

AGENDA ITEM

2.3

MENTAL HEALTH ACT MONITORING COMMITTEE

OUTCOME REPORT: MENTAL HEALTH ACT MONITORING COMMITTEE -COMMITTEE EFFECTIVENESS SURVEY

DATE OF MEETING	04/08/2021	
PUBLIC OR PRIVATE REPORT	PUBLIC	
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report	
PREPARED BY	Kathrine Davies, Corporate Governance Manager	
PRESENTED BY	Wendy Penrhyn-Jones, Head of Corporate Governance and Board Business	
EXECUTIVE SPONSOR APPROVED	Georgina Galletly, Director of Governance	
REPORT PURPOSE	FOR NOTING	
ACRONYMS		
N/A		

1. PURPOSE

1.1 The Chair of the Mental Health Act Monitoring Committee is required to present an annual report outlining Population Health & Partnership business through the financial year to the Health Board to provide an assurance on the monitoring and scrutiny undertaken of Cwm Taf Morgannwg University Health Board (CTMUHB) performance in relation to Population Health & Partnerships. As part of this process, the Committee are required to undertake an annual self-assessment questionnaire.



1.2 Members of the Committee are asked to note the three responses to the Committee self-assessment questionnaire relating to the activities and performance of the Mental Health Act Monitoring Committee during 2020/2021.

1.3 SUMMARY REPORT

	 Committee Effectiveness: There was a clear consensus that Members/Attendees were aware that: There were approved Terms of Reference in place defining the role of the Committee and were reviewed annually. A Committee Annual Report was produced and reported to the Board to provide assurance that the Committee considers activity consistent with its remit. A Committee Annual Cycle of Business had been established to be dealt with across the year.
Positive Assurance	 2. Committee Business There was a clear consensus that Members/Attendees considered that: Virtual Meetings have overall been a positive experience in that it has allowed meetings to continue and continued scrutiny. The Committee was felt to be adequately supported by the Meeting Secretariat. The Committee felt that it was adequately supported by Executive Directors in terms of attendance, reports and responses provided to challenges/questions. The quality of reports was adequate, however training was now being provided on 'report writing' for those involved in producing reports. Each agenda item was 'closed off' appropriately providing clear conclusions. The Committee felt that there was sufficient authority and resources to perform its role adequately. With regard to Committee meetings held in 'private', the Committee had not had any requirement to hold 'private' meetings up until the May 2021 meeting. The introduction of questions in advance is continually reviewed to ensure that all Members/Attendees are aware that this should not prevent questions and debate within meetings. From 2021, it was noted that



advanced questions only related to items on the consent agenda with any questions arising regarding main agenda items being taken during the meeting.

 Through the development of the new Committee Cycle of Business, meetings are scheduled to align with activity where decisions may need to be made. During the response to the Covid-19 pandemic, the frequency of the Committee meetings decreased as a result of the need to stand-down certain Board Committee meetings; this occurred twice during 2020/21. Should there be a need to make a decision between scheduled meetings of Board Committees there is provision for this to be actioned by email under 'Urgent Chair's Action', which can be ratified at the next meeting

3. Behaviour, Culture and Values

There was a clear consensus that Members/Attendees considered that the behaviours at meetings were courteous, professional and conducive to open and productive debate.

4. Training & Development

• There was a clear consensus that Members/Attendees considered that they had sufficient training and support to fulfil their role. During the period 2020/21 training sessions that were due to be arranged with regard to training with regard to the Mental Health Act were stood down due to the Covid-19 Pandemic and these will be re-instated for 2021-22. An action has been added at 1D below.

5. Welsh Language

• Meetings through the medium of Welsh was supported if it was the preferred language of any of the Members/Attendees. Appropriate arrangements for translation would be necessary in such circumstances.

Areas Requiring Further Assurance	See Areas Requiring Further Action
	Committee Effectiveness
Areas Requiring Further Action	• A Committee Highlight Report is produced following each meeting that is submitted to the next Health Board meeting. This is the mechanism that the Committee Chair uses to provide information on activity, areas or assurance and/or areas of escalation. The compilation of the highlight report is undertaken following each meeting of the Committee and for this reason not all Members/Attendees may be sighted should they not have been present. Please see Action 1A in response to this matter.



	WALES I
	• Boundaries between this committee and other committees are clearly defined with cross-referral processes having been devised when such instances arise. Please see Action 1B in response to this matter.
	• Feedback indicated that new Committee members or external representatives attending the meeting should have a formal introduction to it. To support this Committee Fact Sheets have been developed providing a summary of the meetings purpose and the key contacts. These will be shared in future for new members and external representatives as per Action 1D.
	1. Committee Business
Action Plan	 A. The Committee Highlight Report will in future will be circulated via email for information to all Members/Attendees once it has been submitted to Board. Lead: Corporate Governance Team Timescale: With effect from the May 2021 Committee meeting.
	B. The quality of reports is a consistent theme across all Board and Committees. The Director of Corporate Governance has re-established 'Report Writing' training from June 2021 which is available to all relevant staff involved in producing reports for meetings.
	C. The referral process has been improved by adding defined questions for the Chair to ask in his brief if there was a proposed suggestion of a referral to another Committee.
	 D. Training & Development - Committee Fact Sheets have been developed providing a summary of the meetings purpose and the key contacts. These will be shared in future for new members and external representatives. Lead: Corporate Governance Team. Timescale: As required for new members / external representatives and/or in response to membership rotation of Committee meetings. Mental Health Act Training – Training sessions to be re-instated and arranged across all mental health settings for Committee Members. Lead: Head of Nursing for Mental Health
Appendices	None.



Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg University Health Board

2. Recommendation

2.1 The Committee are asked to **CONSIDER** the report and **CONFIRM** that the actions set out in this report accurately reflect the further improvements needed in response to the analysis of the survey.