



**HEALTH BOARD**

**HIGHLIGHT REPORT FROM THE MENTAL HEALTH ACT MONITORING COMMITTEE**

<b>DATE OF MEETING</b>	25/11/2021
<b>PUBLIC OR PRIVATE REPORT</b>	Public
<b>IF PRIVATE PLEASE INDICATE REASON</b>	Not Applicable - Public Report
<b>PREPARED BY</b>	Kathrine Davies, Corporate Governance Manager
<b>PRESENTED BY</b>	Jayne Sadgrove, Vice Chair & Chair of the Mental Health Act Monitoring Committee
<b>EXECUTIVE SPONSOR APPROVED</b>	Julie Denley, Director of Primary, Community & Mental Health
<b>REPORT PURPOSE</b>	FOR NOTING

**ACRONYMS**

MHA	Mental Health Act
SWP	South Wales Police

**1. PURPOSE**

- 1.1 This paper had been prepared to provide the Board with details of the key issues considered by the Mental Health Act (MHA) Monitoring Committee at its meeting on the 3 November 2021.
- 1.2 Key highlights from the meeting are reported in section 2.

1.3 The Board is requested to **NOTE** the contents of the report and actions being taken.

## 2. HIGHLIGHT REPORT

<b>ALERT / ESCALATE</b>	
<b>ADVISE</b>	<ul style="list-style-type: none"> <li>• <b>Quarterly Mental Health Act Activity Report for Adult, Older Persons and Children and Adult Mental Health Services (CAMHS)</b> was <b>received</b> for Quarter 2 – July - September 2020-21. The Committee <b>noted</b> there had been an increase in detentions within both the Adult and Older Persons service between Quarter 1 and Quarter 2 whilst the CAMHS detentions remained the same.</li> <li>• The <b>Risks relating to the Mental Health Act (MHA) for Quarter 2</b> was <b>received</b>. The Committee <b>noted</b> the issue of staffing pressures both within the MHA team and Psychiatry workforce was a matter of concern with mitigation as best as capacity allowed but was something likely to continue in line with other services during winter.</li> <li>• The Committee received the <b>MHA Breaches and Errors Report</b> for Quarter 2. The Committee <b>noted</b> that there were 35 minor errors on section papers which were all rectified within the fourteen day time limit as per S15 of the MHA. This compared with 33 in Quarter 1, which represented an increase of 6.06%. There were two fundamentally defective errors during Quarter 2 in comparison to four in Quarter 1, which represented a decrease of 50%.</li> </ul>

	<ul style="list-style-type: none"> <li>An oral update was received on <b>Individually Commissioned Placements and MHA Use and the need for Assurance</b>. The Committee <b>agreed</b> to <b>receive</b> a written report at the next meeting.</li> <li>The Committee <b>received</b> a report on the <b>Progress on the Recruitment of Section 12 Doctors</b>. The Committee <b>noted</b> the work of the MHA Operational Group in reviewing the independent Section 12 Approved Doctor list and developing a recruitment plan to increase the pool of available doctors. It was <b>agreed</b> that advice be sought through the Director of Corporate Governance with regard to the need to validate the list of approved doctors.</li> </ul>
<b>ASSURE</b>	<ul style="list-style-type: none"> <li>The Committee <b>received</b> a <b>MHA Operational Group update report</b>. The Committee <b>noted</b> specific concerns around the use of the MHA within CAMHS and that a focused meeting was to be convened between the Chair of the Operational Group and representatives of the Mental Health Act team and Association of Mental Health Providers (AMHP) service with the CAMHS Clinical Service Group to develop an improvement plan. The Committee discussed the operational policies. It was <b>agreed</b> that a high level priority review would be undertaken to ensure that the service was not being compromised.</li> </ul>
<b>INFORM</b>	<ul style="list-style-type: none"> <li>The Committee <b>received</b> and <b>noted</b> the report which provided an update on progress in relation to the development of <b>the Regional Crisis Care Concordat Group</b>.</li> </ul>
<b>APPENDICES</b>	Not Applicable.