



APPGA Meeting on the Mental Health Bill

Date: Wednesday 11th December 2024

Time: 15:00 – 16:00

Location: Room S, Portcullis House

Attendance:

Marie Tidball MP (Chair)

Alison Hume MP (Officer)

Baroness Browning (Officer)

Sadik Al-Hassan MP

Alex Barros-Curtis MP

Baroness Christine Blower

Jodie Gosling MP

Sojan Joseph MP

Alex Mayer MP

Perran Moon MP

Richard Quigley MP

Peter Swallow MP

Baroness Mary Watkins

Sharron Sumner, on behalf of Shockat Adam MP

Agenda

1. Welcome and Introduction – Chair Marie Tidball MP

Marie Tidball MP welcomed everyone to the APPGA meeting and briefly discussed her research on the use of sectioning orders used against autistic people in the Criminal Justice System, and pointed out dissonance within the act regarding Part 3. She then introduced the first speaker, Sam Forrester, the National Autistic Society's Policy and Parliamentary Officer (Mental Health).

2. Preliminary Briefing on Mental Health Bill – Sam Forrester (National Autistic Society) (15:05 – 15:30)

Sam from NAS delivered a presentation outlining the brief, which was produced in collaboration with MenCap, Voiceability, and CBF. The presentation outlined the current human rights scandal, the timeline and principles of the bill, the changes it makes, and areas of concern. Both the briefing and the presentation will be shared along with the minutes.

Questions were then taken from members.

Richard Quigley MP (Isle of Wight West): Asked where opposition to the bill and proposed amendments was expected to come from, and said he had no faith in ICBs to tackle this.

Sojan Joseph MP (Ashford): Spoke of his experience working as a mental health nurse and treating autistic patients under the Mental Health Act. Asked if we are confident that definition change will prevent admission.

Sam pointed to need for community support to prevent admission and confirmed NAS hopes to see a reduction in the number of autistic people detained under Part 3.

Baroness Watkins: Spoke about her experience as a mental health nurse and pointed to conflicts emerging from research in New Zealand which found that when similar bills were implemented too quickly and without services being built up first, it resulted in worse outcomes for autistic people and people with learning disabilities. Expressed concern that more people will be in prison or sleeping rough upon discharge due to a lack of appropriate accommodation.

Sam agreed that we need capacity expansion as soon as possible which ambitious aims should galvanize.

Baroness Blower: Said the obligation to present a costed plan raises the issue of where the government gets the funding and practitioners, and ask that the group be mindful of how to increase recruitment.

3. Arrival of Minister Kinnock (15:30)

4. Update from Minister followed by any questions for Minister (15:30 – 15:45)

Minister Kinnock introduced himself as the lead on the Mental Health Bill in the House of Commons (with Baroness Merron as overall lead in the Department of Health and Social Care, and in the House of Lords).

The Department wants to ensure autistic people and people with learning disabilities are treated with dignity and respect, which is “clearly not the case” under the current system. The number of autistic people and people with learning disabilities in mental health hospitals is “absolutely unacceptable” and is not delivering adequate service for patients, the community, or taxpayers. The Department wants people to have access to the support they need in the community and to keep people out of hospitals as much as possible.

Speaking to concerns about the need for institutional capacity, **Minister Kinnock** said he “absolutely share[s] that view”. He feels there has been a culture of performativity in introducing legislation without having the resources to deliver, which is bad for patient and institutional outcomes. He says the resources need to be in place and this discussion needs to take place beyond the bill getting royal assent.

Minister Kinnock also referenced a roundtable with autism stakeholders on the 10th of December 2024, at which the Mental Health Bill was discussed. He expressed that he was keen to work with the sector to coproduce the bill and coproduce outcomes.

5. Discussion on actions for APPGA members to take – Led by Chair (15:45 – 16:00)

To begin the discussion, **Marie Tidball MP** raised three primary concerns: (i) Section 2 and Part 3 diluting the definition change in Section 3, and the risk of people cycling under Section 2 or being “shunted” to the Criminal Justice System following deterioration due to lack of treatment; (ii) the need to strengthen processes around discharge and require greater assessment of

eligibility criteria, as well as ensuring there is appropriate care in the community; (iii) the lack of understanding of what “good” treatment looks like in hospitals and especially in the community due to previous chronic neglect of social care resulting in lack examples of best practice to follow.

Alison Hume MP and **Sadik Al-Hassan MP** raised issues regarding ICBs as the point of implementation. **Hume** was concerned about lack of investment and size of ICBs, and both were concerned about how to avoid a postcode lottery.

Minister Kinnock referred to the Building the Right Support action plan (2022) and the need to determine how much is still current and what needs to be changed without “overcomplicate[ing] things”. He took the point about ICBs being large areas to cover, but hoped that neighbourhood focus would be workable and said there is no appetite to change the ICB structure; rather, the 10 year plan pushes for a change in mindset and creating a culture of accountability and responsibility. He described the current “threshold culture” to access community care as “incomprehensible”, especially given the propensity for crossing that threshold leading to inpatient care. He explained the department are working on planning guidelines for NHS England on moving from hospital to community, and said ICBs will be held to account on their ability to move services into the community. Ultimately, the government is focused on decentralizing the healthcare system and wants to empower ICBs to be the point of delivery as they are citizen-facing. They will be empowered to deliver services while the central government should identify areas for improvement and hold them to account

Dave Nuttall stepped in to mention provision in the bill intended to help local provisions identify those with support needs to indicate what needs to be commissioned locally.

Marie Tidball MP mentioned that GP services are not empowered to do much, including giving specialist support and advice; there needs to be more adequately qualified and trained mental health specialists who are linked with GPs and community services. On behalf of **Shockat Adam MP** (Leicester South), Sharron Sumner referred to a crisis in Leicester, where whistleblowers have flagged that trainers who train GPs are facing burnout and want to leave the profession.

Minister Kinnock referred to the manifesto pledge to recruit 8,500 mental health specialists, which Baroness Merron is leading on.

Perran Moon MP (Camborne and Redruth) spoke about the experiences of many of his daughter's colleagues who are experiencing burnout, and asked about mental health provisions in mainstream education.

Minister Kinnock spoke about meeting with Minister McKinnell from the Department for Education, with whom he is putting together a joint bid to the spring spending review to on SEND and increasing capacity in mainstream education; the philosophy in the DfE is about ensuring neurodivergent young people are valued and affirmed in mainstream schools. He mentioned the commitment to have a trained mental health specialist in every school, which will probably be a trained teacher.

Jodie Gosling MP (Nuneaton) flagged concerns with lack of response when crisis teams are called, resulting in situations escalating to police and paramedics. People in distress then wind up in A&E, which is inappropriate and causes further deterioration. One constituent said that the hospital's response to her non-verbal autistic child's pain was "autistic children just scream", raising questions about the lack of understanding and training for professionals dealing with vulnerable people. **Marie Tidball MP** also mentioned that data needs to be joined up with Police and Ambulance services.

Minister Kinnock said that early identification of challenging situations is key to prevent them from reaching acute crises.

Dave Nuttall stepped in to mention provision in the bill which allows for information sharing and related guidance power which should be able to cover Police and Ambulance services.

Minister Kinnock concluded by saying that investment has to be coupled with reform "every time". He also noted that the autism diagnostic process is broken and this is one of the "biggest and brightest flashing red lights" on his dashboard. He said we need to increase capacity in the assessment process and there also needs to be a shift to provide pre-diagnostic support in the community rather than waiting for a diagnosis to be confirmed.