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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>05 August 2021</b>		<b>Agenda Item</b>	<b>5.1</b>
<b>Report Title</b>	<b>MH &amp; LD CTP Action Plans</b>			
<b>Report Author</b>	Stephen Jones, Service Group Nurse Director			
<b>Report Sponsor</b>	Dai Roberts, Service Group Director			
<b>Presented by</b>	Stephen Jones, Service Group Nurse Director			
<b>Freedom of Information</b>	Open			
<b>Purpose of the Report</b>	To provide the Legislation Committee with an update on the internal audit cycle, note the action plans, provide assurance and agree reporting cycle.			
<b>Key Issues</b>	To note and agree the Divisional action plans against the 2020 internal audit.			
<b>Specific Action Required (please choose one only)</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• Receive and approve the contents of this report</li> <li>• Receive and approve the action plans</li> <li>• Agree reporting schedule</li> </ul>			

## **1. INTRODUCTION**

The Legislative Committee have received reports, action plans and assurance against those plans in relation to an external review conducted by the Welsh Government Delivery Unit into the quality of Care & Treatment Planning – this was an All Wales audit.

The Mental Health Measure (Wales) 2012 has two specific requirements under Part 2 of the legislations that requires Health Boards and Local Authorities jointly meet the rights of those in receipt of care to:

- have a Care Coordinator appointed to work with them to coordinate their care and treatment
- to have an individual and comprehensive Care and Treatment Plan to assist their recovery

In 2020 the MH&LD Service Group agreed an annual audit process (occurring in the autumn) that would extend the reach of the 2018 review in regards to the breadth of services reviewed and offer an annual cycle of assurance. The audit was conducted across the 3 Divisions

## **2. BACKGROUND**

The first cycle of internal audit took place in September and October 2020 using the All Wales CTP Audit Tool 2 and the associated Audit Key (templates attached for reference). Sixteen wards / teams (162 records) were reviewed as opposed to the six reviewed in the 2018 cycle conducted by the WG Delivery Unit.

Following the audit, the findings were compiled and presented to the February 2021 Clinical Audit Subgroup and the MH&LD Quality & Safety Committee for ratification. Thereafter, the individual detail was shared with the respective Divisions in March and April 2021 with direction for new action plans to be compiled for presentation at the June MH&LD Quality & Safety Committee – these were delayed until July's meeting (20<sup>th</sup>) – 3 reports attached: Mental Health Division; Learning Disability Division; Forensic Division.

The views of the Legislative Committee are sought in regards to the robustness of the action plans and the approach i.e. one plan per Division or should there be a single Service Group Plan as the detail is consistent across all areas.

Updates to the action plans will be reported against on a quarterly basis through the MH&LD Quality & Safety Committee.

It is recognised that some of the findings of the audit replicate those found in 2018, but it is noted that the range of inclusion in this audit is three times greater.

The MH&LD Service Group are committed to providing high standard, quality services across all areas of responsibility and continued improvement against the legislative requirements of the Mental Health Measure are being addressed.

The next cycle of audit is scheduled to take place this autumn.

### **3. GOVERNANCE AND RISK ISSUES**

There are no issues of note or significance. Compliance with part 2 of the MHM (Wales) remains above 90% across the Service Group.

### **4. FINANCIAL IMPLICATIONS**

There are no financial implications.

### **5. RECOMMENDATION**

The Committee is asked to:

- Receive and approve the contents of this report
- Receive and approve the action plans
- Agree reporting schedule

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> (please choose)	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>	
<b>Health and Care Standards</b>		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
Promoting quality Service User experience through co-production of care interventions that are informed, inclusive and measurable.		
<b>Financial Implications</b>		
There are no specific financial implications.		
<b>Legal Implications (including equality and diversity assessment)</b>		
The Service Group & Health Board have a legal duty under the terms of the Mental Health Measure to provide care that complies with the standards of Care & Treatment Planning that is holistic, robust, inclusive and has measurable agreed outcomes.		
<b>Staffing Implications</b>		
No specific staffing implications identified.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
The outcomes will generate progress against the goals of a Healthier, More Equal & Cohesive Communities agenda.		
<b>Report History</b>	Previous updates have been provided to the Committee since the inception of the reports / action plans as a result of the Welsh Government Delivery Unit 2018 audit.	
<b>Appendices</b>	For reference: Appendix 1 Appendix 2 Appendix 3 Appendix 4  For noting: Appendix 5 Appendix 6	