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## **MENTAL HEALTH ACT MONITORING COMMITTEE**

## **REVIEW OF PRISON TRANSFERS UNDER THE MENTAL HEALTH ACT** 1983

Date of meeting	04/08/2021		
FOI Status	Open/Public		
If closed please indicate reason	Choose an item.		
Prepared by	(Robert Goodwin, Clinical Service Group Manager Bridgend ILG)		
Presented by	(Robert Goodwin, Clinical Service Group Manager Bridgend ILG)		
Approving Executive Sponsor	Julie Denley Director of Primary Care, Community & Mental Health		
Report purpose	FOR DISCUSSION / REVIEW		

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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)			
Committee/Group/Individuals	Date	Outcome	
(Insert Name)	(DD/MM/YYYY)	Choose an item.	

ACRO	ACRONYMS				
	MHA – Mental Health Act				
	AMHP – Approved Mental Health Practitioner				
	EDT – Emergency Team				
	SWP – South Wales Police				
	CAMHS – Child and Adolescent Mental Health Service				
	IMHA – Independent Mental Health Advocacy				



CTMUHB – Cwm Taf Morgannwg University Health Board
PICU – Psychiatric Intensive Care Unit

### 1. SITUATION/BACKGROUND

**1.1** At the previous meeting of the Mental Health Act Monitoring Committee which took place on 05 May 2021 the Operational Group was asked to undertake a review of prison transfers which had taken place using the Mental Health Act 1983

# 2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

## 2.1 Patients Concerned with Criminal Proceedings

The Code of Practice for Wales offers guidance on the use of the Mental Health Act 1983 (the Act) for the assessment and treatment for mentally disordered people who come before the criminal justice system, often known as Part 3 patients. It provides guidance on admission and discharge.

### 2.2 General Matters

People subject to criminal proceedings have the same right to assessment and treatment for a mental disorder as anyone else in Wales. A person in police or prison custody, or before the courts charged with a criminal offence, and who needs medical treatment for mental disorder should be considered for admission to hospital.

## 2.3 Patients Transferred from Prison under Sections 47/49 and 48/49

Section 47 of the Act empowers the Secretary of State for Justice by warrant to direct the removal to and detention in hospital for treatment of a person who is serving a sentence of imprisonment. The 'transfer direction' may be made with or without restrictions under section 49 and if transferred to hospital by virtue of a transfer direction only, the patient is treated as if they were a civil patient and the Secretary of State for Justice will have no further role.

Section 48 empowers the Secretary of State for Justice by warrant to direct the removal to and detention in hospital for treatment of certain people such as those on remand, civil prisoners and immigration detainees. Restrictions may also be added under section 49. Subsequent attendance at court will require the Secretary of

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State for Justice's consent and will usually be given at the time of admission.

## 2.4 Prison Transfers from 1st April 2019-31st March 2021

A review of prison transfers into CTMUHB Mental Health facilities over a 2 year period is shown in the table below. This table confirms that each of the six prison transfers which took place did so within the 14 day timeframe recommended within the Code of Practice.

Warrant issued by Detained at time of warrant	Issue date of warrant	Date of transfer	Days	Section	Receiving Ward/Hospital
Cardiff Magistrates /HMP Cardiff	30.07.2020	06.08.2020	8	47/49	PICU- RGH
Swansea Crown/HMP/YOI Parc	19.01.2021	27.01.2021	9	47/49	PICU-PWH
Merthyr Magistrates/HMP/ YOI Eastwood Park	17.04.2019	24.04.2019	8	48/49	PICU-RGH
Swansea Magistrates/HMP/ YOI Eastwood Park	10.10.2019	16.10.2019	7	48/49	PICU-PWH
Merthyr Magistrates/HMP/ YOI Eastwood Park	24.03.2020	26.03.2020	3	48/49	PICU-RGH
Bristol Crown Court/HMP Bristol	11.09.2020	16.09.2020	6	48/49	PICU-PWH

The Operational Group considered that whilst prison transfers took place in a timely way following the issue of the warrant, it may be helpful for local community forensic teams to review each of the cases and to advise if there had been any delays in securing the necessary medical assessments following a referral from the prison.

### 3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

## 3.1 Timely Provision of Medical Assessments Prior to the Issuing of a Prison Transfer Warrant



Whilst patient transfers occur in a timely way following the issuing of a warrant, further work is required to determine if there are any delays in securing the necessary psychiatric assessments and agreement on an appropriate placement.

### 4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outined in this report.		
Related Health and Care	Safe Care		
standard(s)	If more than one Healthcare Standard applies please list below:		
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)  If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.  If no, please provide reasons why an EIA was not considered to be required in the box below.  The MHA Operational Group meets bi-monthly to review the application of the Act across CTMUHB		
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.		
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.		
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care		

### 5. RECOMMENDATION

**5.1** The Committee is asked to **NOTE** the progress on this review and the suggested area of further enquiry.