

**Unconfirmed**  
**MINUTES OF THE**  
**MENTAL HEALTH LEGISLATION COMMITTEE**  
**HELD ON 3<sup>RD</sup> NOVEMBER AT 09:30AM**  
**MICROSOFT TEAMS**

<b>Present</b>	Stephen Spill Maggie Berry Jackie Davies	Vice Chair (in the chair) Independent Member Independent Member
<b>In Attendance</b>	Penny Cram Hazel Lloyd Georgia Pennells Malcolm Jones  Gareth Howells Stephen Jones Paul Stuart Davies Anne Louise Ferguson Karen Gronert  Nicola Edwards	Interim Mental Health Act Manager Director of Corporate Governance Corporate Governance Officer Associate Service Director, Mental Health and Learning Disabilities Director of Nursing and Patient Experience Nurse Director, Mental Health and Learning Disabilities Assistant Director of Nursing ( <b>minute 51/22 – 52/22</b> ) Special Advisor  Head of Nursing, Primary Care, Community and Therapies ( <b>minute 51/22 – 52/22</b> ) Head of Safeguarding ( <b>minute 51/22 – 52/22</b> )

MINUTE		ACTION
41/22	<b>WELCOME AND INTRODUCTIONS</b>	
	Stephen Spill welcomed all to the meeting.	
42/22	<b>APOLOGIES FOR ABSENCE</b>	
	Apologies for absence were received from Inese Robotham – Chief Operating Officer, Janet Williams – Service Director, Mental Health and Learning Disabilities and Tanya Spriggs – Nurse Director of Primary, Community and Therapy.	
43/22	<b>DECLARATIONS OF INTEREST</b>	
	There were no declarations of interest.	
44/22	<b>MINUTES OF THE PREVIOUS MEETING</b>	
	The minutes of the meeting held on 4 <sup>th</sup> August 2022 were <b>received</b> and <b>approved</b> as a true and accurate record.	
45/22	<b>MATTERS ARISING</b>	
	There were no matters arising. <b>(i) Letter; Compliance of Care and Treatment Plans</b>	

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	Stephen Jones confirmed the letter was sent to local authorities by Janet Williams.	
46/22	<b>ACTION LOG</b>	
	<p>The action log was <b>received</b> and <b>noted</b>.</p> <p><b>(i) Mental Health Act - Digitisation</b></p> <p>Gareth Howells and Penny Cram advised that there wasn't a lot of commitment from Welsh Government to deal with the digitisation until the new mental health act was in place. Penny Cram noted that it was a standard agenda item on the All Wales Mental Health Act administrator's forum and Welsh Government would provide quarterly updates, therefore it was agreed to reinstate the action following the reform of the Mental Health Act. Penny Cram agreed to provide an update at the next Mental Health Legislation Committee.</p> <p><b>(ii) Associate Hospital Managers</b></p> <p>Jackie Davies queried why the decision had been made to stop the Associate Hospital Managers training of Independent Members. Hazel Lloyd would update Independent Members outside of committee.</p>	<p><b>PC</b></p> <p><b>HL</b></p>
47/22	<b>WORK PROGRAMME</b>	
	The committee work programme was <b>received</b> and <b>noted</b> .	
48/22	<b>MENTAL HEALTH ACT MONITORING REPORT</b>	
	<p>A report was <b>received</b>.</p> <p>In introducing the report, the Service Director, Mental Health and Learning Disabilities highlighted the following points:</p> <ul style="list-style-type: none"> <li>- Activity in the civil sections has been consistent with other reporting period except for the use of section three has consistently increased for the last four reporting periods;</li> <li>- There were three CAHMS patients admitted into Ward F for the reporting period the length of stay was between 3-7 stays;</li> <li>- There have been some issues with discharges on to community treatment orders where the responsible clinician hasn't referred the patient to a community clinician which ends in a difficult position for the team in terms of discharging legal obligations under the act if there isn't a named clinician in the community. Penny Cram advised the issue had been escalated to the locality managers and clinical director;</li> <li>- There were no unannounced HIW inspection visits during this reporting period. However, the teams have been active in the quality and safety unannounced nursing ward visits which has identified a number of training opportunities for staff which in turn has had a significant impact on mental health act statutory document errors with only eleven rectifiable errors reported during this period;</li> <li>- Penny Cram has been successful in taking up the position of the substantive Mental Health Act manager, with the focus now on</li> </ul>	

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	<p>identifying a deputy manager.</p> <p>In discussing the report, the following points were raised:</p> <p>Committee members congratulated Penny Cram on her appointment as the substantive Mental Health Act manager.</p> <p>Gareth Howells noted his query didn't sit with the Mental Health Legislation committee however, he asked Stephen Jones if during one of the unannounced nurse visits whether he would provide a view of the environment of the cubicle of the adolescent bed in Ward F, and if that feedback where the health board is placing children noting that it was an acute adult ward, whether anything could be done to make the environment 'young person friendly'. From a past visit, Steve Spill shared that he's aware it isn't a designated bed, just a bed which becomes free. Steve Spill was of the understanding that in other health boards there was an adolescent friendly room which would be found to be slightly more attractive to a younger person.</p> <p>Jackie Davies thanked Penny Cram for all the work she has taken on during her interim employment, which is evident in how well she was leading the team given the figures reported.</p> <p>Hazel Lloyd noted she felt the unannounced visits were a good practice, and asked how the teams were finding the approach. Stephen Jones noted that there is a sense of hesitancy by some of the staff on arrival, he did highlight that the visits were carried out by a 'mass of staff members'. Stephen Jones advised the range of disciplines were spread wide on the visits with pharmacy, nursing, psychology, mental health act and human resource attending the latest visit. The visits were in their infancy, there have been seven visits carried out to date, a conversation took place on the latest visit which discussed the need to modify some of the things the visits are looking at.</p> <p>Penny Cram assured the committee that the experience for the Mental Health Act on the ward visits have been nothing but positive with a focus on looking at patients files in terms of the mental health act section and highlighting where things could be improved with the ward clerk and manager, which has led to lots of requests for training and additional support. The team have recently re-visited the HIW guidelines in terms of what should be in patients file regarding the Mental Health Act, and the team were now able to streamline what is put in a patients file to prevent a paper heavy folder system which has been welcomed by ward managers.</p> <p>Steve Spill noted there were a number of patients detained on the mother and baby unit, and queried the detaining process for this unit. Penny Cram advised in terms of the act, that the majority of patients are coming into the unit informally and the act was only used if the patient deteriorates following admission. Stephen Jones added that the Mental Health act is a requirement for treatment and it was about what the unit offers the patient rather than restrictions. Stephen Jones noted he had commissioned the new learning and development team to carry out a position paper by January 2023 on comparison throughout Wales and England, across all of the areas outside of the secure services.</p> <p><b>(i) Care and Treatment Plans, Audit and Action Plans</b></p> <p>Stephen Jones noted that the section of the report focuses on the quality</p>	

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	<p>measures rather than compliance measures. A report was presented to the committee earlier this year, which was an update on previous audits undertaken within the report it was indicated there would be a delay and Stephen Jones assured the committee that the audits are taking place currently. The outcome of the outstanding actions and update on the assurance reviews would come to a subsequent committee.</p> <p>Stephen Jones asked committee members to agree timescales on reporting of the actions to the Mental Health Legislation committee. Steve Spill asked Stephen Jones for a reasonable view on when he felt reporting would be appropriate, Stephen Jones suggested a formal report with an agreed action plan would be received by the committee at the end of the financial year, 6-months thereafter an update on the action plan would be received.</p>	
<b>Resolved:</b>	<p>Committee members <b>noted</b> the report.</p> <ul style="list-style-type: none"> <li>- Committee members <b>agreed</b> a formal report with an agreed action plan would be received by the committee at the end of the financial year, 6-months thereafter an update on the action plan would be received.</li> </ul>	
<b>49/22</b>	<b>POWERS OF DISCHARGE COMMITTEE UPDATE AND DISCUSS THE ATTENDANCE AND ARRANGEMENTS OF THE POWERS OF DISCHARGE COMMITTEE</b>	
	<p>An update was <b>received</b>.</p> <p>In introducing the update, Jackie Davies, Independent Member and Associate Hospital manager provided the following update:</p> <ul style="list-style-type: none"> <li>- The number of hearings postponed due to lack of social service representation remains a huge problem causing delays upon delays resulting in a deputy attending to represent the patient who doesn't always know the patient;</li> <li>- The issue had been raised previously and Janet Williams communicated with local services but it hasn't improved. Penny Cram has put in place incident reports each time a hearing is postponed therefore there is an audit trail for the health board. However, the position remains unacceptable;</li> <li>- A number of experienced hospital managers have either retired or stepped down for the role, therefore it was fair to stay those remaining in position were struggling. Thanks was given to Penny Cram and her team. The virtual panels has helped in terms of travelling. However, that being said some areas are moving to in person panels which may prove to be an issue;</li> <li>- Part of the role of the Power and Discharge Committee members is to train the hospital managers, over the last three-four years the Cardiff team have arranged external training sessions. The training has been very poor in terms of the quality of the training and the learning opportunities for hospital managers. However, Jackie Davies gave thanks to Penny Cram for arranging the recent internal training using the health boards expert clinicians. Jackie Davies noted the great feedback received and the wonderful atmosphere.</li> </ul>	

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	<p>In discussing the update, the following points were made:</p> <p>Penny Cram noted the hearings mainly took place when reviewing a patient's case, hospital managers have a legal duty to review as a panel to determine if the extension of the detention by the responsible clinician was justified and lawful. The Mental Health Act team would arrange the hospital managers panel, however the panels had been adjourning or postponing on a very regular basis because social services have failed to provide a social circumstances report or they aren't able to provide a care coordinator to attend the hearing. The reason tends to be due to staff sickness. Penny Cram highlighted the situation isn't fair on the patients, or the professionals whom make the effort to complete the paperwork. Penny Cram the poor attendance was across the board, namely Ty-Eynon.</p> <p>Gareth Howells presumed the oversight of risks sit with the corporate team and queried how far this issue had been escalated within local authorities. Jackie Davies advised that Janet Williams, Service Director of Mental Health and Learning Disabilities formally escalated the issue with her counterpart in the local authority. Therefore, an update was required from Janet Williams and to escalate the situation again given the situation was becoming worse.</p> <p>Malcom Jones suggested the issue to be taken outside of the committee as a wider discussion was required which was out of the remit of the Mental Legislation Committee. Malcom Jones advised he recently attended an All Wales meeting and there was discussion from local health board of the role and function of the local authority moving forward, and this has drifted away from their core role as care coordinators the position start on the onset of covid-19 and the position hasn't recovered.</p>	
<b>Resolved:</b>	<p>Committee members <b>noted</b> the update.</p> <ul style="list-style-type: none"> <li>- An update was required from Janet Williams, Service Director of Mental Health and Learning Disabilities, in terms of escalating the situation further given the situation with the local authorities due to non-improvement.</li> </ul>	<b>JW</b>
<b>Resolved:</b>	Committee members <b>noted</b> the discussion.	
<b>50/22</b>	<b>RECRUITMENT OF ASSOCIATE HOSPITAL MANAGERS</b>	
	<p>The report was <b>received</b>.</p> <p>In introducing the report Malcom Jones, Associate Service Director for Mental Health and Learning Disabilities.</p> <p>In discussing the report the following points were raised:</p> <ul style="list-style-type: none"> <li>- Due to a number of retirements from the Associate Hospital Managers Group there was a need to recruit additional people to take on the role to ensure that hearings would be convened on a timely basis;</li> <li>- It was proposed that the recruitment of Associate Hospital Managers was delegated by the Health Board Chair to the Chair of the Power of Discharge Committee who would be an Independent Member of the Board. The Chair of Power of Discharge Committee would be</li> </ul>	

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	<p>supported by the Mental Health Act Team Manager who would undertake all administrative work associated with the recruitment.</p> <p>In discussing the report the following points were raised:</p> <p>Steve Spill queried how many additional associate hospital manager were the team intending to recruit. Malcom Jones said an additional 4-5 managers would be ideal. Steve Spill then asked how many hearings they would be expecting to attend as the paper notes two panels a month. Penny Cram advised it would be more than two panels a month, given the lack of associate hospital managers, there were 14 in the system however this has reduced to 8 where they might attend 2-3 panels a day. Penny Cram added that other health boards have a permanent act recruitment message on their volunteering page on the internet. At a recent all Wales Mental Health Act administration managers forum there was a discussion surrounding the idea to move to an all Wales pool of associate hospital managers.</p>	
<b>Resolved:</b>	The process for the recruitment of associate hospital managers was <b>approved</b> .	
<b>51/22</b>	<b>MENTAL CAPACITY ACT MONITORING REPORT AND UPDATE ON DEPRIVATION OF LIBERTY SAFEGUARDS MONITORING REPORT</b>	
	<p>The report was <b>received</b>.</p> <p>In introducing the report, Karen Gronert, Head of Nursing for Primary Care, Community and Therapies.</p> <ul style="list-style-type: none"> <li>- On average the service group is averaging around 67 Deprivation of Liberty Safeguard referrals a month from within the health board sites with the majority being urgent authorisation;</li> <li>- Breaches were on a downward trajectory however, during September 2022 there was increased sickness in the supporting agency which has seen an increase;</li> <li>- SBUHB has undertaken some work through benchmarking across health boards in Wales to ascertain the number of urgent authorisations submitted compared to standard authorisations. Outcome identified that SBUHB is reporting similar numbers of urgent authorisations compared to other health boards;</li> <li>- The implementation date for legislative changes from Deprivation of Liberty Safeguards to Liberty Protection Safeguards is now predicated to be between October 2023 – April 2024.</li> </ul> <p>In discussing the report the following points were raised:</p> <p>Jackie Davies highlighted the increase of breaches during September 2022, and noted that reflected in the vulnerability of the team and would be keen to see the recruitment which was detailed in the report come to fruition so the health board isn't relying on external assessors. Karen Gronert advised that Carol Killa, External Reviewer was carrying out work to scope what was required for the workforce to meet the new requirements of the implementation of liberty protection safeguards. Jackie Davies queried the percentage of staff trained, Karen Gronert agreed to include this detail in the next report. Paul Stuart Davies advised there was challenge in some of the</p>	

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	<p>clinical areas around receiving the reliable information on the training plans and projections over the next few months. Therefore, Paul Stuart Davies agreed to include a training plan in the next report.</p> <p>Paul Stuart Davies added the fact the health board has been able to secure an agency was good news as we have that support of trained professionals who can undertake the work, as there was such competition in employing the role of a best interest assessor. Paul Stuart Davies advised he was in contact with finance colleagues as Welsh Government have only given a funding commitment until 2025 whereas the roles should be permanent in order to make the role attractive to recruit into the health board. There was support through management board in September 2022 that the health board requires a fast approach to implementation. The message of the seriousness of the health board's commitment around recruiting to these roles and that there was support for the long term at their current role, whilst the need to change their skill set following the requirements of the Liberty Protection Safeguards.</p> <p>Nicola Edwards noted that the team are reporting the training in the most accurate way available, as the health boards ESR system isn't reliable as it hasn't mapped individuals in relation to their competencies and what they need to achieve. Nicola Edwards advised that it would be a lot of work to give the committee a percentage of staff trained given the unreliable ESR system. Nicola Edwards noted in terms of the high staff non-attendance figures it was unique to Deprivation of Liberty Safeguard training and she would keep a close eye on the figures.</p> <p>Steve Spill queried the risk rating of 12 and queried how the risk was rated and whether if it was placed at risk 15-20 it would receive greater attention. Karen Gronert agreed with Steve Spill, and noted that challenge was required when detaining people illegally where the health board can't assess the person in a timely way there was a risk to challenge which comes risks associated with reputation and financial. Karen Gronert agreed to look into the review of the risk rating.</p> <p>Steve Spill asked if the funding provided by Welsh Government was sufficient to achieve the requirements, Karen Gronert advised that not all of the money had been spent given the challenge on the amount of staff available to carry out the work. Paul Stuart Davies noted that the funding has contributed to the investment into ward managers and key individuals who need the clinical teams given they would be much more involved under Liberty Protection Safeguards around the decision making as well as the referral mechanism.</p>	<p><b>KG/PSD</b></p> <p><b>KG</b></p>
<b>Resolved:</b>	<p>Committee members <b>noted</b> the report.</p> <p><b>ACTION</b> - Karen Gronert agreed to look into the review of the risk rating.</p>	<b>KG</b>
<b>52/22</b>	<b>UPDATE ON THE HEALTH BOARD'S IMPLICATIONS AND PREPAREDNESS SURROUNDING LIBERTY PROTECTION SAFEGUARDS</b>	
	<p>An update was <b>received</b>.</p> <p>In introducing the update, the Assistant Director of Nursing highlighted the following points:</p>	

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	<ul style="list-style-type: none"> <li>- SBUHB's bid for Phase 2 of Welsh Government funding was successful and £152.000 has been allocated, the guidance for use includes continued training, and a robust infrastructure to support the implementation of LPS;</li> <li>- In September 2022 the Health Board Quality Management Board approved the plan to put in place an MCA resource and the recruitment process has begun for some elements of this;</li> <li>- Discussions have begun to agree the siting of the team within the corporate structure and the Director of Nursing will chair a task and finish group of senior leads later in the month, to agree this and plan a way forward.</li> </ul> <p>In discussing the update, the following points were made:</p> <p>Steve Spill queried how the partnership between domiciliary care settings and the health board was working given the pressure they were under. Paul Stuart Davies responded that the partnership was working well, so far and informed the committee that both Local Authority's had submitted bids for funding from Welsh Government and Carol Killa sits on their task and finish groups and the Health Board has asked for a representative from the Local Authority's to attend our group. There was nothing of concern to flag at this stage.</p>	
<b>Resolved:</b>	Committee members noted the <b>update</b> .	
<b>53/22</b>	<b>MENTAL HEALTH MEASURE MONITORING REPORT</b>	
	<p>A report was <b>received</b>.</p> <p>In introducing the report, the Service Director of Mental Health and Learning Disabilities highlighted the following points:</p> <ul style="list-style-type: none"> <li>- The position at the end of August showed the health board was above target in Areas 1 &amp; 2 but were being negatively impacted by local authority performance. Ongoing concerns regarding Part 2 and was highlighted as an ongoing risk and working with the team to achieve the target above 90%.</li> </ul> <p>In discussing the report, the following points were made:</p> <p>Maggie Berry noted the issues and concerns with local authority and their compliance was in the red and asked if this could also be communicated to the local authority when Janet Williams writes to them in relation to the cancelled meetings/in appropriate representation at the Powers of Discharge panels. Malcolm confirmed that this issue had been previously highlighted to Swansea local authority.</p> <p>Malcolm Jones agreed that Janet Williams would be asked to write to the Local Authority's and include this matter in her correspondence with them on attendance at the Powers of Discharge panel. Hazel Lloyd agreed to enquire with the Local Authorities as to who to escalate concerns to if Janet Williams did not receive assurance in terms of a timely plan to address the issues of concern.</p> <p>Steve Spill stated that CAHMS remained a concern but there were no</p>	JW/HL



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	concerns from an adult service perspective.	
<b>Resolved:</b>	Committee Members noted the <b>report</b> . <b>ACTION</b> – When writing to the local authority, Janet Williams to include the issue of low compliance with the Mental Health Measure Care and Treatment Plans.	
<b>54/22</b>	<b>ITEMS TO REFER TO OTHER COMMITTEES</b>	
	There were no items to refer to other committees	
<b>55/22</b>	<b>ANY OTHER BUSINESS</b>	
	There wasn't any further other business and the meeting was closed.	
<b>56/22</b>	<b>DATE OF THE NEXT MEETING</b>	
	The next meeting will take place on <b>Thursday, 2<sup>nd</sup> February 2023</b>	