Unconfirmed

MINUTES OF THE MENTAL HEALTH LEGISLATION COMMITTEE HELD 9TH MAY 2019 CONFERENCE ROOM 2, NEATH PORT TALBOT HOPSITAL

Present	Emma Woollett	Vice-Chair (in the chair)
	Martyn Waygood	Independent Member
	Jackie Davies	Independent Member
	Maggie Berry	Independent Member
	Chris White	Chief Operating Officer
	Cathy Dowling	Assistant Director of Nursing and Patient Experience
	Dai Roberts	Service Director, Mental Health and Learning Disabilities
	Rhonwen Parry	Head of Psychology and Therapies
In Attendance		
	Lynda Rogan	Mental Health Act Manager
	Claire Mulcahy	Committee Services Officer
	Jacqui Maunder	Interim Head of Compliance (Observing)
	Jamie Kaijaks	Graduate Trainee
	Nicola Edwards	Head of Safeguarding (Minute 26/19 and 27/19)
	Jason Crowl	Unit Nurse Director (Minute 28/19)

MINUTE		**ACTION**
17/19	**WELCOME AND INTRODUCTIONS**	
	Emma Woollett welcomed everyone to the meeting, in particular Jacqui Maunder, Interim Head of Compliance who would be attending the committee going forward.	
18/19	**APOLOGIES FOR ABSENCE**	
	Apologies for absence were received from Pam Wenger, Director of Corporate Governance and Gareth Howells, Director of Nursing and Patient Experience.	
19/19	**DECLARATIONS OF INTEREST**	
	There were none.	
20/19	**MINUTES OF THE PREVIOUS MEETING**	
	The minutes of the meeting held on 7th February 2019 were **received** and **approved** as a true and accurate record. Page 3 – Chris White queried whether the issue of underpinning executive structure had been resolved. Emma Woollett replied in that discussions had taken place and she was now feeling more comfortable with the arrangements. Jacqui Maunder would now be providing support to the committee in terms of the compliance. She also informed that there were plans to look at the length and frequency of the meetings to ensure there was a priority focus on legislation and that quality issues are more appropriately discussed in other committees. Page 4 – Dai Roberts informed in relation to the responsibility of the hospital managers hearings, that Janet Williams, Head of Operations for	

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	Mental Health and Learning Disabilities would now be taking this forward.	
Resolved:	- The minutes of the 7th February 2019 were **approved.**	
21/19	**MATTERS ARISING**	
	CAMHS Bed Position An update was **received** with regards to the CAMHS bed at Neath Port Talbot Hospital. Cathy Dowling highlighted the following points: • The CAMHS bed tended to be used for the admissions of repeat patients rather than new patients; • The long-term care model for these patients was unclear, but she reiterated that the adult acute ward was not an appropriate environment for under 18's. Chris White enquired around the commissioning position at Ty Lydiard and requested that Dai Roberts follow this up with WHSSC. *Maggie Berry declared an interest as a member of the WHSSC Commissioning Committee* Members also raised concerns surrounding a serious incident involving a young patient recently admitted into A&E who subsequently ended up in the CAMHS bed in Ward F. Cathy Dowling undertook to arrange an immediate safeguarding meeting for this patient. Emma Woollett queried what the escalation process was in instances such as this. Cathy replied in that there was not an immediate one, a strategy meeting would take place in due course but nothing immediate and this poses a big risk to the patient. Cathy Dowling undertook to look the process and feedback to the committee. Emma informed that this item would need to be formally referred into the Quality and Safety Committee. Martyn Waygood undertook to ensure it was placed on the agenda.	**DR** **CD** **CD** **MW**
Resolved	- Dai Roberts to make enquiries with WHSSC regarding the Ty Lydiard commissioning position. - Cathy Dowling to arrange an immediate safeguarding meeting for the young patient on Ward F. - Cathy Dowling to look at the escalation process - Martyn Waygood to ensure CAMHS bed is on the Quality and Safety agenda.	**DR** **CD** **CD** **MW**
22/19	**ACTION LOG**	
	The action log was **received** and **noted** with the following updates: Action Point 1 Emma Woollett informed that in order to be assured that there were no MHA breaches within the CAMHS service, she would request that a nil	**EW**

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	return was formally recorded in the MHA report as a regular as part of the process. Emma Woollett undertook to arrange this with Joanne Abbott-Davies. <u>Action Point 7</u> Cathy advised that she felt a peer review would be more beneficial than an internal audit review. She undertook to arrange a 'back to floor' audit to sample the processes on acute wards for complying with the mental health act. <u>Action Point 8</u> Dai Roberts informed that there had been issues with the Powers of Discharge committee who ultimately oversee the governance of the hearing panels. He advised he would speak with Pam Wenger and prepare a paper with Janet Williams on the various issues and an approach to improve the process.	**CD**
23/19	**WORK PROGRAMME 2019/20**	
	The work programme for 2019/20 was **received** and **noted** by the committee.	
Resolved	- The work programme be noted.	
24/19	**MENTAL HEALTH LEGISLATION COMMITTEE ANNUAL REPORT 2018/19**	
	The Mental Health Legislation Committee Annual Report for 2018/19 was **received.** Emma Woollett introduced the report; she advised that the main purpose of the report was to provide assurance to the Board that the Committee had effectively discharged its responsibility in accordance with the terms of reference. In addition, it was to ensure there was a focus on the priorities for the coming year. Chris White stated he felt the report was good and showed the clear priorities of the committee for the coming year. He stated it would be good for the committee to challenge itself with clinical evidence in future.	
Resolved	- The committee **approved** the Mental Health Legislation Committee Annual Report 2018-19 for submission to the Board.	
25/19	**POWERS OF DISCHARGE COMMITTEE ANNUAL REPORT 2018/19**	
	The Powers of Discharge Committee Annual Report for 2018/19 was **received.** In introducing the report Jackie Davies highlighted the following points; - The report highlighted the remit of the committee, the committee membership, reports received during the year and whether the	

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	committee fulfilled its terms of reference; - She advised that only one meeting had taken place during the year due to quoracy issues; - She raised her concerns about the quality of the work arising from the committee. She stated clarity was needed on the remit of the committee in terms of legislative requirements. - She felt the current membership of the committee also needed review. In discussing the report the following points were raised: Martyn Waygood raised his concern that he did not know about the quality and decision making of the hearing panels and the service being provided to the most vulnerable people in the community. He also queried what the validity of the panels were, as essentially they would replicate mental health review tribunals. He commented that the health board needed to have much more of a handle on these hearings. Maggie Berry highlighted the issue of the quality of reports used at the hearings. She commented that that in England, there is standard template. Lynda Rogan added that work had been work undertaken to look at a standard format however, no outcome on an agreed standard format had been reached. Chris White requested a meeting is arranged, which will need to include Janet Williams and Pamela Wenger, to discuss the workings of the committee with a focus on the committee's remit, membership and whether it was fit for purpose. A report on this to be brought back to the committee in August. Emma Woollett added that ultimately the Mental Health Legislative Committee had the responsibility for the committee therefore it would need to be shaped in a way that the committee felt best met the requirements.	**CW/DR/JD**
Resolved	- Meeting to be arranged to discuss the workings of the powers of discharge committee and report to be brought back to August's committee - The report be **noted.**	**CW/DR/JD**
	CHANGE TO AGENDA ORDER	
26/19	**MENTAL CAPACITY ACT (MCA) MONITORING REPORT**	
	A report providing an update on performance against the Mental Capacity Act 2005 was **received.** In introducing the report, Nicola Edwards highlighted the following points: - During the period January 2019 – March 2019, the IMCA provider service, Mental Health Matters, received 17 instructions for an Independent Mental Capacity Advocate (IMCA) from the health board; - For 2018/19 the majority of the instructions of IMCA's were for	

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	support in making decisions regarding Long term move of accommodation; - Work was underway in conjunction with the best interest assessors and the DoLS Improvement and Support Group to establish a way of recording the number of assessments that take place across the board; - There were currently 16 ongoing Court of Protection DoLS cases that the legal team were engaged in involving the health board; - There continued to be an issue with obtaining staff training compliance figures from ESR; In discussing the report, the following points were raised: Concerning table 1 within the report, Emma Woollett asked what the information within the table actually indicated. Cathy Dowling informed that the table shows that the board were not enabling or supporting patients with access to advocacy services. She stated that was not specific to Swansea Bay Health Board, as discussions with Western Bay Safeguarding group have shown that all agencies are facing a challenge with this. Emma Woollett commented that the profile and promotion of IMCA service needed to be raised. Dai Roberts added that the concern surrounding visibility had also been highlighted at the operational committee. In order to gain assurance, Emma Woollett requested that an update was provided to the next committee in terms of what had been done or what was planned to improve the visibility of the IMCA service. She also requested a regular report from the safeguarding committee that highlights any legislation issues or discussions that have arisen. With regards to the 16 court of protection cases, Cathy Dowling suggested she would undertake a deep dive or risk assessment as to ensure there was not a 'blind spot' and to identify any lessons to be learned.	**DR** **NE/CD** **CD**
Resolved:	- Emma requested that that Dai Roberts provides an update to the next committee in terms of what has been done or is planned to improve the visibility of the IMCA service. - A regular report from the safeguarding committee that highlights any legislation issues or discussions that have arisen. - Cathy Dowling to undertake a deep dive or risk assessment of the 16 court of protection cases. - The report be **noted.**	**DR** **NE/CD** **CD**
27/19	**MENTAL CAPACITY ACT TRAINING UPDATE**	
	A report providing an update on the Health Board position in relation to Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards training was **received**: In introducing the report, Nicola Edwards highlighted the following	

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	points: - As at the 26th April the overall health board compliance figure relating to MCA level 1&2 for the past 3 years was 14.3% (1,866 staff) - It was important to note that MCA was not a mandatory training requirement and information related to MCA was included in the Level 3 Safeguarding Adult and Safeguarding Children training delivered by the Corporate Safeguarding team; - Information provided by Workforce and OD, showed that 259 staff had been trained in safeguarding adults and 1,296 had been trained in safeguarding children; - A safeguarding training needs analysis will give an understanding of the proportion of staff who will require Safeguarding and MCA training; - A training needs analysis tool had been developed and would go to the safeguarding committee for approval on the 24th May; In discussion of the report the following points were raised; Emma Woollett raised her concern surrounding the service delivery units' compliance figures, paying particular attention to the unit figures, which were not reported or could not be obtained. She commented that this was unacceptable. She stated she would like to see compliance for all five of the units brought back to each committee in addition to the ESR compliance figures. Nicola Edwards informed that the training needs analysis will cover 12,500 staff across the health board, work will begin in June with the estimate to have results by September. Results will then be presented to the the safeguarding committee in October. Emma Woollett requested that the results are also brought to this committee in November for discussion.	**NE** **NE**
Resolved:	- Compliance for all units brought back to each committee meeting in addition to the ESR compliance figures. - The results of the safeguarding training needs analysis be brought to the committee in November for discussion.	**NE** **NE**
28/19	**DEPRIVATION OF LIBERTY SAFEGUARDS (DoLS) UPDATE**	
	A report providing an update regarding (DoLS) standards was **received**. In introducing the report, Jason Crowl highlighted the following points: - In the period 1st April – 31st March there had been 927 referrals, 398 refused and 508 were granted; - 233 were signed off within the timescale which remained a challenge through 2018/19; - There had been 735 referrals for urgent assessments, which had required sign off within 7 days, and 186 were for standard referrals;	

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	- The highest referring site was Neath Port Talbot Hospital; - Internal Audit would be undertaking a follow-up review of the DoLS process in May 2019; - A transformational plan had been developed to improve performance in the DoLs process. Key aims included a dedicated DoLS team, reduction in un-necessary referrals, the implementation of a referral prioritisation tool and the completion of actions required under Internal Audit. - A number of actions had been completed in Quarter 4 and planned work for Quarter 1 had commenced. In discussing the report, the following points were raised: Maggie Berry queried the whereabouts of the internal best interest assessors that had previously been trained within the health board. Jason Crowl informed that they were still in post but due to it being a secondary role, there had been difficulty in releasing them to carry out the assessments. Maggie Berry commented if they were not released, the training they had undertaken would be wasted. Jason Crowl advised work was underway to investigate the number of urgent referrals, as there appears to be too many and there is an issue with how some referrals are classified. A review and scope exercise will take place with the new best interest assessors who will monitor referrals and look at benchmarking with other health boards. Emma requested an update at the meeting in August. Emma Woollett made the comment on the quality of the report and stated that it had given much more assurance that work was underway to improve the DoLS position.	**JC**
Resolved:	- Jason Crowl to provide an update on the referral review and scope exercise at August Committee. - The report be **noted.**	**JC**
29/19	**MENTAL HEALTH ACT (1983) MONITORING REPORT**	
	A report providing an update on performance against the Mental Health Act 1983 was **received.** In introducing the report, Lynda Rogan highlighted the following points: - During the reporting period, there had been fourteen exceptions and four invalid detentions identified by the Mental Health Act (MHA) Department; - Five under 18's had been admitted to an adult acute ward for a period of one to two days and one was admitted under the Act to Taith Newydd; - Section 4 had been applied on four occasions; all patients had their Section 4 converted to Section 2 with the 72 hour period allowed.	

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	- There were five deaths of patients who were detained under the Mental Health Act. The deaths were reported to Healthcare Inspectorate Wales (HIW) in accordance with protocol; - During the reporting period there was one announced visit by HIW in the Mental Health and Learning Disabilities Unit. - There were four postponed Hospital Managers hearings. In discussing the report, the following points were raised: Martyn Waygood highlighted the point from the recommendations within the report, of clinicians needing to be reminded of their responsibilities when completing statutory documentation. He commented that there did not appear to be any improvement on this. Discussion ensued surrounding the benchmarking data for the number of defective errors and rectifiable errors. It was queried how Cardiff and Vale health board have zero. Lynda Rogan replied in that C&V have a centralised team and there is a limit on those dealing with the paper work. For rectifiable errors, the health board's numbers are significantly lower than others was due to there being a central control on this within the health board. Chris White requested a meeting with Dai Roberts and Lynda Rogan to consider proposals to adopt a similar approach in having central control for the defective errors Dai Roberts and Lynda Rogan to draft some proposals and these to also be shared with the committee at the August meeting. With regards to the deaths of patients who were detained under the act, Lynda Rogan informed that two out of the five patients had died of natural causes, Emma queried whether these had been reported in to the Quality and Safety committee, Martyn Waygood informed that they had via the serious incident reports.	**DR, LR, CW**
Resolved:	- Meeting to look at proposals for a central control in defective errors be arranged, proposals drafted and then shared with the committee in August. - The report be **noted.**	**DR,LR, CW**
30/19	**MENTAL HEALTH MEASURE MONITORING REPORT**	
	A report providing an update on performance against the Mental Health (Wales) Measure 2010 (1st April to 31st March 2019) was **received.** In introducing the report, Dai Roberts highlighted the following points: - For Part 1a, which related to access to primary mental health services, ABMU met the target of 91% for the months excluding CAMHS and 72.6% including CAMHS data; - For Part 1b (interventions), ABMU met the target for the seven months including and excluding CAMHS data; - Part 2, which relates to care and treatment plans (CTPs), was met in ten out of twelve months. Compliance was achieved and sustained since August;	

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	- In response to the Welsh Government review of CTP's, each locality has developed a CTP improvement action plan; - A training plan has been implemented to improve the quality of CTPs and to ensure they are outcome focussed; - Parts 3 and 4 of the measure (relating to self-referral and advocacy) were met throughout the twelve months.	
Resolved:	The report be **noted.**	
29/19	**ANY OTHER BUSINESS**	
	There was no other business.	
32/19	**DATE OF THE NEXT MEETING**	
	The next meeting would take place on **8th August 2019, Millennium Room, HQ**	