

### **Mental Health & Learning Disabilities DU Pre-HIW Audit July – September 2019**

#### **Cefn Coed Hospital (01/07/2019)**

The statutory detention documents of eleven patients on Fendrod ward were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

- A copy of the Approved Mental Health Professional (AMHP) report was not present in one patient record. Non-compliance with chapter 14.87 of the Code.

#### **Taith Newydd Low Secure Unit (02/07/2019)**

The statutory detention documents of eighteen patients across two wards, Cedar and Rowan were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.
- One patient did not have a copy of the current certificate filed with the patient's Medication Admission Record (MAR) to ensure that the patient is given only medication to which he or she has consented or certified to. Non-compliance with chapter 25.22 of the Code.

#### **Cefn Coed Hospital (25/07/2019)**

The statutory detention documents of sixteen patients across three wards, Clyne, Ty Gwanwyn and Carreg Sarn were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

- A copy of the Approved Mental Health Professional (AMHP) report was not present in three patient records on Clyne ward. Non-compliance with chapter 14.87 of the Code.

#### **Caswell Clinic Medium Secure Unit**

The statutory detention documents of forty-five patients across four wards, Penarth, Newton, Ogmored and Cardigan were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

#### **Penarth (01/08/2019)**

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.
- New treatment form not forwarded to the Mental Health Act Department.

- Copies of detention papers not filed in the current volume of patient notes.

### **Newton (02/08/2019)**

- Annual rights for restricted patients need to be completed. Non-compliance with chapter 4.19 of the Code.
- New section 17 leave forms not forwarded to the Mental Health Act Department.

### **Cardigan (16/08/2019)**

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Three section 17 leave forms were still being used after the authorising responsible clinician had left the Health Board.
- Four section 17 leave forms had the incorrect responsible clinician authorising the leave for the patient.
- Copies of detention papers not filed in the current volume of patient notes.
- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code
- One patient was receiving treatment for mental disorder under a section 58(3)(a) certificate i.e. being capable of understanding the nature, purpose and likely effects of treatment and having consented to that treatment **and** also receiving treatment for mental disorder under a section 58(3)(b) under a SOAD certificated, that has certified that the patient is not capable of understanding the purpose, nature and likely effects of the treatment to be provided.

### **Ogmore (21/08/2019)**

- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Copies of detention papers not filed in the current volume of patient notes.
- One patient was receiving treatment for mental disorder under a section 58(3)(a) certificate i.e. being capable of understanding the nature, purpose and likely effects of treatment and having consented to that treatment **and** also receiving treatment for mental disorder under a section 58(3)(b) under a SOAD certificated, that has certified that the patient is not capable of understanding the purpose, nature and likely effects of the treatment to be provided.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.

### **Cefn Coed Hospital (23/08/2019)**

The statutory detention documents of twenty-six patients across four wards, Gwelfor, Celyn, Onnen and Derwen were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

#### **Gwelfor Ward**

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.

## **Ysbryd Y Coed, Cefn Coed Hospital**

### **Derwen Ward**

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- No copy of treatment form with prescription chart.
- No section status of patient completed on front of MAR chart.

### **Onnen Ward**

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.
- No review date entered on section 17 leave form completed by responsible clinician.
- One patient receiving covert medication, no record of this completed by the responsible clinician in line with Health Board policy.

### **Celyn Ward**

- Acceptance Form HO14 completed in both areas on form where only one is required.

## **Neath Port Talbot Hospital (02/09/2019)**

The statutory detention documents of five patients on Ward F were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.
- No section status of patient completed on front of MAR chart.
- One patient de-facto detained for 47 days 9 hours as the renewal of detention for the patient had not been completed by the responsible clinician.

## **Caswell Clinic Medium Secure Unit**

The statutory detention documents of twelve patients on Tenby ward were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.
- Section 17 leave forms completed by a temporary responsible clinician were still in use after the permanent responsible clinician has returned.
- One treatment form was not present with the prescription chart for a detained patient.

### **Cefn Coed Hospital revisited (06/09/2019)**

The statutory detention documents of four patients on Carreg Sarn and Ty Gwanwyn wards were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

- Section 17 leave form still has ABMU logo and address on it.

### **Learning Disabilities Services (06/09/2019)**

The statutory detention documents of two patients on Hafod Y Wennol unit were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents observed omissions in practice:

- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- New section 17 leave generated by the responsible clinician had not been forwarded to the Mental Health Act Department for processing.

### **Ysbryd Y Coed, Cefn Coed Hospital revisited (16/09/2019)**

The statutory detention documents of eleven patients on Ysbryd y Coed were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents saw omissions in practice, these were:

#### **Derwen Ward**

- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- Page 2 of Form CO3 treatment certificate not with the prescription card.
- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- Current Form CO3 not filed in the patient's case notes.
- Patient status not completed on the front of the MAR chart.

#### **Onnen Ward**

- Expired treatment form with the prescription chart
- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.
- Section papers not accepted on behalf of the hospital managers for 3 days.

#### **Celyn Ward**

- Mental Health Act documentation not filed in the patient record – AMHP assessment form.

### **Gwelfor Ward, Cefn Coed Hospital revisited (16/09/2019)**

The statutory detention documents of eleven patients on Ysbryd y Coed were reviewed. Our scrutiny of statutory documents saw omissions in practice, these were:

- New volumes needed for several patients – too large, poor state of repair.

- Consent to treatment certificates that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid; this was the case with the copies held on the ward. Non-compliance with chapter 25.87 of the Code.
- New treatment form not forwarded to Mental Health Act Department.
- New treatment form not placed with MAR chart.

### **Learning Disabilities Services (25/09/2019) – Ferndale, Dan y Bont and Church Village**

The statutory detention documents of five patients on three units were reviewed. We also reviewed the governance processes and audited the compliance with the Code of Practice and Mental Health Act 1983.

Our scrutiny of statutory documents observed omissions in practice:

- Section 17 leave authorisation forms that no longer authorised treatment were not clearly marked to indicate to staff that they were no longer valid, this was the case with copies held on the ward. Non-compliance with chapter 27.17 of the Code.

### **Conclusions**

- There remains a high level of non-compliance with the Code of Practice with regard to cancelling old treatment certificates and leave forms in the patient notes.
- Some qualified staff require training on Part 4 of the Act in the use of concurrent use of treatment forms CO2 and CO3, and the procedure to be adhered to when covert administration of medication is being used.

### **Recommendations**

- Where ward clerks/receptionists are in situ, training needs to be provided on the compilation of the health record and provided with training and instruction on how to use the Mental Health Act Department Virtual Drive.
- Computer software needs to be upgraded to Operations System 10 and Microsoft Office 16 on the wards.

### **Actions**

- Regular audit of wards to be conducted by Mental Health Act Managers to provide assurances that the compliance with the Code of Practice are completed and monitored.
- Guidance and training provided to ward clerks/receptionists on the compilation of Mental Health Act documents required in the patient's health record.
- Guidance provided to ward clerks on the accessing information from the Mental Health Act Virtual Drive.

### **By Whom**

- Health Records Administration Managers to instruct staff on the compilation of the health record and culling process.
- Mental Health Act Managers to provide guidance and training on the Act and its Code of Practice, including use of the Mental Health Act Virtual Drive.

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