



CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD

'UNCONFIRMED' MINUTES OF THE MEETING OF THE MENTAL HEALTH ACT MONITORING COMMITTEE HELD ON 12 OCTOBER 2022, AS A VIRTUAL MEETING WHICH WAS HELD VIA MICROSOFT TEAMS

PRESENT

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

IN ATTENDANCE

- Julie Denley - Director of Primary, Community & Mental Health
- Philip Lewis - Head of Nursing, Mental Health
- Robert Goodwin - Service Group Manager, Mental Health
- Alyson Jones - Merthyr Tydfil County Borough Council
- Angela Edavene - Merthyr Tydfil County Borough Council
- Colin Hatherley - South Wales Police
- Ana Llewellyn - Head of Nursing, Primary, Community, Mental Health & Learning Disabilities Care Service Group
- Wendy Penrhyn-Jones - Head of Corporate Governance and Board Business

PART 1. PRELIMINARY MATTERS

MHA/22/10/1

WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

MHA/22/10/2

APOLOGIES FOR ABSENCE

Apologies for absence had been received from Geraint Hopkins, Independent Member, James Hehir, Independent Member, Aaron Jones, Clinical Service Group Manager, Benjamin Collins, Service Manager, Welsh Ambulance Services NHS Trust, Alexandra Beckham, RCT CBC, Dr. Mary Self, Consultant Psychiatrist, and Kathrine Davies, Corporate Governance Manager.

MHA/22/10/3 **DECLARATIONS OF INTERESTS**

There were no interests declared.

PART 2. CONSENT AGENDA

MHA/22/10/4 **'UNCONFIRMED' MINUTES OF THE MEETING HELD ON 8 JUNE 2022**

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

MHA/22/10/5 **COMMITTEE DRAFT ANNUAL REPORT 2021-22**

Resolution: The Annual Report was **APPROVED**.

MHA/22/10/6 **HOSPITAL MANAGERS FEES REVIEW**

Resolution: The Report was **NOTED**.

MHA/22/10/7 **ACTION LOG**

The Chair made reference to the fact that some of the Actions had been on the Action Log for some time and required a definitive update. The Chair requested that all completed actions be removed from the summary for the next meeting.

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

Action: To update the live actions captured in the Action Log and delete completed items by the next meeting.

PART 3 - MAIN AGENDA

IMPROVING CARE

MHA/22/10/8 **MHA OPERATIONAL GROUP REPORT**

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

The process for reviewing policies and the appropriate route for them to be signed off either through the Operational Group or the Committee/Health Board was discussed. It was agreed that this would be clarified with the Assistant Director of Governance and Risk and the response shared with the Committee outside of the meeting.

Agenda Item 2.1.1

A. Jones referred to page 5 of the report and the concerns raised with regard to the Place of Safety accommodation provided at Prince Charles Hospital and advised that they had undertaken a walkabout visit where it had been deemed as unsafe and unsuitable for patients and also for lone workers. P. Lewis, in response, advised that a risk assessment had been carried out and proposals made for a room without ligature points and with an adjacent room to allow staff to make required phone calls and arrangements whilst keeping people safe.

J. Denley advised that there were moves to not have the crisis team based in the emergency departments as the only people who should be attending the emergency departments were those who were medically unwell and required acute medical intervention. A broader re-think as to what the Health Board offered in terms of emergency access and places of safety was required. It was suggested that this medium term piece of work could be picked up via the Crisis Care Concordat, NHS 111 and the Operational Group around what the future should look like in terms of the emergency pathway and places of safety for the Health Board.

M. Jehu advised that he was a member of the Prince Charles Hospital Ground and First Floor Project Group and could follow this up at their next meeting.

C. Hatherley referred to the discussions with regard to the issues with the Place of Safety at Prince Charles Hospital and advised that he was pleased that this was being escalated as not fit for purpose and also that the Emergency Department not being a future place for the crisis team. He would be happy to attend any meetings on behalf of South Wales Police.

J. Sadgrove requested an update on progress in this matter at the next meeting.

J. Sadgrove referred to the request for additional Hospital Managers and queried whether it was this Committee that made those decisions. R. Goodwin advised that it was the Power of Discharge Committee and that reported into the Committee via the Operational Group report.

A. Llewellyn advised that it was quite difficult to recruit Hospital Managers as they tended to come from a particular demographic of society and did not necessarily represent the wider community. There were often risks of not having Managers in place when those

Agenda Item 2.1.1

currently performing this role reached the end of their term. She advised that she would review the policy on this.

J. Sadgrove referred to paragraph 2.5 and queried whether there had been any progress on the adolescent bed on Ward 14 and if the statement of need had been submitted for Capital funding. R. Goodwin advised that further information was required from the Estates Department to complete the statement of need. J. Denley, in response, advised that she would escalate this.

J. Sadgrove referred to the Section 117 aftercare and noted the limited number of discharges and the legal advice that had recently been received and sought an update. R. Goodwin advised that the discharge required patient approval that sometimes could be difficult to obtain. A process was going to be re-introduced where there were regular reviews by the multi-disciplinary and clinical teams.

A. Jones advised that there should be at least a minimum of an annual review for any individuals who were subject to a Care Treatment Plan (CTP) and the commissioning team would make sure they were more frequent if they were out of area because of the costs associated to these. The difficulty in discharging they had found in Merthyr Tydfil, was due to the annual reviews being minimally set. If a patient was on a medication such as an anti-depressant they could not discharge.

J. Denley, in response, advised that it might be helpful as part of the review of the policy to look at this alongside the legal advice that had been received.

J. Denley referred to the Consent to Treatment policy and suggested that the review of this policy be given priority as it could have serious implications for people and their treatment.

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

Action: Clarify the position in relation to sign-off of policies and circulate response to the Committee.

Action: Statement of need for the Place of Safety at Prince Charles Hospital to be escalated.

Action: Broader piece of work around the crisis team to be picked up via the Crisis Care Concordat, NHS 111 and the Operational Group.

MHA/22/10/9

**MENTAL HEALTH ACT QUARTERLY ACTIVITY REPORT/
BREACHES/ANALYSIS OF UNLAWFUL DETENTIONS**

P. Lewis presented the report that provided the Committee with an overview of MHA activity for Adult, Older Persons and Child & Adult Mental Health Services (CAMHS) for Quarter 1 April – June 2022.

A. Llewellyn referred to the fundamentally defective errors and commented that it was good to see the outcome for the patient on the second case. However, she queried how the risk had been managed for the first patient and how they had reached the outcome. P. Lewis undertook to confirm the position and later in the meeting verbally confirmed the answer to this question.

M. Jehu referred to the decrease in Section 136 Detentions and applauded the work that had been undertaken in this area. He highlighted the legal difference between errors and breaches. J. Denley advised that the Committee at a previous meeting had received some all Wales benchmarking data where it showed that the Health Board was in a good position.

J. Sadgrove queried whether there would be a quality group set up within the new Care Group structure specifically for Mental Health. A. Llewellyn advised that they had drafted the quality governance arrangements for the Mental Health Care Group and there would be oversight at Care Group level.

J. Sadgrove advised that it was pleasing to see the performance improvements as set out within the report and queried whether the data could be presented as 3 localities and as CTM wide to enable the Committee to scrutinise the position across the health board area.

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

Action: Graphs to show three locality areas and CTM wide position.

MHA/22/10/10

**RISKS RELATING TO THE MONITORING OF THE MENTAL
HEALTH ACT**

J Denley presented the report that provided an overview of the current risks relating to the monitoring of the Mental Health Act for Quarter 1 April – June 2022.

J. Sadgrove thanked J. Denley for her report and advised that the Committee had noted the breaches and the work that was being done to prevent reoccurrence. She queried whether reviews were

undertaken for the previous two to three years to see if there was a particular pattern in breaches as opposed to errors. J. Denley advised that pre-pandemic they undertook a review to establish if there were any themes and suggested that this piece of work could be assigned to the new Care Group responsible for mental health services which could prepare a report for the Committee in six months time. J. Sadgrove advised that this could be added to the Forward Work Plan to receive a future update on this work in 2023.

Resolution: The report was **NOTED**

Action: Care Group to review back in relation to any themes and patterns in terms of breaches for six months time.

MHA/22/10/11 **USE OF THE MHA FOR PATIENTS WITH A LEARNING DISABILITY**

R. Goodwin provided the Committee with verbal update on the use of the MHA for patients.

J. Sadgrove thanked R. Goodwin for his report and advised that it was important that the Committee were sighted on this but also going to be received at the Quality & Safety Committee.

Resolution: The verbal update was **NOTED** and **AGREED** that a written report would be received at the next meeting.

MHA/22/10/12 **STRATEGIC UPDATE FROM SOUTH WALES POLICE**

C. Hatherley provided a verbal update to the Committee and advised that for future meetings of the Committee a report would be provided to review the statistics and set out performance from an all Wales perspective.

A. Llewellyn referred to the 80% figure that had been quoted and queried whether that was conversion from the S136 to admission. C. Hatherley advised that it was, however, he would look into the detail on the statistics outside of the meeting to confirm if it was correct.

M. Jehu thanked C. Hatherley for his verbal report and advised that he had been a constant on this Committee and his contribution was very much welcomed.

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

Action: Written Strategic Reports to be received at future meetings of the Committee.

MHA/22/10/13 **UPDATE FROM SOUTH WALES POLICE ON THE USE OF THE MH APP**

C. Hatherley provided a verbal update on progress on the use of the mental health App.

A. Jones advised that although the numbers were decreasing they had concerns around being unable to make contact with the Police when calling one on one and sometimes could be waiting over an hour to get through and then told to ring 999. She advised that the Police have to be present to execute the warrant. In response, C. Hatherley advised that NHS 111 were aware that they had changed their processes in terms of local policing and this had now been delegated to bronze inspectors, one in North Wales and one in South Wales and the new process had experienced teething problems which had been highlighted and escalated at a senior management team level.

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

MHA/22/10/14 **STRATEGIC UPDATE FROM LOCAL AUTHORITY PARTNERS**

A. Edavene provided the Committee with a verbal update.

A. Jones referred to the mental health assessments and advised that it was particularly difficult for Advanced Mental Health Practitioners (AMPs) with the lack of medical cover in Merthyr to be able to request doctors to come out to undertake Mental Health Act Assessments and any support from the local authority would be welcomed.

J. Denley, in response, advised that there were no immediate solutions to the medical issue but there were a couple of jobs out to advert which were attracting interest. She advised that the Operational Group could track this and scope the risks again to help articulate the extent of the issue to the relevant bodies.

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

Action: Operational Group to scope the risks around medical cover in Merthyr to articulate the extent of the issue to relevant bodies.

PART 4 – OTHER MATTERS

MHA/22/10/15 **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/22/10/16 **FORWARD WORK PLAN**

The Chair advised that if there were any suggested items for future meetings to relay these to the Governance Team. J. Denley suggested that once the Care Groups were fully set up and running that the Forward Work Plan be reviewed to set up a new work programme for the Committee for six months' time.

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

MHA/22/10/17 **ANY OTHER URGENT BUSINESS**

MHA/22/10/18 **HOW DID WE DO TODAY**

The Chair invited members to comment and reminded them that they could also relay feedback outside of the meeting.

MHA/22/10/19 **DATE AND TIME OF NEXT MEETING**

- 7 December 2022 at 2:00 pm