



CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD

**'UNCONFIRMED' MINUTES OF THE MEETING OF THE MENTAL
HEALTH ACT MONITORING COMMITTEE HELD ON 4 AUGUST
2021, AS A VIRTUAL MEETING WHICH WAS HELD VIA
MICROSOFT TEAMS**

PRESENT

- | | | |
|----------------|---|---|
| Jayne Sadgrove | - | Independent Member/ Health Board Vice-Chair (Chair) |
| James Hehir | - | Independent Member |
| Mel Jehu | - | Independent Member |

IN ATTENDANCE

- | | | |
|-----------------|---|--|
| Julie Denley | - | Director of Primary, Community & Mental Health |
| Philip Lewis | - | Head of Nursing for Mental Health |
| Robert Goodwin | - | Service Group Manager, Mental Health |
| Peter Thomas | - | South Wales Police Advisor for Mental Health |
| Mark Wilkinson | - | Bridgend County Borough Council |
| Angela Edavene | - | Merthyr Tydfil County Borough Council |
| Frances Hall | - | Rhondda Cynon Taff County Borough Council |
| Karen Thomas | - | South Wales Police |
| Aaron Jones | - | Senior Performance & Quality Manager Mental Health (in-part) |
| Cally Hamblyn | - | Assistant Director of Governance and Risk |
| Kathrine Davies | - | Corporate Governance Manager (Secretariat) |

PART 1. PRELIMINARY MATTERS

MHA/21/8/1

WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting and extended his congratulations to P Thomas in being awarded the MBE in the Queen's Birthday Honours List. The Chair and Members paid tribute to him.

MHA/21/8/2

APOLOGIES FOR ABSENCE

Apologies for absence had been received from Phil White, Independent Member, Fiona Thomas, Locality Manager Mental Health, Wendy Penrhyn-Jones, Head of Corporate Governance and Board Business.

MHA/21/8/3

DECLARATIONS OF INTERESTS

There were no interests declared.

PART 2. CONSENT AGENDA

Members confirmed there were no reports they wished to move from the Consent Agenda to the Main Agenda.

MHA/21/8/4

'UNCONFIRMED' MINUTES OF THE MEETING HELD ON 5 MAY 2021

Resolution: The minutes were **APPROVED** as a true and accurate record.

MHA/21/8/5

ACTION LOG

Resolution: The Committee **NOTED** the Action Log.

MHA/21/8/6

MHAM COMMITTEE ANNUAL SELF-ASSESSMENT REVIEW AND IMPROVEMENT PLAN

Resolution: The Committee **NOTED** the report.

MHA/21/8/7

MHAM COMMITTEE TERMS OF REFERENCE ANNUAL REVIEW

Resolution: The Committee **NOTED** the report.

PART 3 - MAIN AGENDA

MHA/21/8/8

MHA OPERATIONAL GROUP REPORT

R Goodwin presented the report which provided Members with an update on the work of the MHA Operational Group.

J. Hehir queried the reasons for the increased informal detentions in the Royal Glamorgan Hospital (RGH). In response, R. Goodwin advised that there was no conclusion at the moment on the reasons that the numbers had increased. However, there is engagement with individual patients and staff around the consequences of what

is considered to be an informal assessment so that everyone was clear on the rights.

J. Hehir queried whether Section 4 Psychiatrists were being paid for the assessments and also suggested that it would be helpful to obtain some feedback from patients on the usefulness of the questionnaire, and was there a Welsh Language version. R. Goodwin advised that there was a fee attached to Section 4 assessments that could be quantified as to how much this was costing and could be utilised as an incentive when recruiting for those roles. With regard to the questionnaire, R. Goodwin advised that gaining some patient feedback would be considered useful along with providing a welsh language version.

J. Denley commented that it was pleasing to see the pilot with St John Ambulance in place and if successful the costs could be picked up by the Welsh Ambulance Trust (WAST) or another national body and this could be discussed in the next meeting.

J. Denley suggested that a deep dive could be undertaken with regard to community treatment orders and the use of Section 54.

The Chair queried whether the recruitment process for the Section 12 doctors had commenced. R. Goodwin advised that it had not, however, the recommendation to commence the process had been agreed and this would be co-ordinated by the Mental Health team and Workforce colleagues. It was agreed that a progress report would be received at the next meeting.

The Chair asked if the Approved Mental Health Practitioner (AMHP) pilot at the Royal Glamorgan Hospital had been successful. R. Goodwin advised that the pilot had met with some challenges and the member of staff in question had requested to return to their substantive post. The local authority will consider the lessons learned from the pilot which would feed into an overall review of the service across the county borough of Rhondda Cynon Taff.

F. Hall confirmed that there had been challenges in terms of long working hours and unavailability of doctors. The hospital AMHP was still working and a rota had been developed and operating from the 9 July 2021.

The Chair asked if there was a timescale for completion for the three patients waiting for a Community Treatment Order (CTO). R. Goodwin advised that it was imminent and there had been staff

shortages in some areas. This would be reviewed outside of the meeting and reported back.

J. Denley commented that it was pleasing to see the policies listed and suggested that a traffic light system be put in place to gain a better understanding of progress. C. Hamblyn advised that a policy risk assessment tool had been developed and offered to link in with the team to go through the process.

Resolution: The Committee **APPROVED** the Report.

Action: Obtain patient feedback on the questionnaire and consider the development of a welsh language version.

Action: Wider discussion on the St John Ambulance pilot and costs associated to it to be discussed at the next meeting.

Action: Deep dive to be undertaken with regard to community treatment orders and the use of Section 54.

Action: Progress report to be received at the next meeting on the recruitment process for Section 12 doctors.

Action: Update on the three patients waiting for CTO's to be reviewed and reported back.

MHA/21/8/9

MENTAL HEALTH ACT QUARTERLY ACTIVITY REPORT

P. Lewis presented the report that provided the Committee with an overview of MHA activity for Adult, Older Persons and CAMHS for Quarter 1 april – June 2021.

J. Denley advised that with regard to paragraph 3.2 and there being no one single patient record system across CTM, there was now a risk assessment put into place that the hits the threshold for Board reporting. There were mitigations in place in each Clinical Service Group and the main action being progressed to sustainably address the risk is to roll out a national system, Welsh Community Care Information System (WCCIS).

A post holder had now been appointed to support the rollout of WCCIS as its functionality now looks good enough to do so, and will have a better understanding of the timescales for implementation

once the post holder has scoped the work to be completed pre going live.

J. Denley advised that with regard to the Section 135 and 136 risks it might be helpful to extract the data from the 2019/2020 activity as a more typical year.

P. Thomas confirmed that there had been an increase in Section 136 in the Bridgend area and elsewhere within the police force with substantial increases within Cardiff.

M. Jehu expressed concerns that every incorrect use of a Section 136 led to people being placed into the criminal justice system and it was important that the inroads made over the last couple of years was maintained.

K. McPheat-Collins queried whether the increase in quarter 1 data was for repeat users. P. Lewis advised that it was a total figure, however recognised that it was unclear about how many were repeats. He advised that they were keeping a close eye on themes and trends and learning from outcomes. P. Thomas advised that the repeats in CTM was 12% last year.

Resolution: The Committee **NOTED** the report.

Action: Data to be extracted on Section 135/136 from the 2019/2020 activity.

MHA/21/8/10

Breaches/ Analysis of Unlawful Detentions

P Lewis presented the report that provided the Committee with the data regarding errors and breaches that occurred during the application of the Act.

J. Hehir commented that with regard to paragraph 3.4 it was important to receive the benchmarking data but there was also a need to have a consistent approach across CTM in terms of outliers and asked whether any complaints had been received. P. Lewis advised that he was not aware of any, however, he would check outside of the meeting and report back.

P. Thomas advised that with regard to Section 136, there were issues of timeliness due to the demand in the Accident and Emergency Departments at the moment. Training had been

undertaken with CAMHS and A&E staff and plans were now in place to continue with the training in September.

M. Jehu raised the table of rectifiable errors at 2.2 and advised that it was worth reminding members that there was a timescale for when an error could be rectified and the Committee should be delving deeper into the breaches. P. Lewis advised that he fully agreed with the comment and that there was a brief section contained in paragraph 1.2 of the report that outlines this. M. Jehu referred to paragraph 2.4 and advised that this should be followed as good practice and find out what actions had been taken to learn and improve from this.

J. Denley commented that with regard to the four breaches, the process would need to be managed very carefully in terms of the learning and queried whether there was a mechanism in place to carry out a deep dive on breaches. There was more work to be done with regard to Datix and how this was all brought together.

The Chair suggested that with respect to the first and second breaches and the question raised in 3.2 about mechanisms to share learning and patterns of performance, that this should be referred to Quality & Safety Committee or taken at In Committee if the nature of the information could be sensitive in nature. C. Hamblyn advised that Therapies had a helpful one page 'closing the loop' from learning document that would be helpful and would link in with them and share with Members. She also suggested linking in with patient safety colleagues around the Shared Listening and Learning Forum to consider if the referral would be more appropriate to that forum.

Resolution: The Committee **NOTED** the report.

Action: Complaints received with regard to outliers to be checked and reported back.

Action: Link in with patient care and safety colleagues with regard to referring the breaches to the Shared Listening and Learning forum, and if not meeting a referral would need to be made to Quality & Safety Committee

Action: To share the 'closing the loop' learning document from Therapies with colleagues.

MHA/21/8/11 **RISKS RELATING TO THE MONITORING OF THE MENTAL HEALTH ACT**

J Denley presented the report which provided an overview of the current risks relating to the monitoring of the Mental Health Act for Quarter 1 April – June 2021.

Resolution: The report was **NOTED**

MHA/21/8/12 **PRISON TRANSFERS – ACTIVITY AND COMPLIANCE AGAINST CODE OF PRACTICE**

R Goodwin presented the report which provided an update on progress with the review of prison transfers which had taken place over a two year period.

Members **NOTED** that there had been six cases and were advised that the Operational Group would undertake some preliminary work around requests for assessments and whether there had been any delays.

J. Denley congratulated the team with the timeliness of transfers and advised that the Committee could take confidence in that the Health Board was complying with the Act.

Resolution: The report was **NOTED**.

MHA/21/8/13 **UPDATE FROM THE SECTION 136 AUDIT – FOLLOW UP AND ACTION PLAN**

P Lewis provided a verbal update on the follow up and action plan in relation to the Section 136 Audit.

Members **NOTED** that there was one outstanding action in relation to looking at the mechanism for escalating cases and that four out of the five actions had been completed. A final report would be received at the end of the year.

Resolution: The Committee **NOTED** the verbal update.

MHA/21/8/14 **STRATEGIC UPDATE FROM SOUTH WALES POLICE**

P Thomas presented the report that provided the Committee with key data highlights and comparisons on Section 136, Suicides and the Alternative Place of Safety.

P. Thomas advised that he would link in with the Sanctuary Swansea with regard to arranging a visit for Members and would liaise with K. Davies in terms of availability of dates.

With regard to suicides, J. Hehir queried whether any of the individuals were known to the Mental Health service. P. Lewis advised that if an early notification of suicide is received the records are checked to establish if the individual is known and a review is automatically undertaken.

K. Thomas advised that the Suicide Review Group were looking at trends, learning and ways of trying to prevent further deaths. M. Jehu suggested that it would be helpful for the Committee to receive an annual update report from the Suicide Review Group to support its understanding of the issues that are happening within the community. The chair suggested that an offline discussion should be held on where the report should be received.

M. Jehu commented that the work of the Mental Health Liaison Officers was having a really positive impact on the community and applauded the commitment from the Chief Officers Group across Wales. P. Thomas advised that he would feed this back.

Resolution: The Committee **NOTED** the report.

Action: Visit to the Sanctuary for Members to be arranged.

Action: Offline discussion to be held on receiving an annual update report from the Suicide Review Group.

PART 4 – OTHER MATTERS

MHA/21/8/15 **TO DISCUSS AND AGREE THE COMMITTEE HIGHLIGHT REPORT TO BOARD**

Resolution: The Committee considered items to include within the report and **AGREED** that the report would be prepared by the Governance Team following the meeting.

MHA/21/8/16 **FORWARD WORK PLAN**

Resolution: The Forward Work Programme was **NOTED**.

Action: Community Treatment Orders and work on Supportive Placements to be added to the Forward Plan.

MHA/21/8/17 **ANY OTHER URGENT BUSINESS**

There was no urgent business.

MHA/21/8/18 **DATE OF FUTURE MEETINGS**

- 3 November 2021 at 2:00 pm

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