

Mental Health Act Monitoring Committee

Cycle of Business

(1st April 2021 – 31st March 2022)

The Mental Health Act Monitoring Committee should, on annual basis, receive a cycle of business which identifies the reports which will be regularly presented for consideration. The annual cycle is one of the key components in ensuring that the Mental Health Act Monitoring Committee is effectively carrying out its role.

The Cycle of Business covers the period 1st April 2021 to 31st March 2022.

The Cycle of Business has been developed to help plan the management of Committee matters and facilitate the management of agendas and committee business.

The principal role of the Committee is set out in the Standing Orders 1.0.1.

The Committee is an independent member committee of the Board and has no executive powers, other than those specifically delegated in the Terms of Reference. The Committee will function in accordance with the NHS Audit Committee Handbook.

The purpose of the Committee is to advise and assure the Board that the arrangements to monitor and review the way functions under the Act are exercised on its behalf are operating appropriately and effectively and in accordance with legislation.



Mental Health Act Monitoring Committee Cycle of Business (1st April 2021 – 31st March 2022)

Strategic Objectives	Provide high quality, evidence based and accessible care	Work with Communities and partners to reduce inequality, promote well-being and prevent ill health		Ensure sustainability in all that we do, economically, environmentally and socially		Co-create with staff and partners a learning and growing culture
Threats to the Strategic Objectives	 Failure to deliver a high quality, safe and effective service that improves population health Failure to provide timely health and wellbeing care & services Failure to deliver a service user and carer focussed service. 	inform, develop and deliver an effective, safe and responsive service that meets the health needs of our communities	•	Failure to make robust, informed decisions for our communities and execute them within a sound system of Governance Failure to deliver and maintain financial sustainability Failure to continually adapt and respond to a changing environment. Failure to adopt new technology and innovations to enable change and sustainability	•	Failure to listen, learn and respond appropriately to the views of our staff and partners to enable continual improvement in our services and culture. Failure to engage, listen and act on feedback to shape services and culture. Failure to engage constructively with partners and have a mutual understanding of each other's issues. Failure to sustain an engaged and effective workforce.
Principal Risks	 If: there is a significant deterioration in standards of patient safety and care provided by the Health Board. Then: there could be an increase in incidents across the Health Board Resulting In: Potentially avoidable harm and poor clinical outcomes, reduction in trust and confidence in the service, and regulatory action and intervention. If: demand exceeds capacity Then: service quality, safety and performance could deteriorate. Resulting in: Potentially avoidable harm and poor clinical outcomes, reduction in public trust and confidence in the service. Regulatory action and intervention. 	 If: engagement and collaboration with the Health Board's communities does not fully deliver the required outcomes Then: it may have failed to effectively understand the health needs of its communities and reflect them in its services. Resulting In: the inability to reduce inequalities, promote wellbeing and prevent ill health in its communities. 		 If: the Health Board's financial strategy / objectives are not met Then: it will have failed to achieve its agreed financial plans Resulting In: Qualification of the accounts, potential regulatory action, adverse impact on longer term financial sustainability and reduced ability to invest in improvement and take associated financial risks. If: the Health Board fails to recognise and adopt advances in digital technology and innovations in the design of its business and clinical services. Then: it its ability to remain competitive and sustainable will be affected. Resulting In: the inability to deliver high quality, safe, effective and robust sustainable services for the future (WBFGA). 	2. 3.	 If: the Health Board does not embed its values and behaviours and develop an engaged and motivated workforce / collaboration with its partners Then: there is likely to be a deterioration in patient, staff and partner experience, wellbeing and morale. Resulting In: an adverse impact on patient care and the recruitment and retention of an engaged and effective workforce.

Item of Business	Executive Lead	Reporting period	Jan 2021	Feb 2021 Cancelled	Mar 2021	April 2021	May 2021	June 2021	July 2021	Aug 2021	Sep 2021	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022
Preliminary Matters																	
Minutes of the previous Board Meeting	Director of Corporate Governance	All Regular Meetings		~			\checkmark			✓			\checkmark			\checkmark	
Action Log	Director of Corporate Governance	All Regular Meetings		~			\checkmark			~			\checkmark			\checkmark	
Internal Control & Risk Management																	
Mental Health Act Monitoring Committee Annual Report	Director of Corporate Governance	Annually					\checkmark										
Mental Health Act Monitoring Committee Annual Self-Assessment	Director of Corporate Governance	Annually								~							



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Mental Health Act Monitoring Committee Terms of Reference	Director of Corporate Governance	Annually								\checkmark							
Mental Health Act Monitoring Committee Annual Cycle of Business	Corporate Governance	Annually					\checkmark										
Committee Forward Work Programme	Director of Corporate Governance	All Regular Meetings		√			\checkmark			~			~			\checkmark	
Governance, Performance & Assurance																	
Report from the Mental Health Act Operational Group		All Regular Meetings		~			\checkmark			~			~			\checkmark	
Mental Health Act Quarterly Activity Report	Head of MH Nursing Merthyr & Cynon ILG			~			\checkmark			~			~			√	
Risks related to the Monitoring of the Mental Health Act	Head of MH Nursing Merthyr & Cynon ILG			~			\checkmark			~			~			✓	
Breaches/Analysis of Unlawful Detentions – Mental Health Act	Head of MH Nursing Merthyr & Cynon ILG			~			\checkmark			~			~			✓	
Strategic Update from South Wales Police	South Wales Police	All Regular Meetings		~			\checkmark			\checkmark			\checkmark			\checkmark	
Crisis Care Concordat National and Local Update	Clinical Service Group Manager MH Rhondda & Taff Ely ILG						\checkmark						\checkmark				