

AGENDA ITEM

3.1.1

MENTAL HEALTH ACT MONITORING COMMITTEE
(MENTAL HEALTH ACT OPERATIONAL GROUP REPORT)

Date of meeting	(02/03/22)
FOI Status	Open/Public
If closed please indicate reason	Choose an item.
Prepared by	(Robert Goodwin, Clinical Service Group Manager Bridgend ILG)
Presented by	(Robert Goodwin, Clinical Service Group Manager Bridgend ILG)
Approving Executive Sponsor	Julie Denley Director of Primary Care, Community & Mental Health
Report purpose	FOR DISCUSSION / REVIEW

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
(Insert Name)	(DD/MM/YYYY)	Choose an item.

ACRONYMS

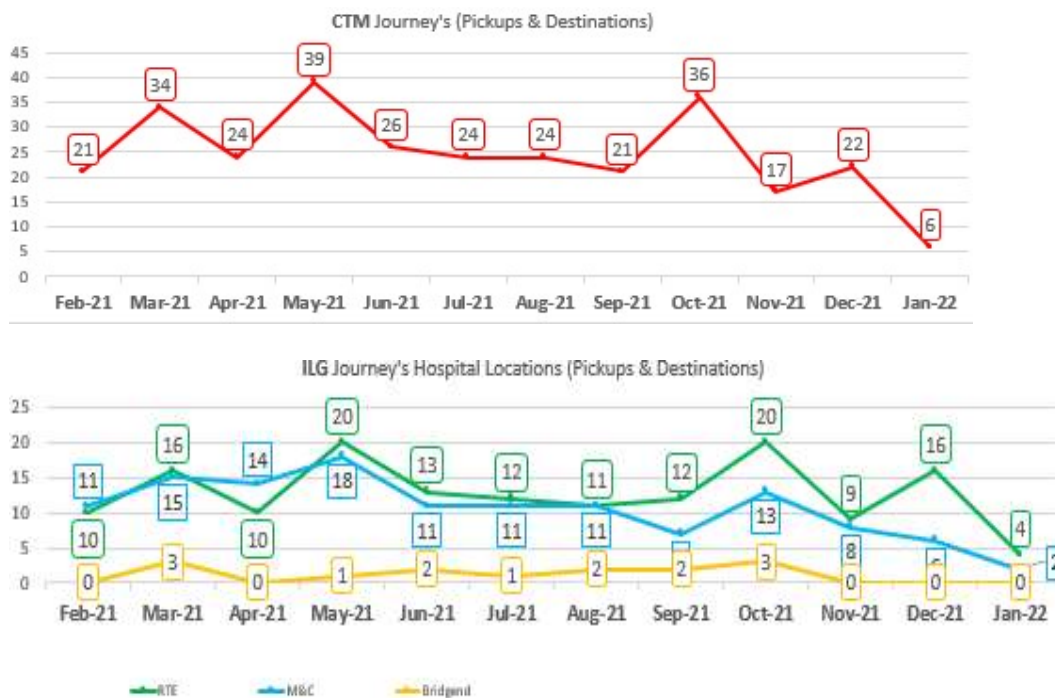
	MHA – Mental Health Act
	AMHP – Approved Mental Health Practitioner
	EDT – Emergency Team
	SWP – South Wales Police
	CAMHS – Child and Adolescent Mental Health Service
	IMHA – Independent Mental Health Advocacy

1. SITUATION/BACKGROUND

- 1.1** The Operational Group has met on one occasion since the last meeting of the Mental Health Act Monitoring Committee which took place on 3 November 2021. The meeting on 4 February 2022 was well attended with representatives from across Adult Mental Health, CAMHs, the Mental Health Act team, Social Services and the Community Advocacy Service.

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

2.1 St John's Ambulance Cymru Mental Health Conveyance Pilot Scheme



The group reviewed the activity report on the St John's Ambulance Patient Conveyance Scheme. The higher number of journeys in Rhondda Taff Ely (RTE) and Merthyr Cynon (MC) may in part be explained by the number of community assessments which took place in those areas. It was agreed that this would helpfully be an area of investigation by the group. Notwithstanding this AMHPs and Service Managers agreed to further promote the use of the scheme in all areas including Older People Services.



2.2 Application of the Mental Health Act for Adult Mental Health patients placed within an Independent Sector Provider

The MHA Monitoring Committee at their meeting on 3 November 2021 asked the Operational Group to review the use of the MHA in the Independent Sector. Healthcare Inspectorate Wales (HIW) have a statutory role to review the use of the Act in each facility which may provide care for patients from many locations across Wales and the UK. Where there are specific concerns HIW would notify the patient's resident Health Board. The table below shows 49 patients from CTMUHB who were detained in Independent Sector provider facilities in January 2022. Those with a MHA status other than Section 3 and Section 37 are subject to restrictions from the Ministry of Justice who have power of discharge.

Provider	MHA Status								
	DoLS	S3	S37	S37/ 41	S47	S47 (Notional 37)	S47/ 49	S48/ 49	Grand Total
Cygnnet Behavioural Health Limited - St Teilo House		3							3
Cygnnet Health Care Limited - Blackheath		1							1
Cygnnet Health Care Limited - Stevenage								1	1
Elysium Healthcare Limited - Aderyn				1					1
Elysium Healthcare Limited - Arbury Court		2							2
Elysium Healthcare No.2 Limited - Aberbeeg Hospital		1							1
Elysium Healthcare No.2 Limited - Thornford Park		1		1					2
Elysium Healthcare No.2 Limited - Ty Gwyn		1	1						2
Hafal		1							1
Heatherwood Court Limited		9							9
Partnerships in Care - Llanarth Court		2		2		1			5
Partnerships in Care (Rhondda) Limited - Ty Cwm Rhondda		3	2	3	1				9
Pinetree Care Services Limited		5					1		6
Rushcliffe Independent Hospital (Aberavon) Ltd		2		1					3
St Andrew's Healthcare Northampton						1			1
St Peters Hospital Limited	2								2
Grand Total	2	31	3	8	1	2	1	1	49

2.3 Developing a Strategic Mental Health Workforce Plan for Health and Social Care



Addysg a Gwellu Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)



Gofal Cymdeithasol **Cymru**
Social Care **Wales**

CONSULTATION DOCUMENT

- This consultation is open from 1st February 2022 until midnight on 28th March 2022.
- Please contribute your views through our [on-line consultation questionnaire](#)



Health Education and Improvement Wales (HEIW) and Social Care Wales are currently consulting on a Mental Health Workforce Plan. Section 5 within suggested actions is to 'develop and implement plans to ensure that there is an appropriate supply of trained professionals to undertake new and existing roles'. This includes Approved Mental Health Professionals (AMHPs) and Section 12 Doctors who have specific responsibilities under the Mental Health Act 1983.

2.4 Mental Health Advocacy Report

The IMHA service continues to have problems with their local IT systems. This prevented them from submitting a report to the Operational Group. A current activity report and update on the CTO audit was requested for the next meeting of the group.

2.5 Health Inspectorate Wales Unannounced Visit to Ty Llidiard 8th to 10th November 2021

The review of the MHA during the visit had been largely positive. Whilst the final report from HIW had not yet been received the need to display information on their role and function was mentioned in the feedback meeting. The poster below has been displayed in the Unit.



<h3 style="color: #00a0c0;">BETH MAE AROLYGWYR GOFAL IECHYD YN EI WNEUD?</h3> <p>Mae Arolygiaeth Gofal Iechyd Cymru (AGIC) yn arolygu gwasanaethau'r GIG a darparwyr gofal iechyd annibynnol i sicrhau bod pobl yng Nghymru yn derbyn gofal da.</p> <p>Yn ystod ein harolygiadau, rydym:</p> <ul style="list-style-type: none"> • Holi pobl am eu profiadau o ofal • Siarad â'r staff a gwirio bod y systemau a'r prosesau cywir yn eu lle • Gwirio a yw safonau'n cael eu bodloni <p>Rydym yn cyhoeddi'r canfyddiadau o'n harolygiadau ar ein gwefan ac yn eu rhannu gyda darparwyr gwasanaethau i helpu i wella gwasanaethau.</p> <p>www.agic.org.uk</p>	<h3 style="color: #00a0c0;">WHAT DO HEALTHCARE INSPECTORS DO?</h3> <p>Healthcare Inspectorate Wales (HIW) inspects NHS services and independent healthcare providers to check that people in Wales are receiving good care.</p> <p>During our inspections, we:</p> <ul style="list-style-type: none"> • Ask people about their experiences of care • Talk to staff and check that the right systems and processes are in place • Check if standards are being met <p>We publish the findings from our inspections on our website and share them with service providers to help improve services.</p> <p>www.hiw.org.uk</p>
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<h3 style="color: white;">SUT I GYSYLLTU Â NI</h3> <p>☎ 0300 062 8163</p> <p>✉ hiw@llyw.cymru</p> <p>🐦 @AGIC_Cymru</p> <p>📘 @arolygiaethgofaliechydycymru</p> <p>📍 AGIC, Adeiladau'r Llywodraeth, Parc Busnes Rhyd-y-car, Merthyr Tudful, CF48 1UZ</p>	<h3 style="color: white;">HOW TO GET IN TOUCH</h3> <p>☎ 0300 062 8163</p> <p>✉ hiw@gov.wales</p> <p>🐦 @HIW_Wales</p> <p>📘 @healthcareinspectoratewales</p> <p>📍 HIW, Government Buildings, Rhyd-y-car Business Park, Merthyr Tydfil, CF48 1UZ</p>
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2.6 CAMHS compliance issues with the Mental Health Act

Whilst there had been good attendance at local MHA training events and communication between CAMHS and the MHA Team had improved there remained some compliance issues. Two well attended targeted meetings have been held with CAMHS on 14th and 26th January 2022 to discuss these. Two key issues required consideration. The first was the timely completion of renewals and discharge from Section. Whilst good notice was given by the MHA Team they often reported CAMHS as waiting until the last day of the Section to renew the detention or discharge the patient. This risked a lapse in the detention and gave the MHA Team little time to scrutinise the documentation. Improvement actions such as the better use of the Patients' Safety at a Glance (PSaG Boards), the local issuing of reminders to senior medical staff and the early scheduling of MHA reviews were agreed.

The second issue concerned the need for the RC requesting a MHA assessment to liaise with the local area AMHP. Whilst the assessment could be delegated by agreement to Bridgend County Borough Council it was important that the assessment was commissioned by the local area service. A contact list and flow chart would be developed by local AMHPs for use by the RCs in CAMHS.

2.7 Out of Area 'looked after children' being placed in the CTMUHB region

CAMHS colleagues raised concern about the increasing trend of out of area 'looked after children' being placed in the CTMUHB region. It was confirmed that when a Mental Health Act Assessment is required this must be coordinated with the local area authority.

2.8 A 24 Month Review on the use of Section 5(4) within RGH Hospital

A previous review on the use of the nurses holding power (Section 5(4)) between 01/04/2019 and 31/03/2021 found it had been used on 39 occasions, 35 of which were in RGH. The group confirmed that the use of Section 5 (4) was an important tool in helping to keep patients safe. A deeper review of 10 cases aimed to provide a better understanding about the circumstances of its use rather than deter nursing staff from utilising this Section. It was noted in the Quarter 3 MHA Activity Report that there were 3 further uses of Section 5(4) all in the RGH.

This holding power enables a registered nurse to prevent a voluntary inpatient from leaving a ward if they are concerned about their safety or the safety of others. The sample of 10 patients found that 8 were from the Merthyr and Cynon Locality with 8 also being females. 4 of the 10 patients presented with psychotic symptoms, the remaining 6 assessed as a risk of self-injury. Only 1 of the Section 5(4)'s was applied by night duty staff. All detentions were completed by substantive staff members. All of the detentions were reviewed within the 6 hour timeframe with 50% resulting in further detention under the MHA. The group noted the information on the review and would wait to determine if the recent temporary reorganisation of senior medical staff into separate inpatient and community roles in Adult Services would have an impact on the utilisation of this Section.

2.9 All Wales Benchmarking Report

A quarterly report is prepared by Cardiff and Vale UHB. At the time of our Operational Group Meeting the Q3 report was not available. This would be reviewed at the next meeting of the group.

2.10 All Wales AMHP Group

This newly established group had begun by circulating a questionnaire to all Local Authorities. The group would aim to help standardise documentation and procedure which would be beneficial.

2.11 Section 117 Aftercare Registers

The Bridgend Section 117 Register had been validated 3 years ago following a targeted audit in this area. A similar review of registers in other areas of the Health Board would need to be completed before a robust central register could be developed.

2.12 Register of Social and Clinical Supervisors for restricted patients

All restricted patients subject to a conditional discharge by the Ministry of Justice (MoJ) are required to have a nominated social and clinical supervisor. Further work is required to develop a central register. It is understood that Health Boards in Wales do not routinely maintain a register of conditionally discharged patients. Our MHA Team Leader will raise the issue in the All Wales MHA Forum.

2.13 Mental Health Act Activity Quarter 3

Section 4 and Section 5(4) were each used on 3 occasions in Royal Glamorgan Hospital (RGH). One of our older people died on 12 November 2021 whilst on Ward 7 in Ysbyty Cwm Cynon. The

patient was subject to Section 2 of the MHA at the time. There were two fundamental defective errors which are considered in the separate Mental Health Activity Report. There was discussion around the reduction in adult detentions in Bridgend in Quarter 3. Clinical colleagues considered that during the 'lock down' in Quarter 2 a number of well know patients with mild to moderate mental health concerns were presenting with acute problems.

The relatively high number of Section 136 cases in Bridgend was also considered and the group agreed to undertake a longitudinal review so that we could review any trends. It was understood that the circumstances surrounding the detention of a young person in Merthyr Tydfil Police Station in September 2021 were the subject of a separate review within the Health Board.

In Quarter 3 no adolescents from Bridgend were detained to the Adult Mental Health Ward F in Neath Port Talbot Hospital. There were 2 such detentions in RGH. There was 1 adolescent detention on the paediatric Ward 31 in Prince Charles Hospital (PCH).

2.14 Mental Health Act Training

On 13th January and 15th February 2022, Dr Debbie Martin delivered training to a multidisciplinary/agency audience on the interface between MHA and MCA



Content

- The Kings fund - Understanding clinical decision-making at the interface of the Mental Health Act (1983) and the Mental Capacity Act (2005)
- Deprivation of liberty – human rights
- Deprivation of liberty – how to spot it
- Means of lawful deprivation of liberty – choice?
- Deprivation of liberty – case studies
- Deprivation of liberty – children and young people (MHA, Court or PR)

An overview of the Mental Health Act was delivered to nursing staff using Microsoft Teams on 08/12/2021. The same overview was shared with 5 Independent Members of the Health Board on 02/02/2022. A recording of this training was also shared with the remaining Independent Members.

The presentations from the training events on Mental Health Law, which covered Hospital Managers Barring Hearings together with CTO recalls and revocations have been uploaded onto Share Point. These can be accessed using the following link:

<http://ctuhb-intranet/dir/MH/MHAH/Tr/ layouts/15/start.aspx#/SitePages/Home.aspx>

2.15 Mental Health Act Audit Plan Review

A timetable of statutory documentation audits has been prepared for the year. This includes visits to all 14 CAMHS and Adult Service wards. The audits will include compliance with the HIW process for filing MHA paperwork.

2.16 Operational Policies

The MHA team have applied the Health Board's Risk Assessment Tool to each of the policies listed in the table below. Those highlighted in red have been identified as a priority for review. A sub group of the Operational Group is to be established to take responsibility for

review of policy. The group will include multidisciplinary and service user involvement.

REF NUMBER	TITLE	LEAD PERSON	PROGRESS
MH04	Community Treatment Policy	Alison Thomas	Agreed 15/10/2021
MH09	Hospital Managers Operational Procedure	Alison Thomas	Agreed 09/07/2021
MH12	Section 17 leave policy	Jeremy Burgwyn	Agreed 09/07/2021
MH28	Hospital Managers Scheme of Delegation	Alison Thomas	Agreed 09/07/2021
MH17	Section 132&133 patient's rights procedure	Jeremy Burgwyn	Awaiting ratification in Operational Group 04.02.22
MHA117	Section 117 Policy	Jeremy Burgwyn	Working group established
New	Allocation of Responsible Clinician	Alison Thomas	Discussed in meeting 15/10/2021
MH03	Section 136	Jeremy Burgwyn	Discussed in meeting 15/10/2021. Police to circulate national policy
MH02	Section 135(1) Section 135(2)	Jeremy Burgwyn	Discussed in meeting 15/10/2021. Police to circulate national policy
MH16	IMHA Procedure	Alison Thomas	For review Lapsed 18/07/2021
MH29	Applying to become an Approved Clinician	Alison Thomas	For review Lapsed 18/07/2021
MH19	Section 19 transfer procedure	Alison Thomas	Priority for review Lapsed 15/11/2019
MH06	Section 5 (4)	Alison Thomas	Awaiting ratification in the Operational Group meeting 04.02.22 (Lapsed 08/11/2020)
MH07	Section 5 (2)	Alison Thomas	Priority for review Lapsed 18/07/2021
MH08	Consent to Treatment Sec 58 and Sec 58a	Alison Thomas	Priority for review- in progress Lapsed 14/10/2017

AGREED
 FOR REVIEW
 FOR PRIORITY REVIEW

2.17 Operational Group Work Program

The group considered a proposed work plan including the following items:-

Activity	Progress	Timescale
Service user feedback	Advocacy Support Cymru to report back to the Operational Group on their audit of patients subject to a CTO	May 2022
Audit	Progress on Audit Program to be considered at the next meeting	May 2022
Policy Work	Timetable to be agreed with the newly established Operational Policy Sub Group for review of prioritised policies	May 2022
Use of Section 5(4)	Utilisation within RGH to be monitored following reorganisation of medical staff	August 2022
Conveyance of patients to hospital	St John's Ambulance pilot scheme to be promoted within CTMUHB by the local AMHPs	May 2022
MHA Activity	CAMHS improvement actions following focused meeting to be considered at next Operational Group	May 2022

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

3.1 Health Inspectorate Wales Unannounced Visit to Ty Llidiard 8th to 10th November 2021

The final report from HIW was expected shortly.

3.2 Allocation of Responsible Clinicians for patients detained under the MHA

The Mental Health Act Team were hopeful that the recent temporary reorganisation of senior medical staff in RTE and MC would have a positive impact on the allocation of Responsible Clinicians for patients detained under the MHA.

3.3 Out of Area 'looked after children' being placed in the CTMUHB region

CAMHS colleagues raised concern about the increasing trend of out of area 'looked after children' being placed in the CTMUHB region.

3.4 Specific Concerns around the use of the MHA within CAMHS

Following two focused meetings with clinical colleagues from CAMHS some improvement actions to help with the timely renewal and



discharge of Section together with a clear pathway for commissioning MHA assessments with local AMHPs were agreed.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Safe Care
	If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.
	If no, please provide reasons why an EIA was not considered to be required in the box below.
	The MHA Operational Group meets bi-monthly to review the application of the Act across CTMUHB
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 Goals	Improving Care

5. RECOMMENDATION

5.1 The Committee is asked to **NOTE** the work of the MHA Operational Group.