



### PUNISHING THE SICK : REWARDING THE GREEDY

The Government's latest attempts to cut the Incapacity Benefit bill and return as many people as possible to work strikes terror into the hearts of many of those who have mental-health problems. It is not easy now to persuade anyone (including the mental-health professionals some times) that a mental illness is an incapacity which often prevents the sufferer from working or doing anything constructive. Those who experience such distress know this only too well.

The argument that work is good for your mental health is indisputable, although some times work may be the very cause of breakdown. What is disputed is that all of those who have mental health problems are able to work. This is clearly untrue and evident to anyone who takes the trouble to walk through Camden, whether the leafier greenery of Hampstead or the urban boredom of Gospel Oak. This seems to show that there is a flaw in the present version of the Recovery Model. The theory is based on the idea that everyone can and will make the journey back to wellness, work and all the benefits of citizenship.

This is a cruel myth. For some the journey into mental illness is one way. They are never truly the same again and will never be able to take up where they left off and return to their former existence. The need for those who are permanently troubled by mental illness to be recognised as disabled by their illness and afforded the same rights and benefits as anyone else in this category is clear. For some reason Society always takes against the mentally ill and decides they are not worthy. They are seen as a drain on the State particularly in terms of benefit payments and this is a drain which must be staunch. So, once again the battle for benefits is on. The Government says that we want to find out what you are capable of and help you to do it. It will train you to give you the skills that you need. While you are training then you can claim the new Employment Support Allowance (ESA). This is only going to make many people more ill than they already are with worries about the State insisting that they are fit for work and must come off benefits. It is cruel and insensitive and pretty pointless anyway when it is recognised that as a Nation we are about to enter a recession with unemployment on the increase.

The present financial situation was brought about by highly-paid bankers being reckless and lending money to those they knew would not be able to repay. Surely the Government will punish them and stop this happening again. No! it dare not do that because it would be exposing the flaws in its own policies. Instead it bails them out with billions of pounds. It must recover this money and the poor and mentally ill look as if they are going to have to pay the bill for the recklessness of the greedy.

# CONSULTATION, CONSULTATION, CONSULTATION.....

It's always nice to be asked what you think about something that you have an interest in. It makes you feel important and it's good to think that people want your view about an issue. It's disappointing when your view is then disregarded or does not seem to count. This is the experience that many people have of the consultations being carried out on health service issues. Camden residents have shown that they do not want Polyclinics but this has had no effect on the authorities that have decided that they are the way forward for the NHS primary care services.

In the mental-health world service users are very wary of consultation because it always seems that they go against the wishes of those consulted. This is famously what happened in the case of the Jamestown Centre in Adelaide Road. Users even took the Council to Court. Still they lost the Centre that they loved so much. A similar situation developed around the Tottenham Mews Walk-In. Closure was delayed, but in the end it closed leaving many questions unanswered including what kind of re-provision is going to take place.

Now, it's the turn of the Highgate Day Centre. This is a place with a long history as a therapeutic community and about which its service users feel really passionately. The consultation is being carried out by the Camden & Islington NHS Foundation Trust on behalf of Camden Council who actually own the building and pay for the service. It started with a well-attended meeting on 10th September at the Salvation Army Hall in Chalk Farm. Users and supporters of the Highgate Day Centre were there in force and they made their feelings known—they like what the Highgate Day Centre provides and they do not want to see any change. That is not actually one of the options in the long document about the future of this Centre. The Consultation has been wide and Lone Tonsgard, the Project Manager, has gone to many services to seek the views of those who use them. She will have received a variety of views on the three options outlined in the papers: Employment & Training; Pathways Centre; Mental Health Well-being Centre. The final public meeting will be held at The Irish Centre on Wednesday, 5th November from 5.00—7.00 pm. This will be the last public meeting and the consultation period then comes to an end on 28th November. This consultation has been wide and deep; it will be interesting to see how the service user views are accommodated and what the outcome will be.

At least the consultation on the future of the Highgate Day Centre has been held in the open. It is hard to say the same for the Foundation Trust's consultation on its Service User Involvement Strategy. For a long time the only source of this document was the FT's website which remains as poor and difficult to navigate as ever despite promises that it is going to be updated. Eventually the document was sent out, but it was written in such a way that the members of Camden's Health Scrutiny Committee found it impossible to read. This is another clever way of making real consultation impossible: make the documents inaccessible and unreadable. When the Strategy was presented to the FT's Governors they had serious concerns about its content and its proposals. They managed to prevail on the FT to extend the consultation period but there seems little chance that the proposals will be changed greatly particularly the oversight committee which is not only proposed but has already been established. It was promised that the consultation would be widened using the FT staff. There must be a first time for everything.

## CMHC NEWS

CMHC had to abandon its proposed Annual General Meeting on 22nd September 2008 for a number of reasons, among them the absence of the Annual Accounts.

The Directors promised that they would hold the meeting within 30 days and keeping to their word the CMHC AGM—its first as a Company—was held in the Conference Centre at St Pancras Hospital on 22nd October. They undertook that the Annual Accounts and Annual Report would go out to Members in the intervening period together with all the other documentation. This was achieved and CMHC brought itself into compliance with the Charity Commission and Companies House as can be verified from the websites of these organisations. Failure to do this had been the source of a number of complaints.

There were not many Members of CMHC there and it was a meeting which will be remembered for its anger and sorrow at what has happened to an organisation that people value and used to trust. Over the last couple of years much of that has withered away and people have seen CMHC as an organisation which could only look inward and did not seem to care much about those who it was set up for, the people who experience mental distress and who found its apparent imploding adding to that. Much of that came out in the passion and distress displayed at the meeting. Yet there was hope that something could come out of what was there. The Directors spoke of their own wishes to deliver for the Members an organisation that they could rely upon and feel part of. The worst part of any mental illness is feeling alone and isolated. It is part of CMHC's role to let those suffering know that other people have been there too and appreciate what it feels like. That knowledge can often sustain someone through the darkest despair.

CMHC added two to its number of Directors. Councillor Penny Abraham, who many people know is so honest about her own mental health problems and has worked tirelessly to improve the experience of others. Heather Thompson who many will remember as a Liberal Democrat Councillor who took up the cudgels during the battle for Jamestown. Both were welcomed warmly to the Board with the hope that they could work with the other Directors to develop a more outward-looking CMHC. To add to these, it was announced that Councillor Pat Callaghan, who is a Labour Councillor for Camden Town with Primrose Hill, would join the Board as a co-optee at its first meeting. This meant that the Board was gaining the strength of two serving Councillors who have long been interested in mental health—Pat Callaghan is currently a member of Camden's Health Scrutiny Committee—and a former Councillor. They would bring with them all the skills and expertise that they have developed to add to the organisation.

Mrs Malti Zaveri has served on the CMHC Board for many years, but she has now decided that the time has come to retire. She will be missed for lots of reasons and CMHC is duly thankful to her for all her efforts in the good and bad times. CMHC hopes that it will still see her at its various functions, Claire Reidy, who was employed as a Project Officer and worked mainly with the Camden Borough User Group (CBUG) has left CMHC at the termination of her six-month contract. She made lots of friends during her short period with the organisation and she will be missed.

CMHC now has eight Board Members: Penny Abraham, Andrew Blair, Pat Callaghan, John Cameron-Nixon, Sean Cashin, Martha Kifle, Angela Raja-Chowdhury, Heather Thompson. The Board elected Penny and Angela as Co-chairs in an attempt to take the organisation forward to make it the service-user organisation that service users want.

The CMHC working arm, CBUG, gave a brief outline of its activities at the AGM when David Hayes and Robert Ryder spoke about the work the group was doing and what it had achieved over the last year. It has increased in numbers now having thirteen members and it has also taken on some different tasks.

One of the main activities carried out by CBUG is the Patients' Councils on the in-patient wards at the Huntley and Grove Centres. These have developed so that CBUG Members go to the Wards on a monthly basis and discuss with the patients the way that the wards are run and any issues that might arise. These can be about food, ward maintenance or about personal issues and how they may gain help. This has developed and is developing into one of the principal and most important activities of CBUG and those who take part find it very rewarding. There is a suggestion that the Patients' Council programme should be extended to St Luke's Hospital Woodside, but this will depend to some extent on establishing how the Patients' Councils are going to be funded and what their remit is to be in the future. iBUG has been providing a Patients' Council at the Highgate Mental Health Centre inpatient wards for a long time.

CBUG have also been playing quite a part in facilitating meetings between service users and professionals and in consultations. In this role they most recently facilitated the first public meeting around the proposals for the Highgate Day Centre developments. They also played a similar role in the development of the new Day Centres when service users meet with Commissioners.

CBUG have become involved in lots of different areas, earlier undertaking a 'mystery shopper' exercise at local GP surgeries. There is a report on this piece of work which will soon be available on the CMHC website. Their most ambitious project is still in the developmental stage when they hope to produce a film about the experience of the mental health system of black and ethnic minorities and refugees. At the present time, they are working on the structure of this and it is expected to go into production by the beginning of 2009. In 2009 the CBUG Open Meetings will also begin again so that there is an opportunity for people to come along and listen to CBUG Members talking about the work that they do and engage with them and even join CBUG. There are lots of new and different tasks that it could take on but it needs to develop capacity and funding streams for more work.

At their first Board Meeting the Directors of CMHC were obliged to consider lots of things including the possibility that CMHC itself may no longer be funded after its current contract runs out at the end of March 2009 and what a tragedy that would be if this long-running organisation with a distinguished history in the user movement was no longer thought worthy of being funded. The Board knows that the Members would not want to see an end to CMHC but they do want to see it regain the position that it once owned. They have pledged themselves to working hard to try and achieve this in a relatively short period. But the Board meeting was not all about the gloomy. It was keen to show that CMHC still has a sense of style and fun and so they have decided that this year's **Christmas Party on Friday, 12 December from 5.30 till late** will be really special and an opportunity for people to get together and enjoy themselves with some different features to those that we normally have.

The CMHC website is available again now at [www.cmhc.org.uk](http://www.cmhc.org.uk) and it is hoped that this will be developed fast as a resource to provide information. In keeping with the Green Agenda and in order to reduce our carbon footprint, The Camden Bugle is now available electronically and on our website. Please let us know if you no longer want paper copies.

## CMHC NEWS (Continued)

One of Claire's tasks in her role was to try and obtain more funding, particularly for CBUG projects and just as she was leaving she had success in this with a grant of £500 from the Mercers' Company. CMHC is very grateful to the Mercers' for their generous donation and CBUG will discuss how this additional money may be used.

### **North & South Camden User Forums**

The North Camden User Forum (NCUF) on 7th November and an added South Camden User Forum (SCUF) on 21st October were both set up to look at the current consultation on the future of the Highgate Day Centre. Neither was well-attended, but that did not stop important points being raised.

The Bugle goes to press as the October SCUF is about to be held with Sarah Sproson from the Oscar Hill Service (Oscar Hill is a psychiatrist who used to work in Camden & Islington) talking on the subject of Psychological Therapies. Under the government's proposals for Increasing Access to Psychological Therapies (IAPT) this issue is high on the mental-health agenda.

**The next NCUF will be held on Tuesday, 4th November from 5.00—6.30 pm in the Meeting Room in The Grove Centre at The Royal Free Hospital when Terri Forward will be coming along to talk about 'Supporting Smokers to Quit'.** This is a particularly significant area in terms of public health and the agenda to reduce smoking. Camden & Islington NHS Foundation Trust is now non-smoking throughout.

**The last SCUF of the year will be held on Tuesday, 25th November from 5.00—6.30 pm in The Conference Centre at St Pancras Hospital when Louise Randall will be talking about 'Eating Disorders'.**

### **Camden Annual Service Users' Conference**

This year's Annual Service User's Conference will be held on the afternoon of Thursday, 20th November 2008 in The Council Chamber at Hampstead Town Hall. The subject will be one that many people find interesting, if difficult —'Your Race, Your Culture, Your Mental Health'. This will be an opportunity to explore some difficult and controversial issues and certainly will not just be another BME exercise, since everyone has a race and a culture and these interact. There are many issues around mental health and race and culture but these are not confined to the patient. The doctor, the clinical and other staff all have races and cultures too and these influence the interactions.

Dr Sushrut Jadhav is a part-time Consultant Psychiatrist with the Foundation Trust. He used to work on the Mornington Psychiatric Intensive Care Unit at the Huntley Centre where he was involved in research in testing the efficacy of Cultural Formulations. He is also an academic in the Department of Mental Health Sciences at University College London where his speciality is cross-cultural psychiatry. Coming with him are the two Research Fellows, Dr Samrat Sengupta, who is also a consultant psychiatrist at Broadmoor Special Hospital and Jane Derges who recently did research on the war in Sri Lanka.

This promises to be a really interesting and exciting afternoon and CMHC hopes that

there will be many service users there to look at issues which are all-too-often not spoken about because of people feeling that they may be considered insensitive or even racist. A buffet lunch will be served from 12.30 pm before the Annual Conference which will start at 1.00 pm and run until 4.30 pm. Since CMHC needs to make arrangements for the food and arrange the room then we need people to let us know if they are going to attend.

## **MENTAL HEALTH DAY CENTRE SERVICE USER EVENT**

### ***LISTENING TO SERVICE USERS***

It is more than a year ago now since changes were made to the way that Mental Health Day Centre Services in Camden. Day Centres are now open 365 days a year, with more sessions and a wider variety of activities on offer.

In September 2007 we hosted the event 'Your Day Centre, Your Say'. Commissioners are now hosting another Mental Health Day Service User on 4th December.

Angela Neblett and Temmy Fasegah, the Commissioners and the Day Centre Managers would like to invite all those who use the Crossfield, Holy Cross and Barnes House Day Centres to come along to talk about their experiences at these centres since the changes were made. This event will be facilitated by Yvonne Christie, who people may remember has facilitated other Day Service user meetings. Local Councillors and CMHT staff and managers are also being invited.

Further information on this event will be available in the Day Centres and the next edition of The Camden Bugle.

The details are: **Date: Thursday, 4th December 2008**

**Time: 11.30 am — 4.30 pm**

**Venue: Salvation Army Chalk Farm**

**The Salvation Army**

**10 — 16 Haverstock Hill**

**LONDON NW3 2BL**

**Lunch will be provided.**

To reserve a place, please contact Shanta 020 7974 6987 or [shanta.joseph@camden.gov.uk](mailto:shanta.joseph@camden.gov.uk)

Further information is available from Helena Quinn (020 7974 1358 or [helena.quinn@camden.gov.uk](mailto:helena.quinn@camden.gov.uk)) or Temmy Fasegha (02 7974 6640 or [temmy.fasegha@camden.gov.uk](mailto:temmy.fasegha@camden.gov.uk)).

# MENTAL HEALTH ACT

This Government was always concerned to change mental health law. It was a long and hard road where they met resistance from almost all the groups involved – psychiatrists, users and carers and lawyers. The House of Lords and a Joint Committee rejected it.

Governments usually get their way and this one was just as successful. Eventually, there was a new act, the Mental Health Act 2007. This Act amends the 1983 Act rather than superceding it. The principle changes brought about by this Act come into force on 3<sup>rd</sup> November 2008. A copy of the Act can be found at [www.opsi.gov.uk/ACTS/acts2007/pdf/ukpga\\_20070012\\_en.pdf](http://www.opsi.gov.uk/ACTS/acts2007/pdf/ukpga_20070012_en.pdf)

## Summary of the Amendments to the Mental Health Act

**The main changes to the 1983 Act made by the 2007 Act are:**

**Definition of Mental Disorder:** it changes the way the 1983 Act defines mental disorder, so that a single definition applies throughout the Act, and abolishes references to categories of disorder. These amendments complement the changes to the criteria for detention.

**Criteria for Detention:** it introduces a new “appropriate medical treatment” test which will apply to all the longer-term powers of detention. As a result, it will not be possible for patients to be compulsorily detained or their detention continued unless medical treatment which is appropriate to the patient’s mental disorder and all other circumstances of the case is available to that mental disorder and all other circumstances of the case is available to that patient. At the same time, the so-called “treatability test” will be abolished.

**Professional Roles:** it is broadening the group of practitioners who can take on the functions currently performed by the Approved Social Worker (ASW) and Responsible Medical Officer (RMO).

**Nearest Relative (NR):** it gives to patients the right to make an application to displace their NR and enables County Courts to displace a NR where there are reasonable grounds for doing so. The provisions for determining the NR will be amended to include civil partners amongst the list of relatives.

**Supervised Community Treatment (SCT):** it introduces SCT for patients following a period of detention in hospital. It is expected that this will allow a small number of patients with a mental disorder to live in the community whilst subject to certain conditions under the 1983 Act, to ensure they continue with the medical treatment that they need. Currently some patients leave hospital and do not continue with their treatment, their health deteriorates and they require detention again – the so-called “revolving door”.

**Mental Health Review Tribunal (MHRT):** it introduces an order-making power to reduce the time before a case has to be referred to the MHRT by the hospital managers. It also introduces a single Tribunal for England, the one in Wales remaining in being.

**Age Appropriate Services:** it requires hospital managers to ensure that patients aged under 18 admitted to hospital for mental disorder are accommodated in an environment that is suitable for their age (subject to their needs).

**Advocacy:** it places a duty on the appropriate national authority to make arrangements for help to be provided by independent mental health advocates.

**Electro-convulsive Therapy:** it introduces new safeguards for patients. In addition, the changes to the Mental Capacity Act (MCA) provide for procedures to authorise the deprivation of liberty of a person resident in a hospital or care home who lacks capacity to consent. The MCA principles of supporting a person to make a decision when possible, and acting at all times in the person's best interests and in the least restrictive manner, will apply to all decision-making operating the procedures.

#### **Peer Lead Briefings**

Look out for briefing sessions on the changes to 1983 Mental Health Act, which will be advertised in your local mental health services in the next couple of weeks.

**Further Information can be found at:** <http://mhact.csip.org.uk>

Despite the fact that this is the Mental Health Act, it is not the only document which needs to be considered. There is a Code of Practice too which gives guidance as to how the Act should be applied. English Law is peculiar in that it is not set simply by what the Act of Parliament says. Much more of it is how the Courts and the Judges interpret the law and particularly how the Superior Courts decide. This is the significant feature of the Common Law system. Now that there is also a Human Rights Act then all law needs to be seen in relation to that Act for it usually may not conflict.

It will take some time yet before the law is interpreted and the real effect of the new Act will be seen and its limitations decided by the Judges. It can take many years for an important decision to be made as the case passes from the High Court through the Court of Appeal possibly finally ending up with the House of Lords. It need not stop there for this still the possibility of making an application to the European Commission of Human Rights once all the domestic remedies have been exhausted. The Commission may refer a case to the European Court of Human Rights in Strasbourg where a panel of European Judges will decide. In the European Court of Human Rights, it is the Government of the country which is the Respondent and the individual who is the Applicant. This was the position in the significant Bournemouth Case (HL v. United Kingdom) where the lawfulness of detention under the provisions of the Mental Health Act was challenged and the European Court of Human Rights overturned the decision of the House of Lords, which had itself reversed the decision of the Court of Appeal. The case of Munjaz on seclusion is also being challenged in the European Court of Human Rights. This is a case which came from the detention of Colonel Munjaz at Ashworth Hospital.

## **MISSION STATEMENT**

The Consortium is a voluntary organisation, which operates in the London Borough of Camden.

It is run by its members who are users, former users and survivors of mental health services in Camden. Its purpose is to enhance the quality of life of its members by promoting social contact and support, enabling them to take control of their own lives.

We promote equal opportunities and positively value individual differences and choice.

We combat negative prejudice and stereotypes of users of mental health services.


We seek to influence professionals and public opinion, to challenge poor practice, and to improve the quality and variety of mental health and related services.

To achieve our goals we work with other voluntary bodies, statutory and individual allies.

This is Camden Mental Health Consortium's Mission Statement. It should tell people why we exist and what we stand for. The Camden Bugle is very much a part of this. It is our way of talking to the world at large. Its role is varied, but one thing that it must do is keep the service users of Camden informed about what is going on in the mental-health world and keep that world aware of our existence and suffering.

The very reason for CMHC's existence is that its Members share the experience of mental ill-health. CMHC is an ideal vehicle for us all to collaborate and try to explain mental illness to the wider public. The public understanding of what constitutes mental health is very low and it follows that the public understanding of mental ill-health is lower still. CMHC can do something about that.

# Diary & Events

DATE & TIME	VENUE	EVENT
<b>Tuesday 4th November 5.00-6.30pm</b>	Basement Meeting Room Grove Centre Royal Free Hospital Fleet Road, NW3	<b>CMHC North Camden User Forum</b>  <b>Terri Forward will discuss 'Supporting Smokers to Quit'</b>
<b>Wednesday 5th November 5.00 – 8.00pm</b>	London Irish Centre Murray Street, Camden Square LONDON NW1	<b>Highgate Day Centre Public Consultation Meeting</b>
<b>Thursday 13th November 6.00—8.00pm</b>	Salvation Army Centre Chalk Farm Corps 10-16 Haverstock Hill LONDON NW3 2BL	 <b>Camden Council's Mental Health Liaison Group Meeting</b>
<b>Thursday 20th November 1.00pm-4.00pm</b>	Council Chamber Hampstead Town Hall 213 Haverstock Hill London NW3 4QP	<b>CMHC Annual Service Users' Conference</b>  <b>'Your Race, Your Culture Your Mental Health'</b>
<b>Tuesday 25th November 5.00pm-6.30pm</b>	Conference Hall, Conference Centre St. Pancras Hospital 4 St. Pancras Way LONDON NW1	<b>CMHC South Camden User Forum</b>  <b>Louise Randall will discuss 'Eating Disorders'</b>