



Mental Health Reform

Promoting Improved Mental Health Services

Quick Access Template

Submission to the Public Consultation on Draft Legislation to Update the Mental Health Act, 2001

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This template can be used as is or amended to make a submission to the Public Consultation on Draft Legislation to Update the Mental Health Act, 2001.

Do I have to use this template?

No. This is just a suggestion of how you could structure your submission. You do not have to use it at all, you can use only some parts of it, or you can follow it as it appears. It's up to you.

Deadline

1. Deadline for submission is 5pm Friday, 09 April 2021
2. If you need more time to prepare your submission, contact mentalhealthactreview@health.gov.ie for a limited extension for individual requests

Making Your Submission

Email:

1. Send as an attachment (PDF or Word doc)
2. To mentalhealthactreview@health.gov.ie
3. With 'Mental Health Act review submission' in the title

Post:

1. 'Mental Health Act review'
2. Mental Health Unit, 50 – 58, Block 1, Miesian Plaza, Baggot Street Lower, Dublin 2, D02 XW14

Note on Privacy

1. The Department will publish submissions, which might include a list of everyone who made a submission
2. Any personal and identifying information will be redacted before being published or released
3. What you submit may be shared
 - a. Freedom of Information Act 2014 requests
 - b. Sharing with relevant Government Departments and State organisations
4. Your data will be processed by the Department but will only be used in the context of the review of the Mental Health Act, and for no other reason. If, at any time, you wish to withdraw your submission, contact mentalhealthactreview@health.gov.ie
5. The Department's Privacy Policy can be viewed at <https://bit.ly/3fxux6z>

Submission

Public Consultation on Draft Legislation to Update the Mental Health Act, 2001

Introduction

Hi, I am [REDACTED] and I come from Poland. Based on my own experiences with Mental Health Services in Ireland I would like to share it with you. As I am Mental Health Advocacy for Ethnic Minority and worker for Cairde I would like to give for your special attention the Human Rights, Patience Rights, Trauma & Stigma, Discrimination people with mental health difficulties as well as the barrier of language and culture. and I live in Ireland 16 years already. I'm ambitious and qualified professional with over 25 years' combined experience in Administration, Tourism, Retail and Hospitality. Hard working, reliable and confident with excellent communication, responsibilities and customer service skills. Works well within a team and equally under own initiative. Relates well with customers and colleagues. Dedicated to delivering high standards in all areas. I'm qualified from Poland as Economist Technologist, Merchant & Specialist of Retail, Law & Administration. In Ireland I had been worked and attending to the College and also other courses which are supported by certificates as well. In the mean time I had been worked at Cairde as Community Health Advocacy to support others people of all different issue of life and with mental health difficulties. I had have provided service in the 3 different languages because it is an high problem of English language problem.

I decided to do Metal Health Advocacy training because I would like to help and support people with mental health difficulties. As my own experiences with Mental health Service in Ireland motivated me to do something more what is really need in this service. I have membership with Mental Health Reform and I'm really enjoy to support human rights in this service for the people with mental health difficulties. Also I'm delighted to can attending to this training and practice with all fantastic teachers and mentors in this amazing group. I'm glad to share all information and also those different shape of mental health understanding in the different country as the culture is. As my own experiences with Mental health Service I can say that it is an special need of Mental Health Advocacy in this service to protect people, to help them understanding this all procedure of treatment to the hospital and to explain them the patient's rights. It is very important to provide translator of diagnostic and with doctor dialogue, because it is risk of wrong diagnostic or wrong medications for. I would like to support dignity of people in the hospital and motivated them to activities as well to care's of them self, to give them solutions that mental health difficulties doesn't mean that you disqualified and life is finish. I would like to do something good for other people and do it with positive people. Because if everyone do something small, then will coming something biggest.

Headings

1. Definitions

As my own traumatic experiences with Mental Health Service I can say that on the first admission my English was very poor and didn't understand the system and process, and what is going to happen me. I didn't agree to be admitted to the hospital and I have no contact with solicitor or advocacy. My human rights wasn't respected and also I have no translator to can speak with doctor. At the time I can live hospital in the morning and come back in the evening time. Regarding to the admission to the hospital is important to know that person who just stopped take a medication and don't want to see some doctor, cannot be closed right now to the hospital because of it. Person admitted to the hospital has to be ready by clothing,

underwear, cosmetics which are very needed for. Patients voluntary and involuntary have rights to speak with lawyer and advocacy. The admission cannot put person with mental health difficulties on the homeless risk, which is happen plenty times. Person with mental health difficulties need a explained patience right and respect of dignity. The Mental Health Service cannot physical restrain if isn't necessary for the person with mental health difficulties.

2. Guiding principles

As I am Mental Health Advocacy for Ethnic Minority, I think that it is very important to provide service and support for the people with mental health difficulties in the MHS. The barrier of language and culture, so different understanding of mental health is a high problem. As well as the doctor has prescribed wrong a diagnosis and medication. Doctor didn't want to refuse a medication which has gave a side effects. It is important to know that plenty immigration people have a live in Ireland alone, without family and friends and to find contact with the family could be very traumatic and difficult. Mental Health Advocacy has to organize everything and help the person with mental health difficulties what it is priority. As well to support person with mental health difficulties by law and Human Rights as well as the MHC Policy.

3. Criteria for detention

1. Support for mother self and her child or pregnant woman with mental health difficulties.
2. Human Rights and respect for dignity of person with mental health difficulties.
3. Voluntary and Involuntary person with mental health difficulties have rights to speak with solicitor and advocacy.
4. Voluntary person with mental health difficulties has to agree for a admission and should have rights to decide when want to come back home.
5. The process should be clear explained and the translator has to be provided.
6. Mental Health Service cannot close to the hospital person who just stopped take a medication. Person with mental health difficulties have rights to decide when want to see doctor or if don't want to do it. Nobody can put pressure on him and has to respect his freedom.
7. Admission to the hospital has to be changed because they are not respecting Human Rights and dignity of person with mental health difficulties.
8. Involuntary person with mental health difficulties as well need have contact with solicitor and advocacy. Also have rights to inform close people to him.
9. Involuntary person with mental health difficulties has to be treated with dignity and full respect of his Human Rights.
10. At the admission nobody can use violence, and all patience has to be protected if the sexual abuse have place in the Mental Health Service.
11. The adult and kids with mental health difficulties has to be in special care, support and protection.
12. Hospitals and all Mental Health Service has to provide a therapy, relaxation class, and other activities.

4. Authorised Officers

Based on Mental Health Advocacy it is important what this person is representative by self and if he is professional as well able to help people with mental health difficulties, Does he understand what it is mental health difficulties and does he know ethical behavior beyond the knowledge and personal culture i should have. Always when Mental Health Advocacy is going to meet first time client,

important is the first expression and how you welcome this person.

- Welcome the client with smile and open hand, and then introduce yourself
- Invite your client to the room and right table, so that no one disturbs you and to keep you are discreet.
- Ask open questions to give choice your client „, How can I help you?“
- Listening carefully and be interested to ask next questions
- Propose next appointment time
- Be confidential, professional, positive and control your emotions
- Inform your client about process and what he need to do yet, which documents he need to collect etc.
- Do not promise and don't give hope
- Ask gently and explain if they lie
- Provide your knowledge, informations, advocacy and grate communication skills
- Be professional and honesty, friendly clear and protect your self
- Listening client carefully because your client could be on mental health difficulties
- Expect respect from client and also respect him as well
- Finish meeting on time and polite ask him „,would you like to make next meeting?“
- Work with professional body and department to help your client and inform him of it
- Have time to know the story and what the problem is
- Do not involve with a aggressive people
- Continue conversation step by step, do not push client
- Do not guarantee that you will do everything the client expects you to do
- Show him the offer, give the reason and possibilities of this situation
- Inform client if you work behalf him
- Say „,This is what I understand from you, is that right?“
- Right notes and data only by permishion of your client
- Stay on touch and be relevant
- Offering the invitation to meet again

- Ask how the client found this service

Based on my practice as Community Health Advocacy in Cairde Organization in Dublin where I have been working some time ago, I can say that I have served clients in 3 different languages and I handled cases relating to all issues of life successfully. For some time I have been dealing with holistic and the spiritual role to help people as well. I have learned a lot and I'm glad to be supporting others from migrant and community. At my work I tried to work with my clients by holistic methods, listening to them carefully and providing emotional support as well. It has helped me to find that these people have mental health problems regarding the situation of life in which they are. My clients were very trusting to me and then they were very thankful to me for the successful support and advocacy. Always I have been working with professional bodies or departments in Ireland to have legal support for my clients. Also I went many times to the Social Welfare, Revenue, Dublin City Council or GP doctor as a translator because there is a big problem with the barrier of language. Working at Cairde I have had the chance to meet fantastic people from other organizations and attend conferences. At the time I started my membership with Mental Health Reform and supporting project for the Government as Mental Health and Human Rights in Ireland, which is successful and provided by the Highest Court of Ireland. In the meantime my work at Cairde was working together on a mental health project as an information booklet in plenty of different languages, which was also successful. Practice at Cairde gave me a lot of knowledge and professional experience as Community Health Advocacy and also plenty of positive possibilities for developing myself. I have been working with a fantastic and very professional team at Cairde. They always supported me and shared their knowledge. I understood better how the system in Ireland works, where to look for professional advice, and how all problems of life other people can put them on mental health difficulties risk. By holistic methods I can better understand people to give them the right directions of life, to help them develop and believe for positive results.

5. Interdisciplinary approach to care and treatment

Treatment has to be with respect, dignity and human rights. Should be provided a translator. People with mental health difficulties have the right to pack luggage with everything they need. People with mental health difficulties should be informed where they can make a complaint. The MHC Policy should be respected in the treatment.

6. Changing timeframes

Usually an involuntary person has to be in the hospital 2 weeks to wait for the solicitor's decision. At the time this person doesn't have shampoo, shower gel, cosmetics, pants, clothing, etc. also this person can't live in hospital and doesn't have anybody who can bring it to the hospital for him. For many people as me as well to stay very long time in the hospital was very boring, because there I have no gym, no yoga, no sunshine day and no chance to see my close people.

7. Enhancing safeguards for individuals

[Any comments you might have on changes to this aspect of the Act]

8. Therapy

Based on the therapy and help for the people with mental health difficulties and those family or partner is there offer from HSE Department as courses for. EOLAS Program Mental Health Information and Learning Programme for people with a diagnosis of Schizophrenia, Psychosis or Bipolar Disorder by HSE. To promote recovery EOLAS uses a unique model in the delivery of the programme involving self-experience, family members and clinicians working together to provide information and promote recovery. It consists of two parallel programmes, each lasting 8 weeks, a programme for service users and for families or close friends. Different topics are

covered each week with guest speakers for a number of sessions. Programmes are delivered by two co-facilitators, one of whom is a service user or family member and the other clinician. Collaborative Programme Design it is delivered and developed through a collaborative process. The project was developed by DR.Pat Gibbons and the Celbridge Adult Mental health Team, users of the mental health services and their families, SHINE,Irish Advocacy Network, Trinity College Dublin and Kildare Youth Services. EOLAS was initially funded by the Genio Foundation and is now funded by the HSE.The project is being supported by mental health services across the country and especially by mental health practitioners who are coordinating its delivery. The programme is evidence-based and has been evaluated. Regarding to the therapy there is plenty places where you can do yoga, zumba class and other courses which are available for free gate or in the community houses. In Ireland is plenty sports schools, gym and other sports centre which are provide activities also with the personal trainer, where you can be active and take care of your health condition. Because if your body is in the good condition, then your soul and mind are healthy as well. It is very important to be physically active because your immune system is produces hormons of happiness and your levels of adrealin increace. You turn negative energy into positive energy. Your body is the temple where your soul lives. So important is if you love yourself and how you treat your body so that your soul can be happy. Your thoughts and emotions are very important, whether you can control them and find a balance. Important is to know that sport and other activities are promote self-esteem and shape character. The contact with nature and animals is extremely important, as they are our guides, therapists and loyal friends. Physical activities and any courses or school attendance are very helpful to developmet intelectually yourself for. Also any activities like yoga, gym, courses, school and contact with animals is amazing and very needed.

9. Mental health tribunals

As my experiences, nobody told me about Mental Health Tribunal when I had been admitted to the hospital first time. Then in the Mother Hospital one nurse has told me about it when the doctor don't wanted to listening me, he don't wanted to let me go home when the solicitor gave me letter that I a voluntary and I no need to stay in the hospital longer. Then I have to fight with my doctor about my rights and correct diagnosis. At that time when I was ill, I understand that I have to fight for myself. That if I do nothing I'm gona lost my life and everything what I love, especially myself. Mental Health Tribunal should be more available for people with mental health difficulties and be focus on this what is going one in the hospital.

10.Change of status from voluntary to involuntary

I think it shouldn't happen but if yes, then this decision has to be make by Court and not depending doctor of Mental health Service in Ireland. Decision ,opinion from not depending doctor is very important because those doctors in Irish Mental health service have made wrong diagnosis and prescribed wrong medications. They are stubborn, by the decision. They usually have don't listening properly the person with mental health difficulties. As I have experiences, I needed to go to the not depending doctor psychiatrist to can receive properly diagnosis and recommendation for my doctor psychiatrist to change a medication and refuse those medication which have gave me side effects because my doctor don't wanted do it. He don't wanted to listen me. Then he has changed decision and respected this opinion.

11.Capacity

Based on my next day practice with MHC and Decision Support Service presented by Aine Flin, I have learned about Decision –Making Capacity of Act.2015 in Ireland. Decision Support Service has asked how Cairde can support people with MHC by law of Capacity of Act 2015. They are very happy to support professionally Cairde and also migrant people to educate them of it. Decision Support Service has explained to us how it looks all procedure of making capacity to person with mental health difficulties. They exist to promote the rights and interests of people who may need support with decision-making. Decision Support Service are a new service and are not currently operational. They will provide to the people information about this service and the things they can do to get ready.

A person's ability to make decisions themselves. Under this new law, this will be based on the person's ability to make a specific decision at a specific time. Advance healthcare directive is a legally recognised arrangement that lets you plan ahead for health care and treatment decisions. It lets you set out your wishes about these types of decisions in case you are unable to make these decisions sometime in the future. Based on Attorney when person who has the authority from an enduring power of attorney to make certain decisions on your behalf if you became unable to make them for yourself. It is a person who does not have to be a lawyer to act as your attorney. An assessment is used to confirm if a person has the ability to make certain decisions for themselves. Then a person will have the capacity to make a decision if they can demonstrate all of the following things:

- Understand the information relevant to the decision
- Recall that information long enough to make a choice
- Use or weigh up the information to make a decision
- Communicate their decision (or someone is able to communicate it on their behalf)

Based on co-decision maker, when a person who has the authority to make certain decisions together with you if you need support to make decisions. You can appoint someone you know and trust to be your co-decision-maker by making a legally recognised arrangement called a co-decision-making agreement. The legally recognised arrangement that you can make if you are unable to make certain decisions for yourself and require support. It lets you set out the types of decisions you want help with and give a person you know and trust the authority to make them together with you. Based on my enquiries to MHC if the migrant person on this stage is taking of him by law of capacity process when this person will decide to come back to their own country.

The process will take a long process. Person of capacity process have rights to ask DRS (Court) if want come back to their own country. There is a support by law of liberty patient with capacity. Then you can make complaint as patients with capacity to the DSC. If the person based on capacity is abused or it is used violence of physically or verbally and he is looking for help from Gardai or Lawyer they has to take responsibilities and help professionally this person with capacity of mental health. Aine said that Gardai will getting a training how to protect people with capacity and mental health difficulties. DSC is also supporting people with capacity of mental health difficulties. Based on the sorts of decisions which are covered by the new law, we can detail:

- Personal welfare, like deciding where you live and who will take care of you

- Health, if you should have an operation
- Property, like if need to sale or buy a house
- Money, like how you should spend or save your money

So Ireland is need a new law regarding to the capacity of people with mental health difficulties, because the law that is using at the moment is a very old law from 1871 year. Under this old law there are wards of Court system. Right now, if the Court decides that a person is of „unsound mind” and cannot manage they money or they personal care , then the Court can make the person a Ward of Court. So it is mean that the President of the High Court makes decision for you, there could be big and small decisions for. So after the new Act, will be no new Wards of Court and all wards come out of wardship within 3 years. Then will coming new way of assessing if someone has capacity to make a decision. There will be no medical test but functional test, which is regarding to:

- Understand information
- Retain information for as long as you need to
- Weigh up this information
- Communicate your decision
- The dementia, intellectual disability, acquired brine injury are none of this matters unless they actually affect your decision-making.

So you luck capacity isn't a full sentence. Capacity will be to decide a particular thing at the time when you need to decide it. So it is about ability not about disability. There is very important to intervene an little as it is possible and respect to everyone's dignity, privacy, bodily integrity and autonomy. Also important is to let people make up their own minds as much as possible. As well very important is to include person in the decision-making. It is very important to respect for will and preferences for. And then very important is to act in good fight and for the person benefit. There are three steps of making decision supporters by Court as learned it:

- Decision making Assistant (DMA)

So you can choice someone who be your making decision assistant who made help you to get information and explain it, but you are still make the decision yourself.

- Co-decision Maker (CDM)

So you can chose someone to make decision together with you. This person should be close friend or family that you trust them. You make a co-decision maker agreement that sets out the kind of decision that you want to make together with him.

- Decision making representative (DMR)

So if the judge in the Court has decides that you cannot make certain decisions even with the help of someone else, then the Court can choice someone called a decision making representative who will make decision for you. The court must consider whom you want as your representative person. Then legal Aid will be available and the court will decide what your representative is allowed to do and what they are not allowed to do. Important is that the court must your case regularly.

Based on capacity decision and Advance Healthcare Directive (AHD) which is a legal document and you use it to let people your wishes about medical treatment. Also you can choose a designated healthcare representative (DHR) to make decision in the future about medical treatments. This person is important and used only if you can't decide for yourself later one. So for me it was very important to know how I can support person with capacity Act as I'm Mental Health Advocacy. As I had have learned today I understand that I can work behalf this person and support to make compliant if this person need or other service as I can provide to support and protect this person. It is very important because people with capacity can be abused or dignity and liberty this person could be not respected by his representative. As Mental health Advocacy I can support my client and also explain the procedure of capacity and what it is mean. Because the barrier of languages could be problem for the migrant and ethnic group to understand this process and what it is capacity mean for them if they decide for. The problem is that plenty migrants people are alone in Ireland or the problem is community as Roma people with acceptance and understanding it. So that's why Mental Health Advocacy could be helpful and provide service as professional support. It is important to find close friend or to inform family this person who need to make capacity procedure of it, that this person need help or decided to come back home as well. The problem is that usually migrants are renting accommodation and do not work. They are already on the SWF payment or refugee status and do not speaking English language properly. So Mental Health Advocacy it is very important there to translate and to provide the first support of advocacy as the client wish and trust. Based on this problem it is very important to be confidential and working together with doctor and representing this person in the court if they need. It is very difficult to find close friend or family member to can organize them as DMA or CDM for the capacity process. We need to know that migrants people and from Roma Community they don't want situations like capacity process and mental health is for them very difficulty to understand because there is also barrier of culture. As I'm from Poland and based on my experiences with Mental Health Service I can't trust nobody in Ireland and to share my private. I prefer to come back home to my family and close friends than stay in Ireland based on capacity with people who I don't know very well. There is problem with landlords who are don't want people with mental health difficulties as they know. It is risk that person who the court decided to make as representative can share information and harassment or using violence on the capacity person supported for. As Mental health Advocacy I should support my client with capacity decision made on Gardai or lawyer appointment, especially because at the moment they don't believe people like and do not treat them seriously to provide protection for them.

12. Consent to treatment

[Any comments you might have on changes to this aspect of the Act]

13. Information and individual care/recovery planning

[Any comments you might have on changes to this aspect of the Act]

14. Inspection, regulation and registration of mental health services

[Any comments you might have on changes to this aspect of the Act]

15. Provisions related to children

Who will care of the children if the mother is admitted to the hospital?

AS my clients from Cairde has report that in the hospital is plenty times a sexual abuse and molested children with mental health difficulties, and the nurses are not

protect them. There is no reaction and not believes to protect children who is report them this problem. Children as well need therapy and activities in the hospital also special care after treatment when they are come back home. Usually at home parents are drink alcohol, taking drugs and using violence. To live in the house like this without properly recovery is not possible, and mental health service has to support children during full recovery.

16. Provisions related to the Mental Health Commission

17. Based on my next practice day, I have attended with Emilia Marchelewska from Cairde for the Mental Health Commission conference invitation on-line with Cairde presented to The Board of the @Mental Health Commission as part of their stakeholder initiative. We highlighted Cairde's work in the area of mental health and issues presented by our clients as minority and ethnic group. Emilia Marchelewska and I we where debriefing after all commissioners conversations and also we are answered for plenty quarries from. As I'm one of the participants of the Peer Mental Health Advocacy For Ethnic Minorities Program supported by the Irish Human Rights and Equality Commission.
18. Mental Health Commission was interesting about Cairde offer and her support for people. Commission was very satisfied that Cairde is providing service in 8 different languages and also supporting mental health service and minority clients. They were very interesting how Cairde is providing support and advocacy service in Ireland. Commission was very satisfy and interested about offer of Cairde and how we provide support with professional Body and other organisations for our advocacy also how Cairde is supporting people with mental health difficulties. Mental health Commission has asked me what they need to provide in the Mental Health Service yet, to make this service beneficial for the people with mental health difficulties and also for the professional Mental health Service in the future. Mental Health Commission was very interested about my own experiences with Mental Health Service in Ireland as minority and also what is working wrong inside this service, how patience and human rights are not respected and also how much big problem is with understanding diagnosis or this procedure of the treatment to the hospital and first contact with doctor. I have explained how is looks every day of patience and also where is problem of recovery. I suggested that it is special need for the therapy and any activities for the patients. That walk on the corridor from wall to the wall is very boring for people with mental health difficulties. Then I have make attention of the medications and diagnosis as well of the side effects that doctor usually didn't want to change, to reduce it and he isn't listening patience properly what it is an big problem with understanding what exactly happened this person with mental health difficulties and then to make right diagnosis. That prescribed medications are not good enough for patience with mental health difficulties because they are need a therapy, support and right recovery. Commission was very satisfied for the offer Mental Health Advocacy support in this service when I explained which problem patience has when they alone in Ireland and by admission to the hospital they cannot organize everything what they are need ,except landlord and employer, except fresh clothing and cosmetics, except Social Welfare payment and also contact with family or friends. Also I supported expectations of people with mental health difficulties that Human Rights and Patience Rights are very important for respect it. Mental health Commission also take attention of Mental Health Advocacy need in the Mental Health Service in Ireland and they were very interesting of this course provided by Cairde for our group.

19. Conclusion [A line or two to sum up what you hope to achieve with your submission, the changes you want made, or any other topic relevant to the submission]