

AGENDA ITEM

3.2

MENTAL HEALTH ACT MONITORING COMMITTEE

MENTAL HEALTH ACT MONITORING COMMITTEE DRAFT ANNUAL REPORT 2020/2021

Date of meeting	05/05/2021			
FOI Status	Open/Public			
If closed please indicate reason	Choose an item.			
Prepared by	Kathrine Davies, Corporate Governance Manager			
Presented by	Wendy Penrhyn-Jones, Head of Corporate Governance & Board Business			
Approving Executive Sponsor	Executive Director of Primary, Community & Mental Health			
Report purpose	FOR DISCUSSION / REVIEW			

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)				
Committee/Group/Individuals	ommittee/Group/Individuals Date Outcome			
		Choose an item.		
	I			

ACRONYMS		
MHA	Mental Health Act	
СТМИНВ	Cwm Taf Morgannwg University Health Board	



1. SITUATION/BACKGROUND

1.1 The purpose of this report is to highlight the activities and performance of the Mental Health Act (MHA) Monitoring committee during 2020-2021.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 The Chair of the MHA Monitoring Committee is required to present an annual report outlining it business throughout the financial year to provide the Board with assurances as to scrutiny of performance in relation to meeting the requirements of the MHA 1983.
- 2.2 The MHA Monitoring Committee's draft Annual Report for 2020-2021 is presented at **Appendix 1** for approval. The revised Terms of Reference that were approved by the Health Board on the 30 September 2020 are also presented at **Appendix 2**.
- 2.3 An annual self-assessment questionnaire is also required to be undertaken and this will be completed by members outside of the meeting via Survey Monkey, the results of which will be reviewed at the July 2021 meeting. A position statement regarding the actions that arose from the 2019/20 self-assessment is on the meeting agenda under item 2.4 for consideration.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 The publication of the annual report demonstrates compliance with the Standing Orders, which stipulates that each Committee is required to submit an annual report to the Board through the Chair at the end of the reporting year setting out its activities during the year and detailing the results of a review of its performance and that of any sub-groups it has established. Today's meeting is the first opportunity to provide the draft annual report in the current financial year.



4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outined in this report.			
Related Health and Care standard(s)	Governance,LeadershipandAccountabilityIfIfmorethanoneHealthcareStandardappliespleasepliesplease			
Equality impact assessment completed	No (Include further detail below) No Equality impact assessment is required.			
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.			
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.			
Link to Strategic Well-being Objectives	Work with communities and partners to reduce inequality, promote well-being and prevent ill-health			

5. RECOMMENDATION

- 5.1 The Mental Health Act Monitoring Committee is asked to:
- 5.2 **DISCUSS** and **ENDORSE** the Annual Report for submission to the Health Board
- 5.3 **NOTE** the current Terms of Reference (previously approved by the Health Board at its meeting held on 30 September 2020)
- 5.4 **AGREE** to complete the Annual Self-Assessment questionnaire via Survey Monkey and review feedback at the July 2021 meeting of the Committee.



Appendix 1

DRAFT

Mental Health Act (MHA) Monitoring Committee

Annual Report 2020-2021



MENTAL HEALTH ACT (MHA) MONITORING COMMITTEE DRAFT ANNUAL REPORT 2019-20

1. FOREWORD

I am pleased to present the draft Annual Report of the Mental Health Act Monitoring Committee. The purpose of this report is to formally report on the work of the Committee for the year ending 31 March 2021 in accordance with the Committee's Terms of Reference.

I would like to express my thanks to all the officers of the Health Board, Local Authorities and South Wales Police who have supported and contributed to the work carried out and for their commitment in meeting important targets and deadlines.

2020-2021 has been very challenging during the ongoing Covid-19 pandemic with the Health Board having to move to different ways of working. I would like to extend my thanks to the Mental Health team for adapting so quickly to new processes such as the implementation of electronic documentation and using Microsoft Teams to facilitate hearings and enable the Health Board to meet the requirements of the MHA and Code of Practice.

The Committee has continued to foster and promote a culture of working in partnership for ongoing improvement. As Chair, I have ensured that the work of the Committee progresses in line with its Terms of Reference and also ensured that crossover work is seamless with the Together for Mental Health Partnership Board which I also chair.

Due to my pending retirement, a new Chair of the Committee has been elected and I am pleased to advise that the new Chair will be Jayne Sadgrove and would like to wish her every success for the future.

Maria K Thomas Chair, Mental Health Act Monitoring Committee/ Vice Chair, CTMUHB.



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2. INTRODUCTION

The MHA Monitoring Committee is chaired by the Vice Chair of the Health Board and monitors the Health Board's compliance with the statutory requirements of the MHA. The work of this Committee, including its Terms of Reference, has been reviewed and refreshed during the year being reported (2020/21). The Committee has continued to evolve with changes to report format and agenda content during the year.

The papers for the meeting are routinely published on the organisation's <u>website</u>.

The Committee meets on a quarterly basis and following each meeting produces a highlight report which is then submitted to the next Board meeting to highlight key issues and risks. Broader mental health issues are discussed and taken forward via other established fora such as the Together for Mental Health Partnership Board (which is chaired also by the Vice Chair of the Health Board).

The purpose of the MHA Monitoring Committee is to ensure that all the requirements of the MHA 1983 (as amended) are met by the Health Board.

The Committee considers:

- how the delegated functions under the MHA are being exercised (for example using the Annual Audit) and in line with the 'Code of Practice' requirements
- the multi-agency training requirements of those exercising the functions (including discussing the training report for assurance)
- the operation of the 1983 Act within the Cwm Taf Morgannwg area
- issues arising from the operation of the hospital managers' power of discharge
- suitable mechanisms for reviewing multi agency protocols / policies relating to the 1983 Act
- trends and patterns of use of the MHA 1983
- cross-agency audit themes and sponsor appropriate cross-agency audits
- lessons learnt from difficulties in practice and the development of areas of good practice.

The Committee is also responsible for developing an annual report for presentation to the Health Board.



3. MEMBERSHIP

The membership of the MHA Monitoring Committee comprises both Independent and an Executive Director Members, enabling the Committee to provide appropriate scrutiny and assurance to the Board independently of the management decision-making processes.

Independent membership during 2020-21 was as follows:

- Maria K Thomas, Vice Chair of the Health Board (Chair of the Committee)
- Mel Jehu, Independent Member
- James Hehir, Independent Member
- Phillip White, Independent Member

During 2020/21 the Executive Director Committee Member was Alan Lawrie, Executive Director of Operations (until December 2020). Alan Lawrie delegated his representation to Julie Denley, Director of Primary, Community and Mental Health also attended meetings.

Gareth Robinson, Interim Chief Operating Officer replaced Alan Lawrie from January 2021 (although due to Covid-19 it was necessary to cancel the meeting due to have taken place in February 2021)

4. MEETINGS

Due to the Coronavirus Pandemic of 2020/21 a number meetings of Board Committees were paused, initially in the Spring of 2020 and then again just before the end of the financial year. The MHA Monitoring Committee therefore met on three occasions during 2020/21 and as a consequence its forward work programme was reviewed to ensure that issues were appropriately prioritised.

The three dates on which it met during 2020/21 were as follows:

- 21 August 2020
- 4 November 2020
- 10 December 2020



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	lth Act Monitoring nce 2020-2021	21 Aug 2020	4 Nov 2020	10 Dec 2020	Total
Maria Thomas (Chair)	Vice Chair, Independent Member	\checkmark	\checkmark	\checkmark	3/3
Mel Jehu	Independent Member	\checkmark	\checkmark	\checkmark	3/3
James Hehir	Independent Member	\checkmark	\checkmark	\checkmark	3/3
Phillip White	Independent Member	\checkmark	\checkmark	\checkmark	3/3
Alan Lawrie	Director of Primary, Community & Mental Health (until December 2020)	х	x	Х	0/3
Julie Denley	Director of Primary, Community & Mental Health Services	\checkmark	\checkmark	\checkmark	3/3
Gareth Robinson	Interim Chief Operating Officer (from January 2021)				-
Kishore Kale	Clinical Director	Х	\checkmark	X	1/3
Phil Lewis	Head of Nursing (Acute Mental Health)	\checkmark	\checkmark	\checkmark	3/3
Sam Shore	Senior Nurse	Х			1/1
Robert Goodwin	Service Group Manager, Mental Health		\checkmark	\checkmark	2/2
Fiona Thomas	Localities Manager Mental Health	\checkmark	\checkmark	\checkmark	3/3
Jeremy Burgwyn	Head Administrator, Mental Health Team	\checkmark	\checkmark		2/2
Peter Thomas	South Wales Police Advisor for Mental Health	\checkmark	√		2/2
Colin Hatherley	South Wales Police Mental Health Officer	Х	х		0/2
Karen Thomas	Superintendent, South Wales Police	Х	\checkmark		2/1
Alyson Jones	Representative Merthyr Tydfil County Borough Council	х			0/1
Angela Edavene	Representative Merthyr Tydfil County Borough Council		\checkmark		1/1
Frances Hall	Representative Rhondda Cynon Taff CBC	х	\checkmark		1/1
Alex Beckham	Representative Rhondda Cynon Taff CBC	\checkmark	х		1/1



Mental Health Act Monitoring Attendance 2020-2021		21 Aug 2020	4 Nov 2020	10 Dec 2020	Total
Jackie Davies	Representative Bridgend CBC	X	\checkmark		1/1
Julie Cude	Head of Nursing CAMHS	√			1/1
Ceri William- Price	Consultant, CAMHS		Х	Х	0/2
Gregory Lloyd	Welsh Ambulance Services Trust	Х	\checkmark		1/2
Wendy Penrhyn-Jones	Head of Corporate Administration	\checkmark	\checkmark	\checkmark	3/3

All of the above meetings were quorate.

The Committee's Terms of Reference were reviewed and approved by the Board in July 2020. A minor further amendment requested by the MHA Monitoring Committee in August 2020 and the terms of reference were reapproved by the Board September 2020. For completeness, this Annual Report provides at **Appendix 2**, the current Terms of Reference.

5. MAIN AREAS OF MHAM COMMITTEE ACTIVITY

The agenda for each meeting has followed a standard format in five main parts:

- Part 1 Preliminary Matters
- Part 2 Items for Approval/Discussion
- Part 3 Governance, Performance and Assurance
- Part 4 For Information / Other Matters.

Part 1 - Preliminary Matters

This section of the meeting provides the standard governance approach within all Board Committees within CTMUHB. This includes the action log which captures all areas for attention following the meeting.

Part 2 - Items for Approval / Discussion

This section has included receiving the:

- Committee Annual Report 2019/2020 and self-assessment questionnaire
- Results of the Committee Self-Assessment



• Self-Assessment Action Plan

Part 3 - Governance, Performance and Assurance

This section has included reports throughout the year which included:

- Mental Health Act Quarterly Activity Statistical Report
- Report from Mental Health Operational Group
- Strategic update from South Wales Police (Section 13,15 & 136)
 including mental health staff in police control centre
- Mental Health Act Breaches Relating to the Mental Health Act
- Risks related to the Monitoring of the Mental Health Act
- Crisis Care Concordat
- South Wales Police Mental Health APP
- Impact of Covid-19 on Patients in relation to the Mental Health Act
- Conclusions from the Section 136 Audit

Part 4 - For Information / Other Matters

There were no items shared with the Committee for information sharing purposes.

The 'Forward Look' plan for the Committee was reviewed at each meeting to ensure its content remained appropriately focused.

The Committee Highlight Report is produced following each meeting and subsequently presented to the next available Board meeting.

Links with Other Committees/Boards

Where appropriate a process is in place for any relevant matters to be referred to other Board Committees for scrutiny and or action.

6. ACTION LOG

In order to monitor progress and any necessary follow-up action, the Committee uses an Action Log that captures all agreed actions and this is reviewed at the beginning of each meeting.

7. GOVERNANCE

The Committee provides an essential element of the overall governance framework for the organisation. The Terms of Reference for the Committee provide a robust commitment to monitor the application of the MHA.



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8. ASSURANCE TO THE BOARD

Like many service areas mental health services were impacted by the pandemic and Welsh Government made provision for how the Mental Health Act could be applied and administered should the pandemic have warranted this. The committee was updated as regards these provisions which did not prove necessary and it was assured that patients' needs were met and full compliance with legislation maintained.

The Committee continued to receive updates regarding ongoing audit work and changes put into place to improve the application of the MHA and work to integrate approaches and policies in relation to the Act have again continued in year.

The MHA Monitoring Committee wishes to assure the Board that on the basis of the work completed by the Committee during 2020-2021, there are effective measures in place to scrutinise and monitor the application of the MHA.



Appendix 2

BOARD COMMITTEE ARRANGEMENTS

This Schedule forms part of, and shall have effect as if incorporated in the University Health Board Standing Orders

MENTAL HEALTH ACT MONITORING COMMITTEE

TERMS OF REFERENCE & Operating Arrangements

(Approved by the Board July 2020

minor further amendment requested by the MHA Monitoring Committee in August 2020 and Approved by the Board September 2020



INTRODUCTION

The CTMUHB Standing Orders provide that "The Board may and, where directed by the Welsh Government must, appoint Committees of the Board either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees".

In accordance with Standing Orders (and CTMUHB scheme of delegation), the Board shall nominate a committee to be known as the **Mental Health Act Monitoring Committee**- "the Committee". The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are set out below.

CONSTITUTION AND PURPOSE

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.

SCOPE AND DUTIES

The Committee shall consider:

- how the delegated functions under the Mental Health Act are being exercised (for example using the Annual Audit) and in line with the 'Code of Practice' requirements
- the multi-agency training requirements of those exercising the functions (including discussing the training report for assurance)
- the operation of the 1983 Act within the Cwm Taf Morgannwg area
- issues arising from the operation of the hospital managers' power of discharge
- a suitable mechanism for reviewing multi agency protocols / policies relating to the 1983 Act
- trends and patterns of use of the Mental Health Act 1983
- cross-agency audit themes and sponsor appropriate cross-agency audits
- lessons learnt from difficulties in practice and the development of areas of good practice
- Develop an annual report for presentation to the Health Board.



DELEGATED POWERS

Although the Board has delegated authority to the Committee for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens through the effective governance of its organisation.

The Mental Health Act Monitoring Committee has a key role in assisting the Board to fulfil its oversight responsibilities to ensure it is operating effectively and in accordance with legislation.

Hospital Managers may arrange for their functions under the Mental Health Act to be carried out on a day to day basis by particular Officers on their behalf. (COP 11.7) The arrangements for authorising decisions has been set out in a Scheme of Delegation.

AUTHORITY

The Committee is authorised by the Board to:

- Investigate or have investigated any activity within its terms of reference. It may seek relevant information from any:
 - employee (and all employees are directed to cooperate with any legitimate request made by the Committee), and
 - Any other committee, or group set up by the Board to assist in the delivery of its functions.
- obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board's procurement, budgetary and other requirements
- approve policies relevant to the business of the Committee as delegated by the Board.

Sub Committees

The Committee may, subject to the approval of the Health Board, establish sub Committees or task and finish groups to carry out on its behalf specific aspects of Committee business. At this stage, no sub Committees/task and finish groups have been established.



Related Sub Groups

- Mental Health Act Monitoring Operational Group
- Together for Mental Health Partnership Board
- Crisis Concordat Meeting Forum.

ACCESS

The Chair of the Committee shall have reasonable access to Executive Directors and other relevant senior staff.

MEMBERSHIP

Members:

A minimum of **(4)** members, comprising

Chair Vice Chair of the Board

Vice Chair Independent Member of the Board

Members Two Independent Members of the Board

The 1983 Act is operated by health and social care practitioners, in collaboration with a range of agencies including police and ambulance services, as well as third sector bodies such as advocacy providers. Membership of the Committee should reflect this, as different agencies and practitioners have differing responsibilities and duties under the Act.

The Vice Chair of the Health Board shall Chair the Committee given their specific responsibility for overseeing the Health Board performance in relation to mental health service.

Attendees

- Executive Director of Operations
- Director of Primary, Community & Mental Health
- Representative from South Wales Police
- Representative from Rhondda Cynon Taf County Borough Council
- Representative from Merthyr Tydfil County Borough Council
- Representative from Bridgend County Borough Council
- Chair of Mental Health Act Monitoring Operational Group
- Head Administrator Mental Health Act Administration Team
- Carer Representative from the Together for Mental Health Partnership Board



- Representative from Welsh Ambulance Services Trust (minimum twice per annum)
- Clinical Director for Mental Health
- Head of Nursing for Mental Health Merthyr Cynon Locality Group (minimum twice per annum)
- Mental Health Clinical Service Group Manager Bridgend Integrated Locality Group
- Mental Health Clinical Service Group Manager Rhondda & Taff Ely Integrated Locality Group
- Clinical Director, Child & Adolescent Mental Health Service (CAMHS) (minimum twice per annum)
- Head of Nursing CAMHS

By Invitation:

- Other Directors /Health Board Officers may be invited to attend when the Committee is discussing areas of risk or operation that are the responsibility of that Director.
- The Committee may also co-opt additional independent external members from outside the organisation to provide specialist skills, knowledge and experience.

Secretariat

The Director of Governance / Board Secretary will determine the secretarial and support arrangements for the Committee.

Member Appointments

The membership of the Committee shall be determined by the Chair of the Board, taking account of the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government.

Members shall be appointed for a maximum of 3 consecutive years before formally reviewing their role on the Committee. During this time a member may resign or be removed by the Board.

The Board shall ensure succession planning arrangements are in place.

Support to Committee Members

The Director of Governance / Board Secretary, on behalf of the Committee Chair, shall:



- Arrange the provision of advice and support to committee members on any aspect related to the conduct of their role; and
- Co-ordinate the provision of a programme of training, specific support or organisational development for Committee Members as part of the overall Health Board's Organisational Development programme developed by the Executive Director of Workforce & Organisational Development.

COMMITTEE MEETINGS

Quorum

This will comprise of one Independent Member, the Director of Primary, Community and Mental Health or the Assistant Director; a representative from the partner organisations either from the South Wales Police, Local Authorities or the Welsh Ambulance Services NHS Trust and also at least one clinical representative.

Frequency of Meetings

Meetings shall be held no less than four times a year, and otherwise as the Chair of the Committee deems necessary.

The Committee will arrange meetings to fit in with key statutory requirements during the year consistent with the Health Board's annual plan of Board Business.

Withdrawal of individuals in attendance

The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

Circulation of Papers

The Director of Governance / Board Secretary will ensure that all papers are distributed at least 7 calendar days in advance of the meeting.

REPORTING AND ASSURANCE ARRANGEMENTS

The Committee Chair shall:

• report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes verbal updates on activity and the submission of written highlight reports throughout the year



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- bring to the Board's specific attention any significant matters under consideration by the Committee
- ensure appropriate escalation arrangements are in place to alert the LHB Chair, Chief Executive or Chairs of other relevant committees of any urgent / critical matters that may affect the operation and / or reputation of the LHB.

The Committee shall provide a written, annual report to the Board on its work in support of the Annual Governance Statement specifically commenting on the adequacy of the assurance arrangement, the extent to which risk management is comprehensively embedded throughout the organisation, the integration of governance arrangements and the appropriateness of selfassessment activity against relevant standards. The report will also record the results of the Committees self-assessment and evaluation.

The Board may also require the Committee Chair to report upon the activities at public meetings or to community partners and other stakeholders, where this is considered appropriate e.g. where the Committee's assurance role relates to a joint or shared responsibility.

The Director of Governance / Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation.

RELATIONSHIP WITH THE BOARD AND ITS COMMITTEES / GROUPS

The Committee is directly accountable to the Board for its performance in exercising the functions set out in these Terms of Reference.

The Committee, through the Committee Chair and members, shall work closely with the Board's other Committees including joint committees/Advisory Groups to provide advice and assurance to the Board through the:

- joint planning and co-ordination of Board and Committee business; and
- sharing of information

In doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance arrangements.



The Committee shall embed the corporate goals and priorities through the conduct of its business, and in doing and transacting its business shall seek assurance that adequate consideration has been given to the sustainable development principle and in meeting the requirements of the Well-Being of Future Generations Act.

Related Sub Groups

- Mental Health Act Monitoring Operational Group
- Together for Mental Health Partnership Board
- Crisis Concordat Meeting Forum.

APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS

The requirements for the conduct of business as set out in the Health Board's Standing Orders are equally applicable to the operation of the Committee, except in relation to the Quorum.

CHAIR'S ACTION ON URGENT MATTERS

There may, occasionally, be circumstances where decisions which normally be made by the Committee need to be taken between scheduled meetings. In these circumstances, the Committee Chair, supported by the Director of Corporate Governance as appropriate, may deal with the matter on behalf of the Board, after first consulting with one other Independent Members of the Committee. The Director of Corporate Governance must ensure that any such action is formally recorded and reported to the next meeting of the Committee for consideration and ratification.

Chair's urgent action may not be taken where the Chair has a personal or business interest in the urgent matter requiring decision.

REVIEW

These Terms of Reference shall be adopted by the Committee at its first meeting and subject to review at least on an annual basis thereafter, with approval ratified by the Health Board