

Strengthening safeguards for children admitted to adult wards and out of area placements

Briefing for Report Stage

Summary

- The Mental Health Act states that hospital environments should be suitable to patients' age and the Mental Health Act Code of Practice states that admissions to adult wards are only permitted under exceptional circumstances.
- In 2023/24, the Care Quality Commission were notified of **120 instances** where children and young people aged under 18 were admitted to adult wards.
- Analysis of NHS data by the Royal College of Psychiatrists also shows that **319 children and adolescence in England** were forced to travel out of their area for mental health treatment from December 2023 to November 2024.
- Both the Independent Review of the Mental Health Act and the Joint Committee on the draft Mental Health Bill recommended that the Government should strengthen protections against young people placed on adult wards.
- The Government's recent amendment to the Bill will require the Secretary of State to consider whether there are any additional situations when the CQC should be notified about the admission of a child or young person. However, this does not go far enough and there is nothing in the Bill that strengthens safeguards for children and young people admitted to adult wards or in out of area placements.
- It is clear that the Mental Health Bill should strengthen safeguards against children aged under 18 being placed out of area inappropriately or in an adult ward. The amendment tabled by Earl Howe seeks to ensure that any admission is in the child's best interests and that procedural safeguards for admission are codified in law.

Purpose and scope of the amendment

The amendment tabled by Earl Howe seeks to ensure that children are only placed on adult wards where there are exceptional circumstances, and it is in their best interests. The amendment also sets out procedural safeguards that should be in place, when determining the reasons behind, and suitability of, admitting a child to a hospital.

Both the Independent Review of the Mental Health Act and the Joint Committee on the draft Mental Health Bill recommended that the Government strengthen safeguards against children being placed in inappropriate settings such as adult wards.

Baroness Merron, the Minister for Patient Safety, Women's Health and Mental Health, has tabled an amendment to the Bill that would require the Secretary of State to consider whether there are any additional situations when the CQC should be notified about the admission of a child or young person and lay a report before Parliament within two years of the Bill passing. This amendment does not go far enough: not only would there be a delay in considering what

additional safeguards might be needed, there is also a risk that the Secretary of State will conclude that no changes are required. By contrast, Earl Howe's amendments would embed procedural safeguards on the Bill of the face now.

Why is the amendment needed?

The Mental Health Act Code of Practice is clear that no child should be placed in an adult ward except in emergency circumstances, yet this is a practice that continues to persist. The Care Quality Commission has also consistently raised concerns regarding the number of children being cared for in unsuitable environments, such as adult wards.

In 2023/24, the Care Quality Commission were notified of **120 instances** where children and young people aged under 18 were admitted to adult wards (Care Quality Commission, 2025).

Analysis of NHS data by the Royal College of Psychiatrists also shows that **319 children and adolescence in England** were forced to travel out of their area for mental health treatment from December 2023 to November 2023 (Royal College of Psychiatrists, 2025). This represents nearly one child every day.

Admission to adult wards and in settings far from home can cause further harm to children and young people's mental health and can be detrimental to their recovery. For example:

- When young people are placed on adult wards they are denied the opportunity for peer support, to socialise with peers their own age, have limited access to educational opportunities and are around staff who are used to treating and tailoring care for adults not younger patients (Care Quality Commission, 2024).
- Research conducted by Article 39 highlights the negative experiences of young people placed on adult wards, with young people reporting how they found the environment 'terrifying' as a child and expectations to 'to behave like an adult' (Article 39, 2023).
- Being placed out of area can have wide-ranging impacts on children and young people. They often lack regular contact with their families and experience feelings of isolation, as well as experiencing difficulties with securing community support back in their local area when they are ready to be discharged (Care Quality Commission, 2024).

If we are serious about improving care and treatment for children and young people, then the Mental Health Bill must be used as an opportunity to strengthen safeguards against children and young people being cared for in unsuitable environments.

This must be accompanied by investment to increase the availability and capacity of specialist children and young people's mental health services to ensure that children receive age-appropriate care when an admission is required.

The amendment

After Clause 51, insert the following new Clause—

“Age appropriate treatment for children

(1) Section 131A of the Mental Health Act 1983 is amended as follows.

(2) After subsection (1), insert—

“(1A) A patient to whom this section applies must not be detained in, or admitted to, an adult ward unless the managers of the hospital consider that—

(a) there are exceptional circumstances which justify the patient’s detention in, or admission to, an adult ward, and

(b) the decision is in accordance with the best interests of the child.”

(3) After subsection (3) insert—

“(3A) Where a patient has been detained in, or admitted to, an adult ward, the managers of the hospital must record in writing the reasons for the admission, including—

(a) the reason, or reasons, why other options for accommodation were not available or suitable for the patient,

(b) details of the measures to be taken by the hospital to ensure that while the patient is detained or otherwise accommodated in the adult ward, the patient is provided with care in a safe environment, and

(c) unless it has been determined that an adult ward is the most appropriate environment for the patient in accordance with subsection (1A), the steps being taken by the hospital to transfer the patient to more appropriate accommodation.

(3B) Where a patient is detained in, or admitted to, an adult ward or placed

out of area and the detention or admission is of more than 24 consecutive hours’ duration, the managers of the hospital must notify the regulatory authority without delay setting out why they consider that the requirements under subsection (1A) above are met and providing the information set out in subsection (3A).

(3C) Subsection (3E) applies when the managers of a hospital accommodate a patient for a consecutive period of at least 28 days.

(3D) Subsection (3E) applies where the managers of a hospital—

(a) detain a patient in, or admit a patient to, an adult ward, or

(b) detain or admit a patient who—

(i) was ordinarily resident immediately before being detained admitted in the area of a local authority other than the local authority within whose area the hospital is situated,

or

(ii) was not ordinarily resident within the area of any local authority.

(3C) Where this subsection applies the managers of the hospital must inform the appropriate officer of the responsible local authority without delay—

(a) of the patient's detention or admission, and

(b) when the patient's detention or admission ceases.”

(4) Leave out subsection (4) and insert—

“(4) In this section—

“adult ward” means a ward in a hospital to which persons aged 18 or over are detained in or admitted to;

“the appropriate officer” means—

(a) in relation to a local authority in England, their director of children’s services, and

(b) in relation to a local authority in Wales, their director of social services;

“hospital” includes a registered establishment;

“the responsible authority” means—

(a) the local authority appearing to the managers of the hospital to be the authority within whose area the child was ordinarily resident immediately before being detained or admitted, or

(b) where it appears to the managers of the hospital that the patient was not ordinarily resident within the area of any local authority, the local authority within whose area the hospital is situated.””

Explanatory statement: Inserted subsection (1A) seeks to ensure that children are only placed on adult wards where there are exceptional circumstances, and it is in their best interests. (3A)-3(E), and (4A) seek to ensure the presence of procedural safeguards, when determining the reasons behind, and suitability of, admitting a child to a hospital.

References

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About the Children and Young People's Mental Health Coalition

The Children and Young People's Mental Health Coalition is a collaborative network of over 350 organisations and individuals dedicated to advocating for and influencing policy in relation to the mental health needs of babies, children, and young people. Our coalition consists of diverse stakeholders, including mental health organisations, youth support services, educational institutions, and concerned individuals, all united by a shared commitment to improving the well-being of children. **For more information**, please contact Charlotte Rainer on charlotte.rainer@cypmhc.org.uk