, they will already have a care co-ordinator.

A care co-ordinator may be a:

- social worker
- nurse
- occupational therapist
- psychologist

- doctor
- dietician
- physiotherapist
- speech and language therapist



While your relative is in hospital their care co-ordinator will work with them (and, if they wish, their family and friends) to draw up a care and treatment plan (CTP). This will be designed to meet their individual needs and the outcomes they would like to achieve.

A CTP will cover one or more of the following:

- finance and money
- accommodation
- personal care and physical wellbeing
- education and training

- work and occupation
- parenting, or caring relationships
- medical and other forms of treatment
- social, cultural or spiritual needs

A CTP should record the services to be provided and the action needed to achieve each of the outcomes your relative has agreed. This will include when treatment or services will be provided and by whom.

Their care co-ordinator will be responsible for overseeing the co-ordination of your relative's care and treatment and for reviewing the plan. If your relative already has a CTP, it should be reviewed within 72 hours of their admission and updated as needed.

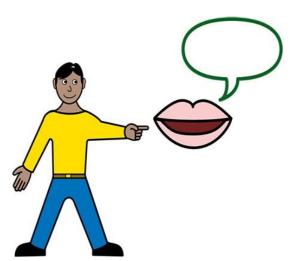
A step-by-step guide to care and treatment planning can be found here:

http://www.hafal.org/pdf/Care_and_Treatment_Planning_1.pdf

Who can help your relative speak up about what they want?

While in hospital, your relative is entitled to help and support from an independent mental health advocate (IMHA).

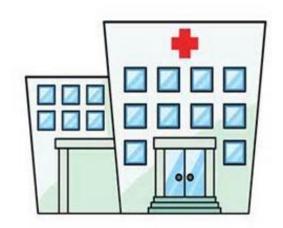
They must be told about the support an IMHA can provide when first admitted to hospital. A member of the ward staff, your relative's responsible clinician or an approved mental health professional (AMHP) can give your relative information about getting an IMHA.



An IMHA is there to support your relative and no one else. They can help your relative express their views about their care and treatment, and make sure your relative's voice is heard. Their role is to help your relative understand any medical treatment they are given or might be given, as well as the reasons and legal basis for it.

Your relative should have access to a phone which they can use to contact and talk to an IMHA in private.

Does my relative have to stay in hospital?



Your relative is not free to leave if they are detained under the Mental Health Act, but they may be able to leave for short periods (see Can I take my relative out, and can my relative visit me at my home?).

If your relative is a **voluntary patient**, they can discharge themselves whenever they wish, but it will always be a good idea for them to talk to their care team before doing so (see Who decides when a patient can leave hospital?).

How do I visit and stay in touch?

Being able to see family and friends can be really important when someone is in hospital. Visiting times should be flexible and there should be access to refreshments. If you are taking children to visit your relative, there should be somewhere suitable for your relative to meet with them.



Your relative should be able to use the phone or internet during the day to stay in touch with you. They should have access to a coin or card operated phone they can use without being overheard.

You may also send letters and parcels to your relative while they're in hospital.

Ask staff about the hospital's policy on the use of mobile phones and other devices – when, where and how your relative can use them.

Are there restrictions placed on my visits?

The hospital must have a written policy on when visits to patients may be restricted, but this cannot include blanket rules such as "no patient can have visitors for the first four weeks".

Reasons for restricting or excluding a visitor:

- your relative's relationship with you is considered damaging to their therapy, such as when it interrupts their treatment progress or sets them back, or there's a concern that continued contact with you could cause this
- your relative's behaviour poses a risk to you
- your behaviour may be disruptive for example, you have previously tried to smuggle drugs or alcohol into the hospital, or have been aggressive.

If your relative disagrees with a decision to prevent you visiting them, an independent mental health advocate (IMHA) can help them challenge it.

Is there any help with travel costs?

If you get certain welfare benefits, you might be able to get help with travel expenses from the Discretionary Assistance Fund. You can apply over the phone on 0800 859 5924, online or by post.

Visit <u>www.moneymadeclearwales.org/home.php?page_id=60</u> for more information.

Can I take my relative out, and can my relative visit me at my home?

If your relative is detained under the Mental Health Act, you can take them out as long as they have permission from their responsible clinician to take 'leave of absence'. This is often called 'section 17 leave' because it's granted under section 17 of the Mental Health Act.



Your relative can be given leave for a few hours, a weekend or longer, but it might be on the condition that they are accompanied by a member of hospital staff or stay at a particular address.

Section 17 leave can be used for short outings from the hospital, visits home to family or as a trial run before discharge.

If your relative is in hospital voluntarily, they are free to come and go as they wish. They should be told what the arrangements are for them to leave the ward. This includes the locked door policy for the ward, which, for practical reasons, could mean they cannot leave when they want. Your relative may be asked to let staff know if they want to leave the ward, but they do not need permission.

Who decides when a patient can leave hospital?

If your relative is detained under the Mental Health Act, they can be discharged by:

• The **hospital managers**. Your relative can ask for a meeting with them to ask to be discharged.

Hospital managers

An independent team of people in a hospital who make sure that the requirements of the Mental Health Act are properly applied. They have certain important responsibilities and can make decisions related to your relative's detention – for example, they can hear your relative's application to be discharged and decide whether or not to approve it.

- Their responsible clinician, if the legal reasons for detaining them no longer apply. This could be because their mental health has improved and they no longer need to be kept in hospital for assessment or treatment.
- Their nearest relative. To do this, the nearest relative must give the hospital managers at least 72 hours written notice. If their responsible clinician does not object to them going home, your relative can go home once the 72 hours have passed.

If your relative's responsible clinician objects, they can make a report to the hospital managers before the 72 hours are up stating that, in their view, your relative would act in a way that would be dangerous to themselves or others. See the publication *Role of the Nearest Relative* for more information.

Nearest relative

A family member who has certain responsibilities and powers when someone is detained in hospital under the Mental Health Act. These include the right to information and to discharge a patient in some situations.

The law sets out a list to decide who the 'nearest relative' is, although who is named as nearest relative can sometimes be changed. See the publication called *Role of the Nearest Relative* for more information.

 The Mental Health Review Tribunal for Wales. The Tribunal cannot look at the reasons why your relative was detained in the first place and will only look at how your relative is now. The Tribunal will decide whether your relative should stay under section, or be discharged. If your relative is in hospital voluntarily, they can discharge themselves whenever they wish. However, if the care team believes leaving hospital could put your relative or others at risk, they may stop them from leaving by detaining them under the Mental Health Act.

If that happens, the doctor can keep your relative on the ward under section 5(2) of the Mental Health Act for up to 72 hours. During this time, your relative will be assessed to see if they need to be kept in hospital.

If a doctor is not available, a nurse can stop your relative from leaving the ward for up to 6 hours under section 5(4) of the Mental Health Act, until a doctor can see your relative.

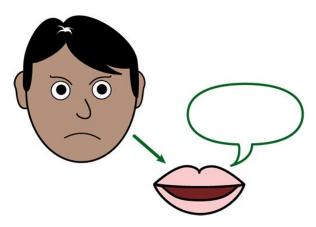
Your relative can only be detained for longer than 72 hours if two doctors and an approved mental health professional (AMHP) agree that:

- your relative needs to be assessed and treated for their mental health problem in hospital
- their health could get worse if they don't get treatment
- their or someone else's safety would be at risk if they don't get treatment.

Health professionals cannot threaten to detain your relative under the Mental Health Act to make them agree to stay in hospital.

Giving feedback

Complaint



There are a number of things you can do if you are not satisfied with how your relative has been treated in hospital. The best course of action for you will depend on what exactly has happened.

Often a problem can be sorted out by speaking informally with the person involved.

If the problem cannot be resolved informally, you can raise a concern with the health board, which must have a written policy that explains how they deal with concerns.

Your relative's IMHA can also help them raise a concern or, if they no longer have an IMHA, they can ask their local Community Health Council to help. For more information see www.wales.nhs.uk/ourservices/directory/communityhealthcouncils/

A concern should be reported within 12 months of the incident, though it may still be investigated if it is raised after 12 months, if there was a good reason for the delay.

If you're not happy with the health board's response, you can make a complaint to the Public Service Ombudsman for Wales. See www.ombudsman-wales.org.uk/

If your complaint is about the way your relative was treated by a particular nurse, doctor or other professional, you can make a complaint to their regulatory body.

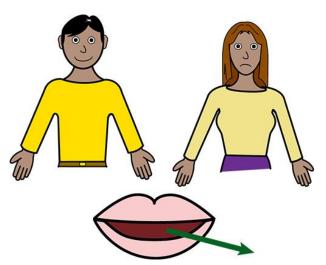
Doctors, including psychiatrists: the General Medical Council www.gmc-uk.org/

Nurses: the Nursing and Midwifery Council www.nmc.org.uk/

Occupational or speech and language therapists, psychologists, dieticians and physiotherapists: the Health and Care Professions Council www.hcpc-uk.co.uk/

Social workers: the Care Council for Wales www.ccwales.org.uk/

Comment

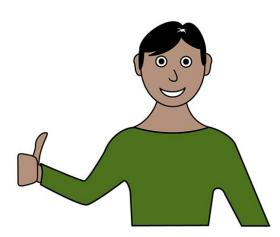


If you do not want to formally raise a concern or complaint, but you want someone official to know your relative had a bad experience in hospital, you can tell Healthcare Inspectorate Wales (HIW). HIW monitors and inspects all health services in Wales.

Although they do not investigate individual complaints, HIW want to hear about experiences of poor care, as this helps them make informed decisions about when, where and what services they inspect.

If you think the Mental Health Act has not been used properly, you can contact the Mental Health Review Service. This service is run by HIW and is responsible for checking people are lawfully detained and well cared for under the Act. Go to hiw.org.uk for more information.

Compliment



You can also give positive feedback about your relative's care and treatment to their care team, IMHA, Community Health Council or HIW at any time.

Complaints and compliments are both helpful for services.

With special thanks to Simon Meadowcroft from Betsi Cadwaladr University Health Board and other members of the Accessible Information Advisory group.

