

## **Prisons should not be used as treatment centres for the mentally ill says Mental Health Commission**

### **Regional psychiatric intensive care units urgently required**

Prisons, or parts of prisons, should not be used as treatment centres for the mentally ill. This was one of the core points made by the Mental Health Commission, in its response to the Criminal Law (Insanity Bill) 2002.

In a document published today (Thursday, 3 April 2003), the Commission states that the total or partial use of prisons as treatment centres for persons suffering from mental illness or mental disorder is not appropriate and that such use is in contravention of the UN Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Health Care. In particular, the Commission highlights Principle 1.1, which states that, 'All persons have the right to the best available mental health care, which shall be part of the health and social care system'.

This position was one of the many amendments to the Criminal Law (Insanity Bill) 2002 suggested by the Commission in its submission to Michael McDowell TD, Minister for Justice, Equality and Law Reform. The Commission also recommended the reduction of the maximum period of committal to a designated centre for the treatment of mental illness from 28 to 8 days, in order to ensure that nobody is detained inappropriately or for longer than is absolutely necessary. The eight-day period should, in the view of the Commission, be subject to renewal to a maximum period of 28 days if recommended by the consultant psychiatrist.

While welcoming the alignment of the civil and criminal law provision in regard to mental disorder implicit in the Government's Criminal Law (Insanity Bill) 2002, Dr. John Owens, Chairman of the Mental Health Commission, highlighted several areas in the Commission's submission where amendments and additions were suggested to Minister McDowell.

"It is the view of the Commission that a number of significant amendments are required to the current Bill to ensure that the Bill is fully compliant with the provisions of the Mental Health Act 2001, the core legislative provision in relation to mental health services."

Furthermore, Dr. Owens stated that as currently worded, the Bill would only allow one option to the judiciary, i.e. committal to a designated centre if questions arose about a defendant's mental fitness to be tried. "The Commission is hereby proposing to amend the Bill to allow the judiciary a wider range of options and to ensure that the most appropriate intervention is offered to the person. The Bill should consequently be amended to facilitate remand of a person on bail to attend for assessment on an outpatient basis. It should also allow for an initial and immediate examination of a person by a consultant psychiatrist from a Commission-designated centre."

The Chairman in addition emphasised the opinion of the Commission that the Central Mental Hospital is the only unit in the state that can at present meet the needs of patients suffering from mental illness that require medium or high levels of security.

“Currently the majority of approved centres for the care and treatment of persons suffering from mental illness or mental disorder are units within general acute hospitals, which is in line with developments and best practice within modern mental health services. However, these are relatively small, open units and the staffing in general would not include personnel with the required levels of expertise in forensic psychiatry. Furthermore, these units are not designed to provide the medium to high levels of security that would be required in order to obtain the Commission’s approval as centres for the care of the mentally ill.”

Brid Clarke, Chief Executive of the Mental Health Commission, further stressed that due to the absence of regional psychiatric intensive care units, there are no suitable facilities at present for the detention of patients committed under this Bill or of those presenting with severe and persistent aggressive and disturbed behaviours. “It is the view of the Commission that an adequate number of regional psychiatric intensive care units will be required to implement the provisions of this Bill.”

The Chief Executive also highlighted the need to provide separate facilities for those aged under 18 who could be committed under the provisions of the Bill. “The placement of those under 18 in centres for adults is at variance with best practice,” said Ms. Clarke.

ENDS

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*Footnote*

The full Mental Health Commission submission is available on [www.setanta.ie](http://www.setanta.ie)

*Note to Editors*

The Mental Health Commission is an independent statutory body, whose primary function is to promote and foster high standards and good practices in the delivery of mental health services and to ensure that the interests of detained persons are protected. It was established with effect from April 2002 under the terms of the Mental Health Act, 2001.

The Commission will arrange for an independent review, by a Mental Health Tribunal, of all decisions to detain a patient on an involuntary basis and each decision to extend the duration of such detentions. The Commission will also be the registration authority for all hospitals and in-patient facilities providing psychiatric care and treatment.

The Commission will also be appointing an Inspectorate of Mental health Services, who will be responsible for visiting and inspecting any facility where mental health services are being provided.

*Media Access*

In order to facilitate media access, **Setanta Communications** has been appointed by the Commission to handle its media relations needs. Please channel all enquiries through Michael Moloney and/or Gavin Doyle of **Setanta Communications** who will act on our behalf.