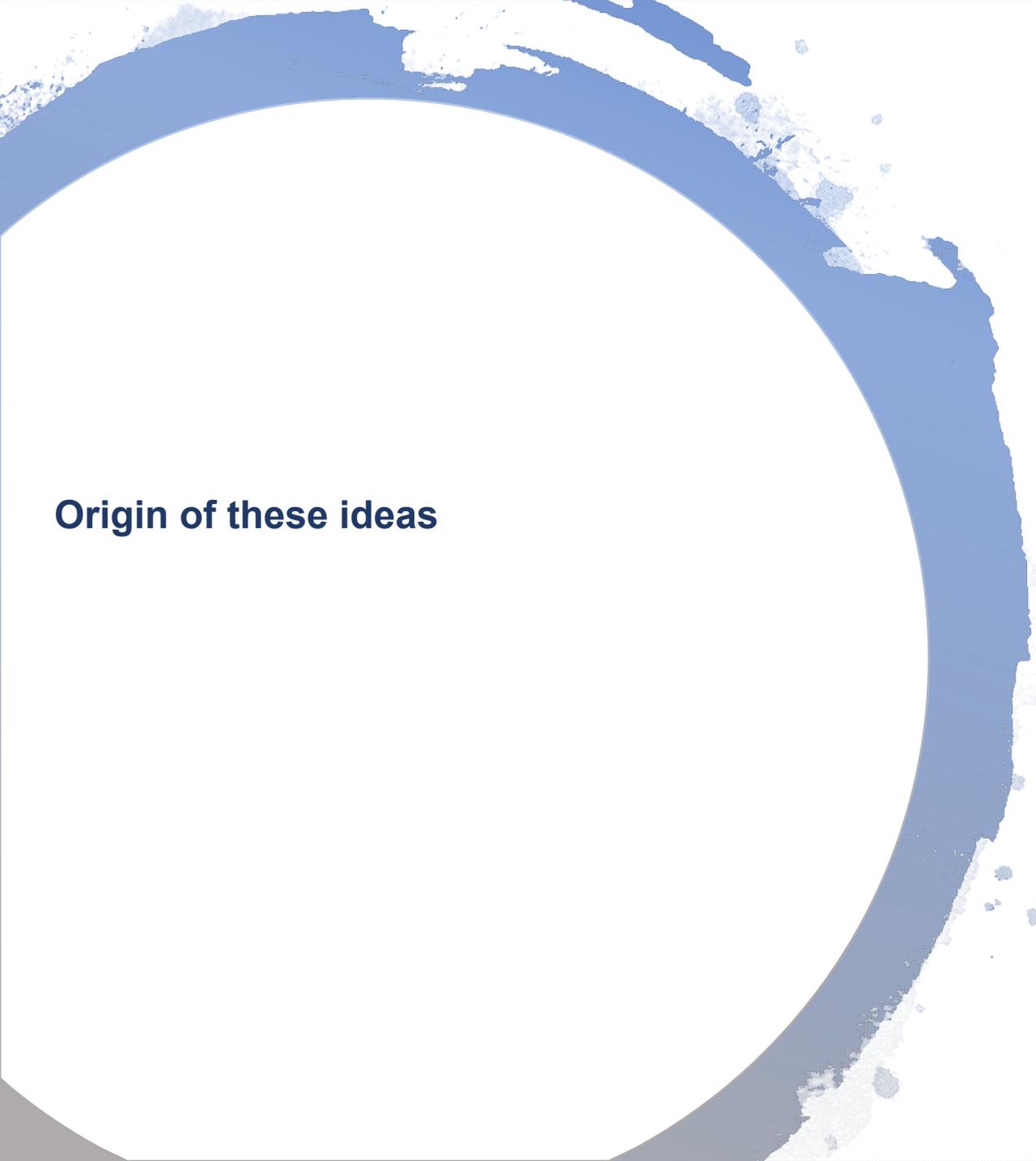


**S37 When Times change, so must we –
ideas for clinicians to help patients have a better
experience of
Mental Health Tribunal hearings**

**Dr Joan Rutherford, Chief Medical Member
FTT- Mental Health**

Welcome





Origin of these ideas

- Tribunal is inquisitorial not adversarial
- Feedback from the collaborative survey done by the Mental Health Tribunal Service, the Royal College of Psychiatrists' and South London and Maudsley NHS Foundation Trust on the experience of **patients** attending video Mental Health Tribunals in England
- Feedback from survey of **clinicians**
- Patient Focus Groups when devising feedback form
- Tribunals' Working Group – Independent MHA Review
- Ideas from Tribunal Members
- Comments from patients and carers
- Comments from patients' legal representatives



The magic 6 week window

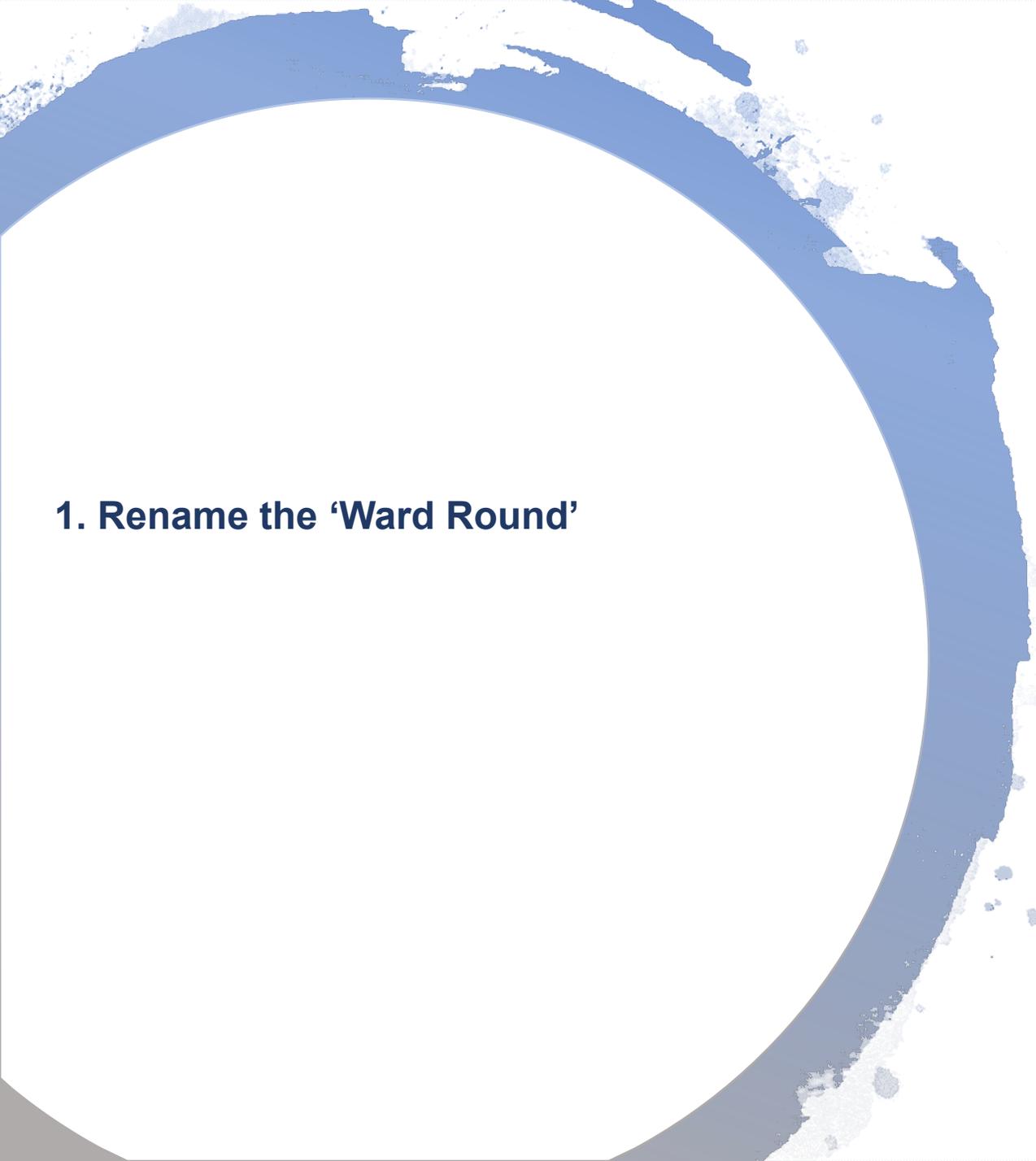
- ***New learning is lost if not used within 6 weeks***
- Use the 'Ideas' form
- Think of any changes you/your team can make
- Look for evidence of your change at 6 weeks
- Add this evidence to your portfolio/medical appraisal 'quality improvement' 'patient feedback' *.....understand your patients' experience of the care they receive and your work as a doctor, demonstrate you are taking account of your patients' views in developing your practice, identify areas of strength to build on or maintain, and any changes you can make to improve your practice, and review whether any changes you have made in response to earlier feedback have had a positive impact.*
<https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/guidance-on-supporting-information-for-appraisal-and-revalidation>



Ideas to help patients have a better experience at Mental Health Tribunal Hearings

+

Ideas	I /my team already do this	May do Yes/No	Will do Yes/No	Evidence of reflection after 6 weeks	Evidence of change in practice after 6 weeks
<p>1. Rename ‘ward round’ – the Tribunal panel want to know when the clinical team most recently discussed discharge plans</p> <p>Is it a ‘discharge planning meeting’ or a ‘progress review’ – depending on whether ward is acute, PICU or rehabilitation.</p> <p>Is the MDT meeting for the team or the patient?</p> <p>Record the patient’s view of the treatment plan at each review.</p> <p>You can then use this with the patient ‘do you think you’ve improved?’ or in the report for the tribunal.</p> <p>On 7th March patient stated.... On 7th June, patient’s view was</p>					
<p>2. Ensure all patients have information about the process of a tribunal - especially a tribunal hearing by video</p> <p>Leaflets: people with Intellectual Disabilities https://www.gov.uk/government/publications/what-to-expect-at-a-mental-health-tribunal-virtual-hearing-easyread-guide .</p> <p>Add Trust logo to CAMHS and adult leaflets for patients about tribunal process and statutory criteria. (available)</p>					



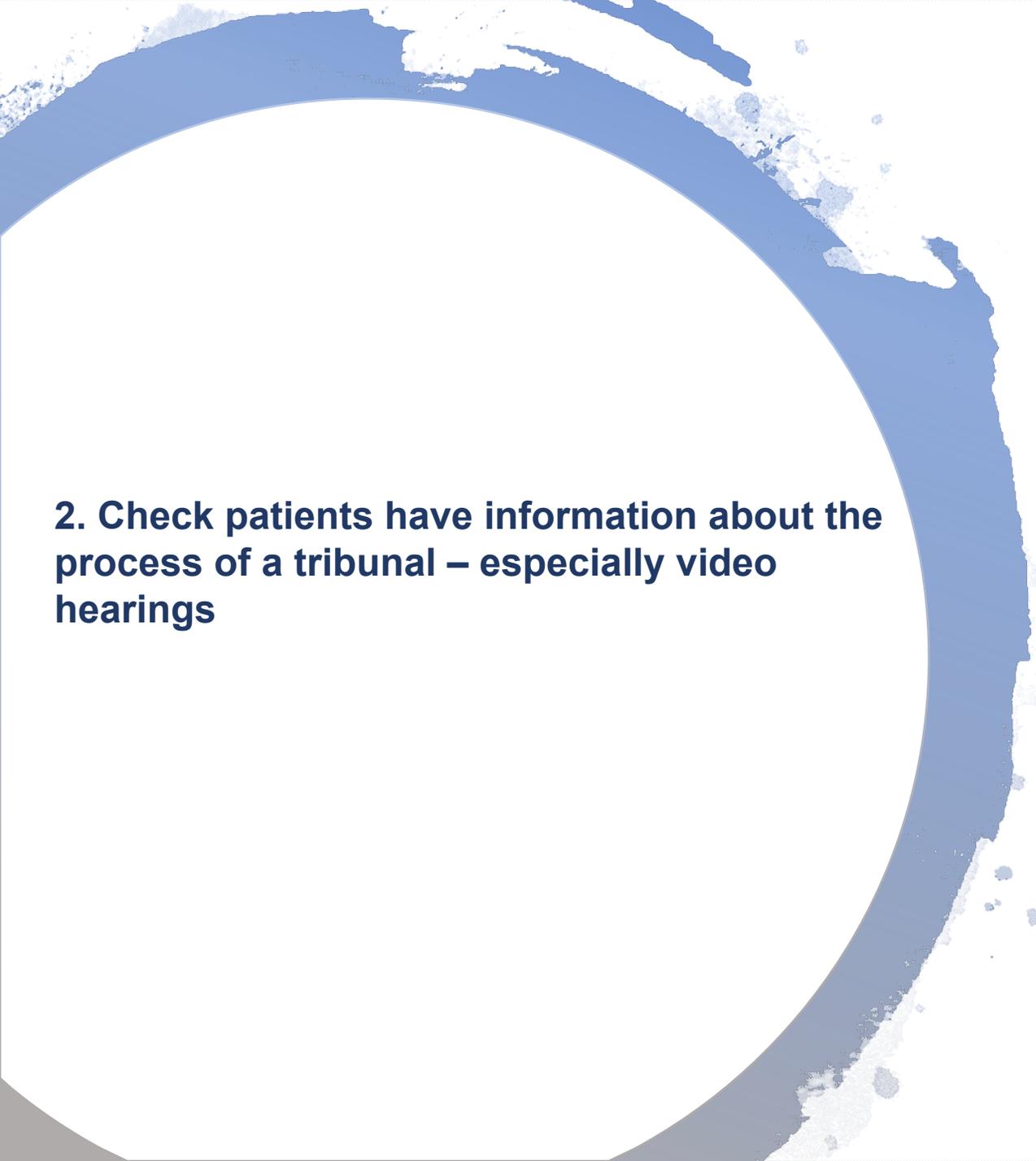
1. Rename the 'Ward Round'

Is this a 'discharge planning meeting' or a 'progress review' – depending on whether ward is acute, PICU or rehabilitation

Is it a MDT meeting for the team or the patient?

Record the patient's view of the treatment plan at each review

How is the patient prepared for the review?



2. Check patients have information about the process of a tribunal – especially video hearings

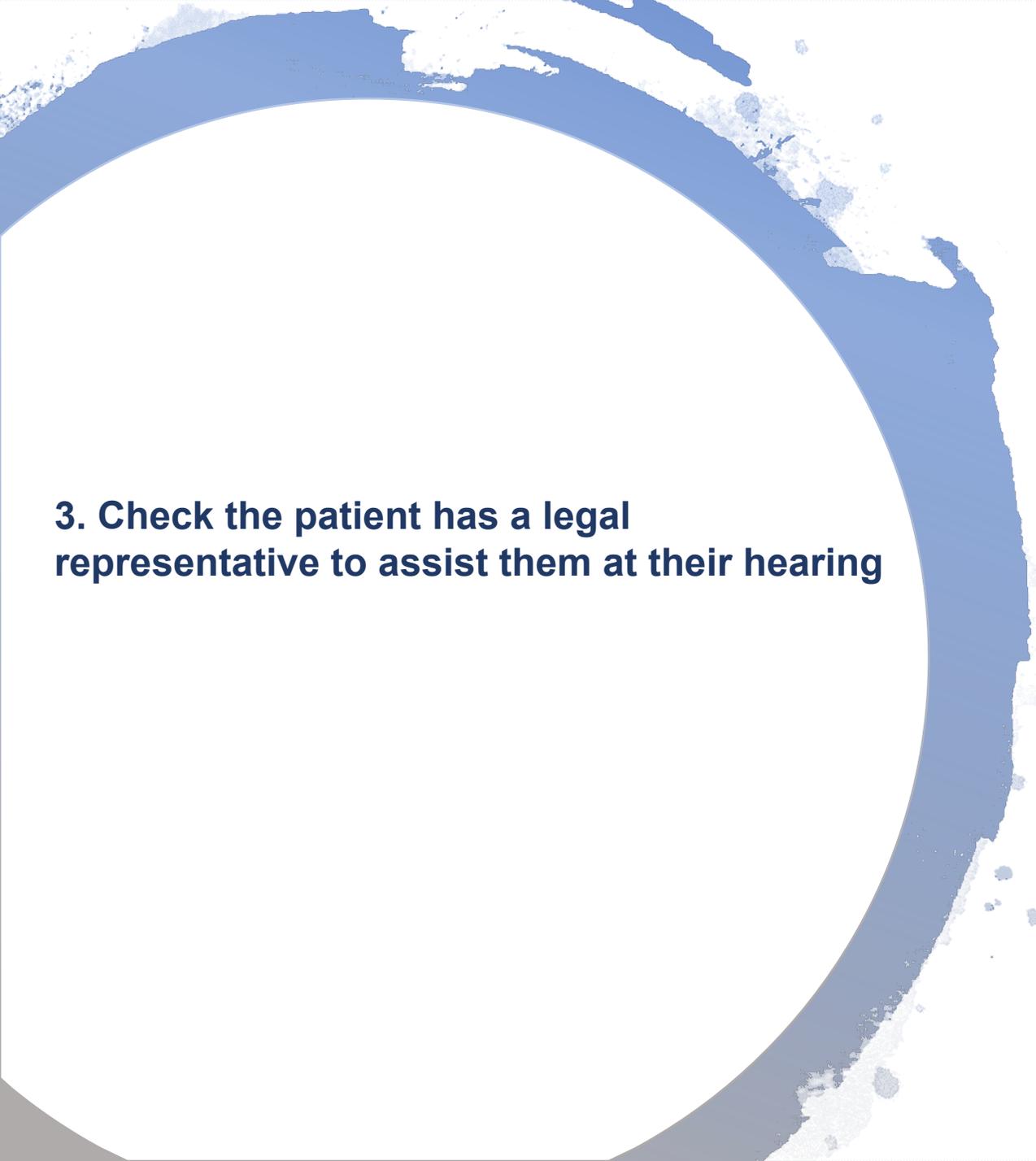
Access the leaflet for people with Intellectual Disabilities

<https://www.gov.uk/government/publications/what-to-expect-at-a-mental-health-tribunal-virtual-hearing-easyread-guide>

Use the leaflet for Child and Adolescent service users on YoungMinds

https://youngminds.org.uk/media/2779/youngminds_guide-to-mental-health_v3.pdf

Personalise the tribunal leaflet for patients of working age – covers remote hearings



3. Check the patient has a legal representative to assist them at their hearing

Ask the patient whether they have a legal representative

Do they have capacity to appoint a representative?

If the answer is 'no' to either – take action

Consider inviting the patient's legal representative to review meetings (Care Programme Approach etc.)

4. Is an interpreter required?

Who else can support the patient at their hearing?

Tell your Mental health Administrator as soon as possible.

The Tribunal will allocate a whole day for the hearing

Independent Mental Health Advocates (IMHAs) can attend MHT hearings



5. Recommend adjustments for a fair hearing in the medical report

When should the patient give evidence? – if they've not told you.

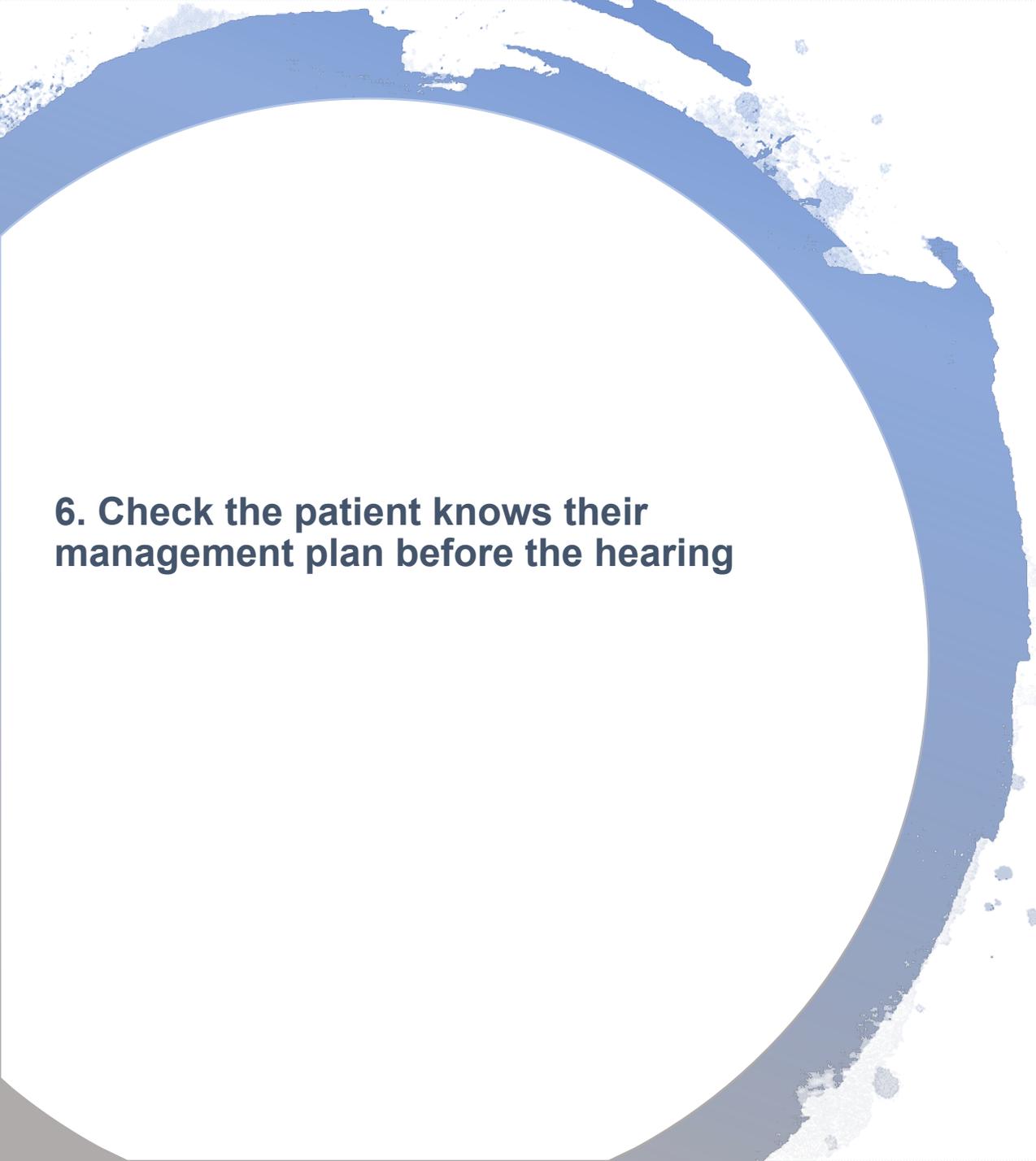
Would it help for them to speak first?

May help patients with Intellectual Difficulty, those who are agitated or confused patient, or a patient under 18

Patients may prefer to speak first – then they have told their view before the panel have 'made up their mind'.

Video hearings require more concentration and are more tiring for the patient

Is a half day sufficient for the hearing?



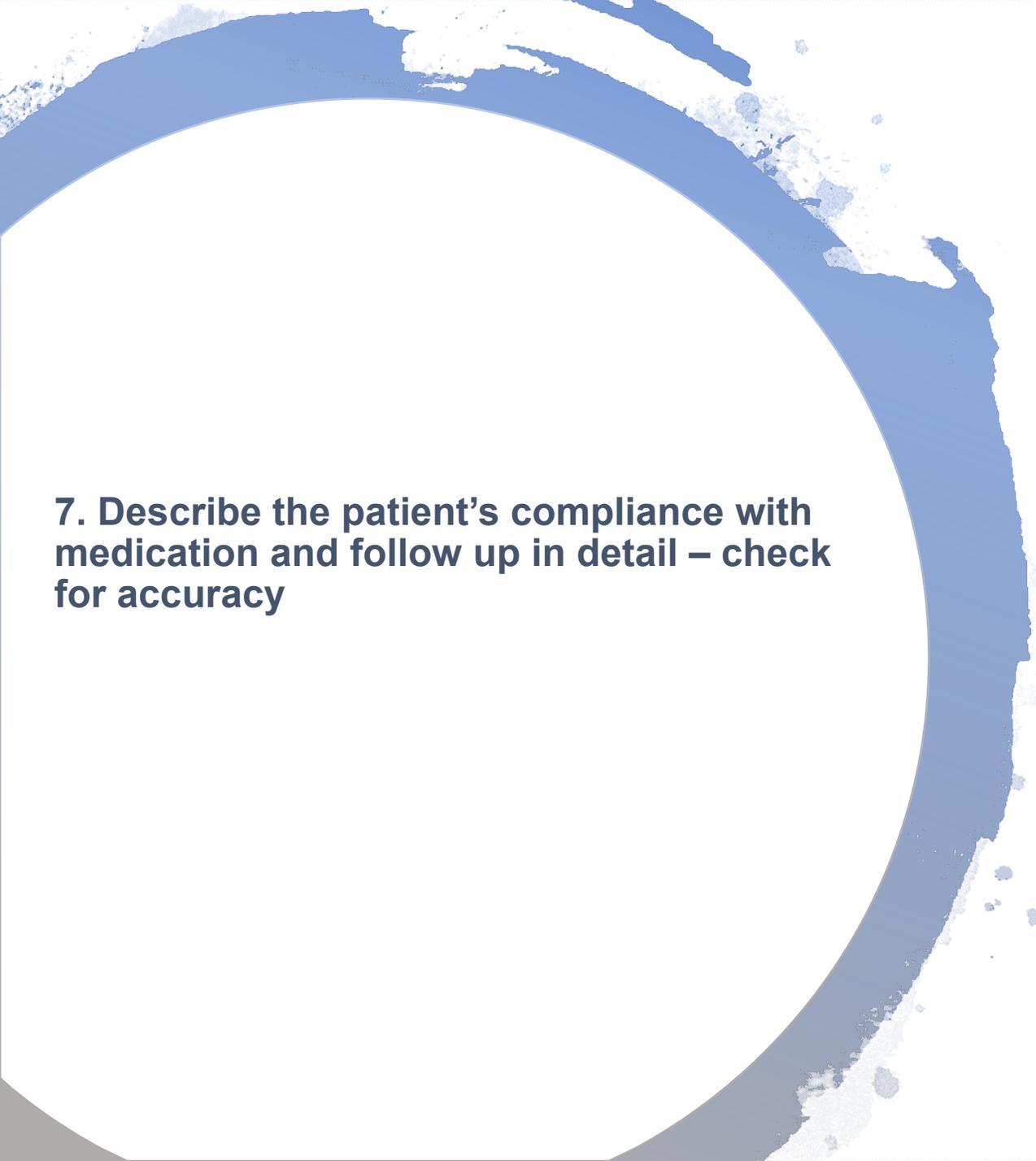
6. Check the patient knows their management plan before the hearing

Write and date the patient's view of this in the report.

Tell the patient your opinion about detention continuing and record the patient's response in the report

Specify what the progress needs to be before discharge can be recommended, and the potential timescale

Be specific so this can be recorded in the tribunal's decision if the patient is not discharged. This could help the patient understand why the tribunal panel decided as they did

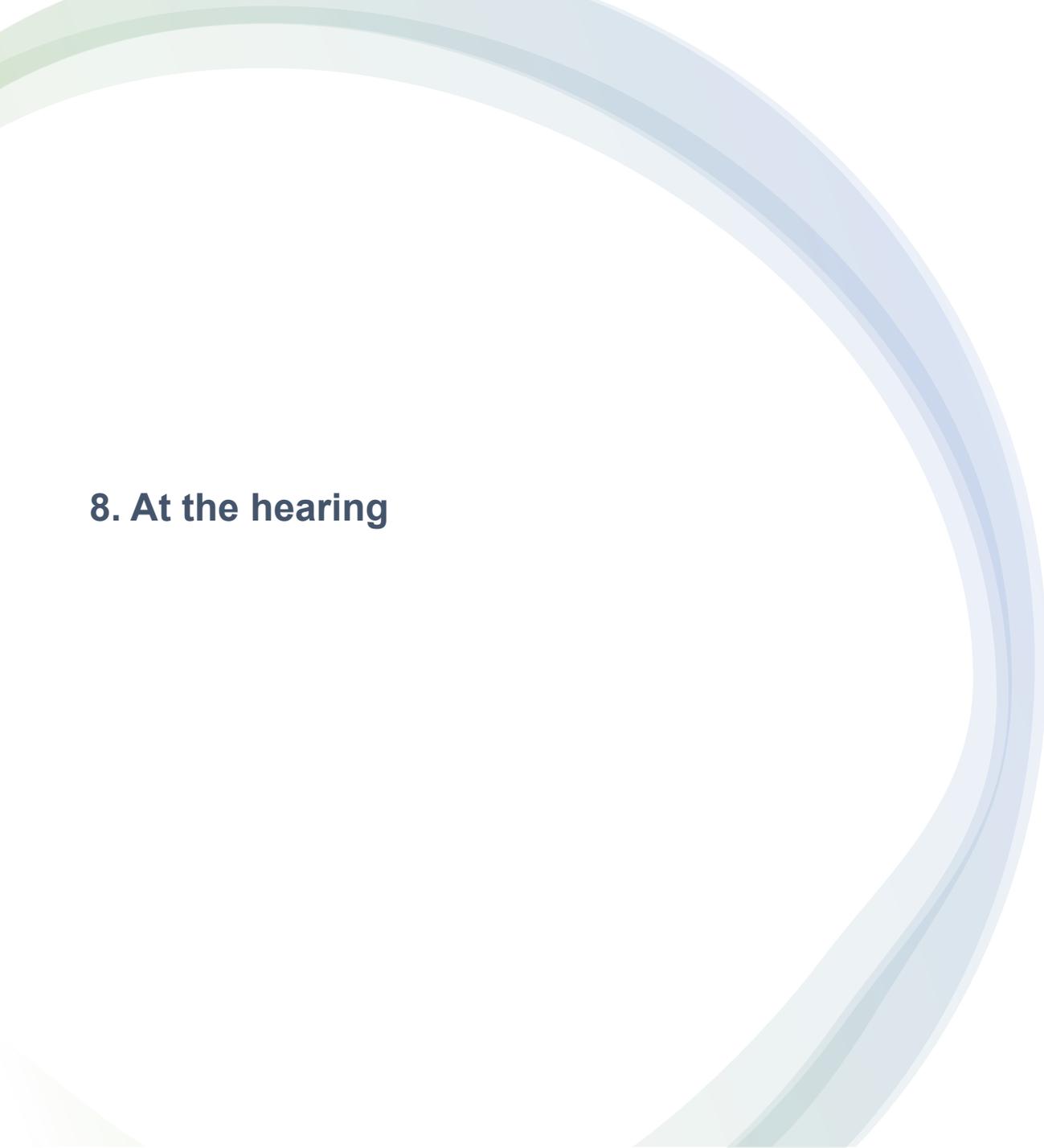


7. Describe the patient's compliance with medication and follow up in detail – check for accuracy

Describe in detail in hospital, and also in community.

Find the information in the records and talk to the community team.

Emphasise compliance when in recovery



8. At the hearing

Do talk with the patient on the day of the hearing – however briefly

Don't be afraid to concede points made by the patient's legal representative.

Treatment should help so the patient's symptoms should have improved

If apparently different picture of patient compliance on day of tribunal, don't challenge, be pleased, and comment on any consistency in previous pattern.



9. At the hearing

Acknowledge the patient may not agree with evidence but don't talk to them. This may provoke an argument and reflect poorly on the clinical team and patient

In any case, the patient should be aware of your opinion



10. After the hearing

Ensure a debrief for the patient especially if the hearing has not gone as they hoped

Has your patient understood the panel's decision and any reasons given for this?

Don't rely on the patient's representative to do this

Have a plan in place for the patient to manage their emotions – note all hearings are tiring

Read the decision – it should state the opinion on what progress is required.

You can then share that with the patient and plan progress.

Thank you

Do consider Quality Improvement ideas while listening to us all today

Overall - are there ideas that have helped your patients have a better experience that you would like to share?

-as a patient or carer, have you experienced good care you could tell us about?

