

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#)  
ar [anhydraddoldebau iechyd meddwl](#)

This response was submitted to the [Health and Social Care](#)  
[Committee](#) consultation on [mental health inequalities](#)

MHI 81

Ymateb gan: | Response from: Unigolyn | An Individual

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Hello,

My name is [REDACTED] and I live in [REDACTED].

I am submitting this evidence as an individual and am over 18 years old. I would prefer for my submission to be kept confidential as it affects my adult Daughter aged between 25 and 30. She provides her consent for this information to be considered by the Committee confidentially and for this email to be published subject to the redactions I have agreed with the Committee clerk. However, such is the stigma around mental health issues we would prefer only for the Committee to be aware of the unredacted details and the attachments as it does not make easy reading.

I am attaching three documents.

A complaint to [REDACTED] Health Board regarding the difficulty in an emergency mental health psychotic crisis on [REDACTED] 2019 for my daughter getting into hospital

A complaint to [REDACTED] Health Board regarding her needing admission to hospital in [REDACTED] 2020 when no beds were available and we were kept in A and E unsupported for 22 hours

Agenda of a meeting with [REDACTED] Health Board on [REDACTED] 2020 to discuss the previous complaints. Members of staff attended but were unable to proceed as they had not read the document prior to the meeting.

Two years on from these incidents with my daughter we have still not received an adequate response and the Public Ombudsman for Wales is investigating and due to publish his findings shortly. The issues in the complaints will hopefully be addressed by the Ombudsman.

Our daughter is a well loved and cherished member of our family. We are all articulate, educated and able to communicate properly with Mental Health Services. Our daughter has suffered mental ill health since being a teenager.

We need you to hear our story of how difficult it is to access appropriate and timely care in an emergency with Mental Health Services in Wales. Please note this was all prior to COVID. We are only too aware that for other people who may not have support systems around them, be able to communicate properly or are just too exhausted with no advocacy their experiences must be a lot worse. That is why I feel compelled to speak up as I never want other families or individuals to go through what my family went through. At times during my daughters psychotic crises I felt as though we were living in a medieval system with no compassion, humanity or caring.

The main issue I want the Committee to consider from our point of view is that of Section 12 approved doctors attending when requested by Mental Health Services .

Despite numerous requests for help from me necessitating 18 phone calls to different Mental Health practitioners no doctor was willing to attend my daughter in an emergency(psychotic crisis)to carry out a Mental Health Act Assessment.

The AMHP (Approved Mental Health Professional) contacted every Doctor available on a call out rota from Carmarthen to Bridgend to ask for help for my daughter to enable her to be admitted to hospital (despite a bed being available we were told we could not take her ourselves.) One doctor would not attend as it was 'the [REDACTED] before Christmas'.

My daughter was unaware that she waited 12 hours in psychosis for an assessment and we had to drive her to [REDACTED] for 20 minutes being restrained by us to enable her to be assessed in hospital. She was sectioned, collapsed on the floor like an animal, having seizures in a serious condition. She was so unwell we were unable to visit her for 2 days. This was traumatizing for my whole family. I myself, as her carer, needed referral to psychiatric services following this.

Your committee needs to know that apparently there is no legal requirement for doctors to attend - we are still incredulous about this. We do not know if this only applies in Wales but Mental Health Practitioners have told me it is a huge obstacle to helping people who need to be admitted in an emergency. Some people have to wait a week or more. The only doctor who was willing to attend drove from Cardiff out of hours to [REDACTED]. I would not wish to think it is because more money is paid after 5pm.

These incidents caused harm to my daughter and family. We still have no answers to why no Doctor was willing to attend her that night. Mental health emergencies should be treated with the same urgency as physical health emergencies. It was only the sheer determination of myself and my husband that we managed to stop her harming herself that night.

I am powerless as an individual to get answers and challenge things. I would please ask whether the committee could look into this issue to get the full picture, what the situation is and how it can be improved. Mental health issues will affect 1 in 4 of us in our lifetimes. I do not want other individuals and families to go through what we had to that night.

[REDACTED] continued to suffer with unstable mental health and was detained under Section 3 of the Mental Health Act in [REDACTED] 2020. She was discharged into supported housing in [REDACTED] 2020 with Section 117 aftercare. Unfortunately, she was unable to see her parents for 16 weeks due to COVID which caused us all great pain. However, following the death of her Grandmother during COVID she was allowed to return home to live with her parents under Community Mental Health Services.

My daughter is living at home with us now and doing well. We will continue to support our much loved family member and help her to move forward.

Thank you for considering our experiences to make things better for those coming after us.

Many thanks

[REDACTED]