

Investigating deaths occurring during compulsory care and treatment under mental health legislation in Scotland

Section 2: Summary of revised process proposed by the Commission

Q1. Q1: Do you agree that the Commission should be responsible for initiating, directing and quality assuring the process of investigating deaths during compulsory treatment in all cases?

Yes

Q2. Q1a: Do you foresee any difficulties with this arrangement?

Only if there is no barrier to independence of the investigation by other groups with vested interests i.e. local health boards.

Q3. Q1b: How could such difficulties be addressed?

By giving the Mental Welfare Commission complete autonomy in these investigations.

Section 2: Summary of the revised process proposed by the Commission

Q4. Q2: Do you agree that the Commission should be responsible for producing and disseminating an annual report on the results of the investigations as described in paragraph 30 of the consultation document?

Yes

Q5. Q2a: Do you foresee any difficulties with this arrangement?

No Response

Q6. Q2b: How could such difficulties be addressed?

No Response

Section 2: Summary of revised process proposed by the Commission

Q7. Q3: Do you agree that the Commission should develop guidance and standards for use by local services when undertaking investigations into deaths during compulsory treatment?

Yes

Q8. Q3a: Do you foresee any difficulties with this arrangement?

No

Q9. Q3b: How could such difficulties be addressed?

No Response

Section 2: Summary of the revised process proposed by the Commission

Q10. Q4: Do you have any comments on the revised process as set out in Section 2, paragraphs 34 to 43, of the consultation document?

No

Q11. Q4a: Do you foresee any difficulties with this process?

No Response

Q12. Q4b: How could such difficulties be addressed?

No Response

Section 3: Involving families and carers

Q13. Q5: Do you think that the role of the Commission Liaison Officer will help to improve the involvement of, and communication with, families and carers during investigations of deaths?

Yes

Q14. Q5a: Do you have any concerns about this type of arrangement?

No

Q15. Q5b: How could your concerns be addressed?

No Response

Section 4: Other matters for consideration

Q16. Q6: Do you agree that the revised process, described in Section 2 of the consultation document, will meet the values and principles set out in paragraph 50?

Yes

Q17. Q6a: Please explain your answer.

As my family endured an extremely unsatisfactory four-year-long 'review' by NHS Tayside, following my son's death by suicide, we welcome these changes, and we believe that independent and thorough investigation by the Mental Welfare Commission in cases like ours, should bring about the necessary and much-needed improvements to this situation.

Section 4: Other matters for consideration

Q18. Q7: Do you have any comments on the potential impacts of the revised process on those with protected characteristics?

No

Q19. Q7a: Please explain what you think could be done to minimise any negative impacts on people with protected characteristics.

Those with protected characteristics should be afforded access to any type of emotional or physical support required.

Q20. Q8: Do you have any comments on the potential impacts of the revised process on children and young people?

No

Q21. Q8a: Please explain what you think could be done to minimise any negative impacts on children and young people.

Children and young people should have access to emotional support during these investigations.

Section 4: Other matters for consideration

Q22. Q9: Do you agree that the revised process for investigating deaths during compulsory treatment (as described in Section 2 of the consultation document) is human rights compliant?

Yes

Q23. Q9a: Please explain what you think could be done to ensure that the new process fully complies with human rights standards.

I think it does comply.

Section 4: Other matters for consideration

Q24. Q10: Do you have concerns in relation to any financial or administrative impacts the revised process may have, especially for local services?

No; I think the whole process could be more economically viable for everyone than the current 'system', which can drag on for years, especially at huge economic and emotional costs to families who have lost loved ones.

Q25. Q10a: Please explain what you think could be done to minimise any negative financial or administrative impacts.

Ensure there are time constraints on health boards to comply with these investigations.

Section 4: Other matters for consideration

Q26. Q11: Do you have any other comments or concerns in relation to the revised process?

I truly welcome this initiative, as our family suffered terribly for years, due to the completely inadequate, unnecessarily lengthy and incompetent review of my son's death, while he was under a suspension from detention order in the community.

We were treated with hostility and contempt; recordings of meetings were erased and I was the victim of written abuse from a health board official, without any recourse or justification; previous recommendations from the SPSO were ignored, resulting in my son's death, and NHS Tayside seems to have absolutely no intention of learning from their mistakes.

I hope and pray that the Mental Welfare Commission will succeed in bringing about the changes that patients and their families really need.

Respondent Information Form

Q27. Name of person submitting the response

██████████

Q28. Email address of person submitting the response

[REDACTED]

Q29. Are you responding as an individual, or on behalf of an organisation?

I am responding as an individual

Respondent Information Form - individual responses

Q30. Are you a family member or carer of a person who has died whilst being treated under mental health legislation in Scotland?

Yes

Q31. Do you wish your response to be published?

Yes, publish response without name