

Confirmed
MINUTES OF THE
MENTAL HEALTH LEGISLATION COMMITTEE
HELD ON 8TH NOVEMBER 2018
IN THE BOARD ROOM, HEADQUARTERS

Present	Emma Woollett	Vice-Chair (in the chair)
	Martyn Waygood	Non-Officer Member
	Jackie Davies	Non- Officer Member
	Maggie Berry	Non – Officer Member
	Gareth Howells	Director of Nursing and Patient Experience
	Dai Roberts	Service Director, Mental Health and Learning Disabilities
 In Attendance		
	Heather Richards	Mental Health Act Manager
	Ian Stevenson	Partnership and Development Support Manager
	Liz Stauber	Committee Services Manager
	Claire Mulcahy	Committee Services Officer

MINUTE		ACTION
44/18	WELCOME AND INTRODUCTIONS	
	Emma Woollett welcomed everyone to the meeting.	
45/18	APOLOGIES FOR ABSENCE	
	Apologies for absence were received from Chris White, Chief Operating Officer; Rhonwen Parry, Head of Psychology and Therapies; Pam Wenger, Director of Corporate Governance and Lynda Rogan, Mental Health Act Manager.	
46/18	DECLARATIONS OF INTEREST	
	Martyn Waygood declared an interest in that Dai Roberts had assisted in finding a voluntary psychology placement within the Health Board for his family member.	
47/18	MINUTES OF THE PREVIOUS MEETING	
	The minutes of the meeting held on 24 th August 2018 were received and confirmed as a true and accurate record.	
48/18	MATTERS ARISING	
	There were no matters arising.	
49/18	ACTION LOG	
	The action log was received and noted with the following updates: (i) <u>Action Point One</u> Discussion ensued as to the feasibility of any such breaches being reported from all commissioned services. Emma Woollett undertook to seek Pam Wenger’s views on this matter.	EW

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	<p>(ii) <u>Action Point Two</u></p> <p>Dai Roberts provided a graph which outlined how often it had been necessary to use a bed at an adult acute ward at Neath Port Talbot for a CAMHS patient. He highlighted that for 2017/18, the bed had been used by a total of 8 patients, with an average stay of 8 days, giving a total of 60 days for the year. He stated that the reasons for use were due to lack of capacity at the CAMHS unit and the requirement of admission for the CAMHS patient, it was an alternative to sending patients out of area. He stated that the use of this bed was significant and the MH/LD Unit were not comfortable with the position. Jackie Davies reflected that while there was a solution to this at Neath Port Talbot it seemed there was no urgency to resolve the matter. Acknowledging that the issue is one faced by all Health Boards, the Committee nonetheless agreed that this was not an acceptable situation and did not provide good care for very vulnerable patients. Gareth Howells agreed to approach WHSSC colleagues to seek a possible solution to this. Dai Roberts agreed to source the historical information for the use of the bed and forward to Gareth Howells. This item to be placed on agenda for next meeting.</p> <p>(iii) <u>Action Point Three</u></p> <p>It was agreed to hold a future meeting at Neath Port Talbot hospital and combine with a visit to the acute ward which holds the CAMHS bed. This was to be placed on the work programme.</p> <p>37/18 (iii) <u>Action Point Three</u></p> <p>Dai Roberts informed that the nine point checklist for medical reports to mental health tribunals was now in process in Swansea. An audit had been undertaken and was due for consideration at Audit Committee in due course.</p>	<p>GH</p> <p>DR</p> <p>CM</p> <p>CM</p>
50/18	WORK PROGRAMME	
	<p>Emma Woollett informed that the Committee's Self-Assessment was due for discussion at the February meeting and encouraged all to complete in readiness for the meeting.</p>	All
51/18	MENTAL HEALTH ACT MONITORING REPORT	
	<p>A report providing an update on performance against the Mental Health Act 1983 was received.</p> <p>In introducing the report, Heather Richards highlighted the following points:</p> <ul style="list-style-type: none"> - During the reporting period, there had been eight exceptions and three invalid detentions identified by the Mental Health Act Department ; - Three under 18's had been admitted to an adult acute ward. One patient was transferred under section 2 to a Learning Disabilities Unit and the other was subsequently detained under section 3 of the Act. - Section 4 had been applied on two occasions, one patient reverted to informal status and the other was converted to 	

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	<p>section 2 with the 72 hour period allowed.</p> <ul style="list-style-type: none"> - The nurses holding power under section 5(4) of the Act was used on two occasions, this was necessitated as it was not practicable to secure the immediate attendance of a doctor to furnish a report under section 5 (2). - The following matter raised at the Hospital Manager's meeting on 1st October 2018 was brought to the attention of the Committee: appropriately completed Care and Treatment Plans (CTPs) need to be provided for hospital managers review panels. - Training for qualified staff on the receipt and scrutiny of Mental Health Act documentation was continuing across all mental health hospital sites and learning disability units; - Healthcare Inspectorate Wales (HIW) had undertaken a visit to two wards at Cefn Coed Hospital but no issues with the act had been raised; <p>In discussing the report, the following points were raised:</p> <p>Martyn Waygood stressed his concern with regards to the invalid detention of a patient for three months and four days, he added this was not good for patient or family experience. He also referred to the documentation error and the reference to lack of training. Heather Richards responded stating that majority of errors were made in general care but this was not expressed in the report. She stressed that the roll out of the MCA training to general nurses was essential. David Roberts assured that feedback from the HIW was that ABMU Mental Act Team operate at a very high level.</p> <p>With regards to the same detention, Maggie Berry referred to the amendment of date on the HO15 form. She stressed that amendments to dates on any documentation was a fraudulent act and should be taken very seriously. Heather Richards responded and stated it was unclear when or by whom the amendment took place, but this had been brought to the attention of the senior management team in the Neath Port Talbot Delivery Unit. Jackie Davies referred to the minutes of the Hospital Managers meeting on the 1st October 2018 and highlighted the point which showed the general dissatisfaction of the standard of paperwork.</p> <p>Martyn Waygood raised his concern with the fact that out of the 66 hearings arranged between January and June 2018, 14 of them had been cancelled .Jackie Davies concurred and added this was an increasing theme. Heather Richards emphasised the difficulty of arranging these hearings in terms of the availability and competing priorities of key attendees. Emma Woollett stressed the importance of these hearings to patients and families.</p> <p>For the next committee, David Roberts agreed to provide information on the number of hearings cancelled, the reasons for cancellations and the impact of the cancellations on the patient and families. Also, an example of the difficulties in arranging hearings to be provided for the understanding of the Committee.</p> <p>With regards to the data in the report itself, Emma Woollett highlighted</p>	<p style="text-align: right;">DR</p>

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	the need to be able to put these figures into context, a comparison to previous years and benchmarking from other health boards would be useful. She also requested that the timeframes for the data were consistent throughout the report. Dai Roberts agreed to feed this back to Lynda Rogan.	DR
Resolved:	<ul style="list-style-type: none"> - The report be noted. - Emma Woollett requested information on the number of hearings cancelled, the reasons for cancellations and the impact of the cancellations on the patient and families. Also, an example of the difficulties in arranging hearings to be provided for the understanding of the Committee. - The report to include year on year comparison, benchmarking data and a consistency of the data in terms of timeframes. 	DR DR/LR
52/18	MENTAL CAPACITY ACT (MCA) MONITORING REPORT	
	<p>A report providing an update on performance against the Mental Capacity Act 2005 was received. In introducing the report, Gareth Howells highlighted the following points:</p> <ul style="list-style-type: none"> - Staff training for Mental Capacity Act Level 1 and 2 was available as an e-learning course although there continued to be difficulties obtaining compliance figures from the ESR system. - The MCA Level 3 Workshop was delivered each month by lecturers from Swansea University. - The MCA/Deprivation of Liberty Safeguards (DoLS) training attendance breakdown for January - October 2018 showed a slight reduction in comparison to 2017's figures. - Currently the Health Board does not collate figures by Service Delivery Unit but this would be done from December 2018. - During the period January - September 2018, the IMCA provider service, Mental Health Matters, received 72 instructions for an Independent Mental Capacity Advocate (IMCA) from the health board. - The number of occasions where best interest decisions were made was not currently collated but an effective way to record this information was being worked through via the Safeguarding Committee. - Jason Crowl, Nurse Director for Primary Care and Community was currently the dedicated lead for MCA/DOLs until permanent arrangements are in place. <p>In discussing the report, the following points were raised:</p> <p>With regards to MCA training, Emma Woollett stated she could take some assurance from the report that work was underway to improve the performance but she was still not assured that staff were adequately trained. Gareth Howells commented that he was confident in what was needed to improve the position but training needs analysis was required so that he had an oversight on what areas needed focus.</p>	

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Resolved:	The report be noted .	
53/18	DEPRIVATION OF LIBERTY SAFEGUARDS (DoLS) UPDATE	
	<p>A report providing an update regarding (DoLS) standards was received. In introducing the report, Gareth Howells highlighted the following points:</p> <ul style="list-style-type: none"> - An Internal Audit of the DoLS process had given limited assurance. - Primary Care and Community Service Delivery Unit had taken over as supervisory body and were leading on the DoLS Improvement plan - An action plan had been developed and an overview of the process review was outlined in pages 2 and 3 of the report. - Current processes within ABMU did not align with the processes of other health boards. - Ad-hoc DoLS assessors were not meeting our needs, a designated DoLS team within ABMU was required but the finances were not in place to support this at the moment. <p>In discussing the report, the following points were raised:</p> <p>Martyn Waygood voiced that DoLS was not just a mental health mental health issue. There needed to be a general DoLS awareness across the board, particularly in relation to older generations and dementia patients, DoLS can apply to a wide range of patients.</p> <p>Jackie Davies raised her concern for the lack of ownership of DOLs and best interest assessments across the board and stated that each clinical area should have a DoLS champion or designated lead. She queried whether there was an opportunity for the finance for a designated DOLS team to be sourced as 'spend to save' initiative. Emma Woollett concurred and stated that Committee would fully support this as a health board wide initiative. Gareth Howells agreed to make enquiries in order progress this further.</p> <p>On behalf of the Committee, Emma Woollett passed her thanks to Jason Crowl for this improved substantive report.</p>	GH
Resolved:	<ul style="list-style-type: none"> - The report be noted. - Gareth Howells to make enquiries with regards to adequate financing for DoLS, including the possibility of a 'spend to save' initiative for the DoLS Team. 	GH
54/18	MENTAL HEALTH MEASURE MONITORING REPORT	
	<p>A report providing an update on performance against the Mental Health (Wales) Measure 2010 was received.</p> <p>In introducing the report, Dai Roberts highlighted the following points:</p> <ul style="list-style-type: none"> - For Part 1a, which related to access to primary mental health services, ABMU met the target at 81% for the five months 	

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	<p>including and excluding CAMHS data. All Wales data ranged from 71% to 93%.</p> <ul style="list-style-type: none"> - For Part 1b (interventions), ABMU met the target for the five months at 90%. All Wales data ranged from 60% to 91%. - Part two, which related to care and treatment plans, was met in three out of five months. There was a slight dip in June and July but at the end of August ABMU were 90% compliant. All Wales data ranged from 81% to 93%. - Whilst there was a dip in June and July in compliance against Part two, the target was met in August. The introduction of the live CTP register has improved monitoring and performance. - Parts three and four of the measure (relating to self referral and advocacy) were meeting the performance target for the five months. - The Health Board has regular meetings with Cwm Taf University Health Board to review and discuss performance and the quality of care in CAMHS. <p>Dai Roberts commented that it was pleasing to note the marked improvement in the availability of services and also the strong performance across all four of the measures. The Committee discussed CAMHS performance and noted that, although it is still variable, largely because of the vulnerability of the small teams involved, there is active discussion between ourselves and the provider (Cwm Taf) and a long term plan to integrate primary and secondary care with a single point of access. It was agreed to keep performance under review. The risks around transition, particularly following the boundary change were highlighted. Emma Woollett asked Dai Roberts provide the Committee with assurance around the transitions between services in the upcoming boundary change.</p>	DR
Resolved:	The report be noted .	
55/18	NHS WALES DELIVERY UNIT – CARE AND TREATMENT PLANNING IN MENTAL HEALTH AND LEARNING DISABILITIES	
	<p>A verbal update was received regarding the NHS Wales Delivery Unit's Care and Treatment Planning report.</p> <p>Dai Roberts highlighted the following points:</p> <ul style="list-style-type: none"> - The NHS Wales Delivery Unit visited the Mental Health and Learning Disabilities Service Delivery Unit earlier in the year and have developed reports with key recommendations for care and treatment planning for both the Health Board and NHS Wales. - Work was underway to pull together the action plan from the recommendations set out in the report. - The four main areas for focus were; outcome measures, risk management reflection, multi-disciplinary working and the quality of care and treatment plans. - There was variability across each of the three localities in the 	

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	<p>quality of the care and treatment plans (CTP's).</p> <ul style="list-style-type: none"> - He highlighted the need for a joined up approach between the health board and the local authorities in developing the CTP's. <p>Emma Woollett stated this review brought an opportunity to focus on the quality of CTP's rather than them just being an adherence to the legislation.</p> <p>Ian Stevenson stated that appropriate training in the provision of CTPs (care and treatment plans) was a theme within ABM and across Wales. This training was currently being examined across the three localities with refresher training being examined between health and local authority colleagues. There had been recognised good practice within Maesteg Community Mental Health Team and the aim was to cascade out to other areas. This would form part of the action plans being developed within the three localities.</p> <p>Jackie Davies stated there was a benefit of having localised action plans but stressed the importance of having a standard approach across all localities to ensure CTPs are in developed in the same way.</p> <p>Dai Roberts agreed to produce an executive summary for the next Committee which outlines the work being undertaken in common and by locality in response to the Delivery Unit reports.</p> <p>The Committee raised grave concern with regards to the provision of all mental health training across the health board. Training had been raised as a key issue in each of the legislative areas. The Committee could be not be assured that staff were training adequately in these areas. Emma Woollett stated that she would link with Director of Workforce with regards to sourcing a Training Needs Analysis for mental health legislation and information on what training is already provided. She stated she would also ensure this was raised as part of the key issue report due to the Health Board meeting.</p> <p>Emma Woollett queried whether the committee would benefit from inviting Mark Child, Independent Member due to his link with Swansea Local Authority, to attend further committees. She would speak with Pam Wenger with regards to this.</p>	<p>DR</p> <p>EW</p> <p>EW</p>
Resolved	<ul style="list-style-type: none"> - Dai Roberts agreed to produce an executive summary for the next Committee which outlines work underway both at a Health Board level and by each locality in response to the Delivery Unit reports; - Emma Woollett to speak with Pam Wenger regarding the Committee membership and whether Mark Child should be invited to join the Committee; - Emma Woollett stated that she would link with Director of Workforce with regards to sourcing a Training Needs Analysis for mental health legislation and information on what training is already provided. She stated she would also ensure this was raised as part of the key issue report due to the Health Board meeting. 	<p>DR</p> <p>EW</p> <p>EW</p>

MINUTE		ACTION
56/18	ANY OTHER BUSINESS	
	There was no further business and the meeting was closed.	
57/18	DATE OF THE NEXT MEETING	
	The next meeting would take place on 7th February 2019 at 9.30am.	