



AGENDA ITEM

4.1

MENTAL HEALTH ACT MONITORING COMMITTEE

MENTAL HEALTH ACT OPERATIONAL GROUP REPORT

Date of meeting	08/03/23	
FOI Status	Open/Public	
If closed please indicate reason	Not Applicable - Public Report	
Prepared by	(Robert Goodwin, Clinical Service Group Manager Bridgend ILG)	
Presented by	(Robert Goodwin, Clinical Service Group Manager Bridgend ILG)	
Approving Executive Sponsor	Ana Llewellyn, Nurse Director, Primary Care, Community and Mental Health in the absence of Deputy COO Primary Care, Community and 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 07 December 2022. The meeting on 27 January 2023 was well attended with representatives from across Adult Mental Health, CAMHs, the Mental Health Act team, Social Services and the South Wales Police.

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

2.1 Mental Health Act Activity Report Q3, October - December 2022

The group noted the 3 occasions in which Section 4 had been applied (2 in the Princess of Wales Hospital and 1 in the Royal Glamorgan Hospital) and the 2 occasions when the Nurses Holding Power Section 5(4) had been used (once in the Royal Glamorgan Hospital and once in Angelton Clinic). The number of minor errors has reduced to 18 which compared favourably with 36 in Q2. There was a single adolescent admission into the Royal Glamorgan Hospital and the number of Section 136 detentions had reduced from 73 in Q2 down to 36 in Q3. The group noted the death of a patient detained under Section 37 of the Mental Health Act in November 2022.

2.2 Fundamental Errors and Breaches, Two Year review April 2020/March 2022

Professional	Section	Description of error	Total
Doctor	5(2)	Use of English Form	1
		Not signed, timed or dated	5
	2	Form HO4 not signed/dated	1
	2	Form HO3 failed medical scrutiny	1
	2	Professional conflict of interest	1
	2	Improper use of s2- Consecutive use of Section 2, without a significant change in presentation, which was agreed by the Clinical Director.	1
AMHP	2	Form HO2 stated wrong hospital	1
	2	Form HO2 not signed	1
	3	Form HO6 not signed/dated	1
	2	Inappropriate use of s2- The AMHP mistakenly believed that they could not detain under Section 3 as they had not been able to speak to the nearest relative and used a consecutive Section 2	1
Nurse	2	Form HO14 not signed/dated	1
	S5(4)	Patient on a CTO	1
TOTAL			16

The group considered a 2 year review of Fundamental Errors and agreed to go back further in time to understand if there were any longer term trends for discussion at the next meeting. The existing receipt and scrutiny check list had been updated and training boards were being placed on all wards which described the Section 5(2) process for medical staff. The Mental Health Act Manager also participates in the Junior Doctor Induction Program and will attend future AMHP team meetings.

2.3 Hospital All Wales Benchmarking Report for Q3 2022/23

The report compared Mental Health Act activity among the 6 Health Boards in Wales. Variations in the use of Section 136, CTO's and the number of Fundamental Errors/Breaches are shown in the tables below:

Patients Subject to Section 136

Swansea Bay UHB	Aneurin Bevan UHB	Bets Cadwaladr UHB	Cardiff & Vales UHB	Cwm Taf Morgannwg UHB	Hywel Dda UHB	Powys Teaching UHB
35	73	135	119	36	31	4

Adult Patients Placed on a CTO

Swansea Bay UHB	Aneurin Bevan UHB	Bets Cadwaladr UHB	Cardiff & Vales UHB	Cwm Taf Morgannwg UHB	Hywel Dda UHB	Powys Teaching UHB
16	5	14	3	6	3	1

Fundamental Errors/Breaches

Swansea Bay UHB	Aneurin Bevan UHB	Bets Cadwaladr UHB	Cardiff & Vales UHB	Cwm Taf Morgannwg UHB	Hywel Dda UHB	Powys Teaching UHB
8	0	1	3	2	4	0

2.4 Hospital Managers Power of Discharge Committee Meeting – 09 November 2022

The Operational Group considered the Minutes of the Hospital Managers Power of Discharge Committee held on 09 November 2022. Clinical colleagues have been reminded about the need to ensure their reports had been prepared within the previous 3 months. The group had re-elected the current Chair and the Vice Chair for a further two years. The Health Board had received a single expression of interest for the position of new Hospital Manager posts and an interview was being scheduled. Appraisal meetings were being scheduled for the 10 existing Hospital Managers.



2.5 **Joint Parliamentary Committee on the draft Mental Health Bill**

The joint committee has recently published its report which includes an examination of how the draft bill; would ensure fewer people were detained against their wishes, promote patient choice, address racial inequalities and end the inappropriate long-term detention of people with learning disabilities and autism.

Key recommendations to Government include:

- Creation of a new statutory Mental Health Commissioner post
- The principles underpinning the 2018 review and respect for racial equality should be included in the Bill
- Health organisations should appoint a responsible person to collect and monitor data on detentions under the MHA, broken down by ethnicity, with annual figures published by Government, and to implement policies to reduce inequalities
- Community Treatment Orders are used disproportionately for black and ethnic minority patients and should be abolished for the majority of patients, except those involved in criminal proceedings or under sentence where their continued use should be reviewed
- Strengthened duties for Integrated Care Boards and Local Authorities to ensure adequate supply of community services for people with learning disabilities and autistic people to avoid long-term detention
- Patients detained or previously detained under the MHA should have a statutory right to request on advance choice document is drawn up



2.6 **Review of the Cwm Taf Morgannwg Emergency Duty Team**

The acting EDT AMHP Team Leader attended the Operational Group and confirmed the limited staffing levels during the night and the need for the team to prioritise safeguarding concerns. The report identifies that 'partner agencies' don't feel there is enough provision and are frustrated with how often they reach out to EDT and EDT can't help'.

The acting EDT Team Leader confirmed the EDT did not routinely have problems obtaining a Section 12 Approved Doctor for the purpose of a Mental Health Act assessment. The group were aware of some difficulties in obtaining Section 12 Approved Doctors during the day and the provision of AMHPs from the EDT at night. The Operational Group asked the local AMHPs in their monthly regional team meeting to provide the evidence to the EDT about waiting times for their service. This would also be considered by JM within the EDT.



**Review of the Cwm Taf Morgannwg
Emergency Duty Team**
Summary of Findings and Recommendations
Report for Rhondda Cynon Taf County Council

Practice Solutions Ltd
Jon Morgan, Imogen Blood & Maxine Bell
April 2022



2.7 St John's Ambulance Cymru Mental Health Conveyance Scheme Update

The National Collaborative Commissioning Unit have published their first year review of this pilot scheme which aims to improve the timeliness of patient conveyance and the patient experience. The average response time was 84 minutes during the day and 208 minutes during the night. Journey distances averaged 27 miles in the day and 24 miles at night. Informal feedback from all partners has been positive and the scheme helps Approved Mental Health Professionals effect rapid conveyance. The Operational Group continues to promote the scheme and has confirmed with the Commissioning Unit that journeys can be booked directly with St John's Ambulance before first calling the South Wales Ambulance Service.



The poster features a photograph of several St John Ambulance Cymru vans parked in a garage. The vans are white with yellow and green reflective stripes. The St John Ambulance Cymru logo is in the top right corner. The text on the poster includes the organization's name, the title 'Mental Health Conveyance', a contact number, social media handles, and logos for GIG CYMRU NHS WALES and the National Collaborative Commissioning Unit.

St John Ambulance Cymru

Mental Health Conveyance

If you are a designated person Call - 03300-586591

St John Ambulance Cymru,
Priory House, Beignon Cl,
Cardiff CF24 5PB

www.sjacymru.org.uk

Registered in England and Wales. Charity number 250523.

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Cydwethredol Cenedlaethol
National Collaborative
Commissioning Unit



2.8 **Section 140 of the Mental Health Act 1983**

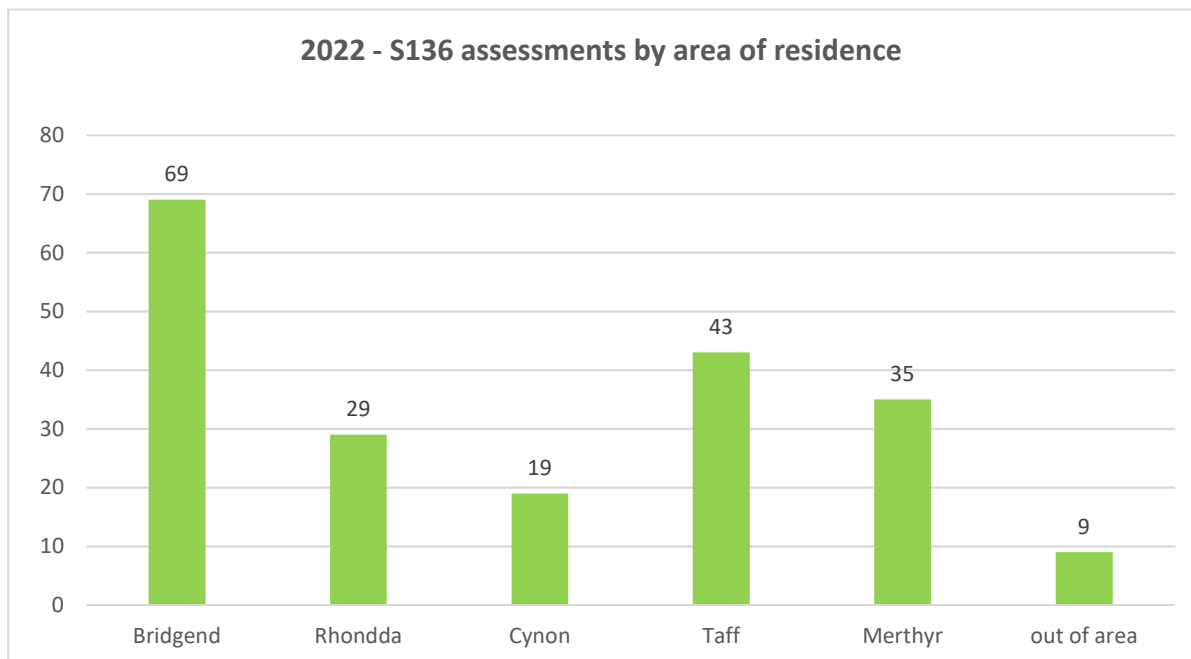
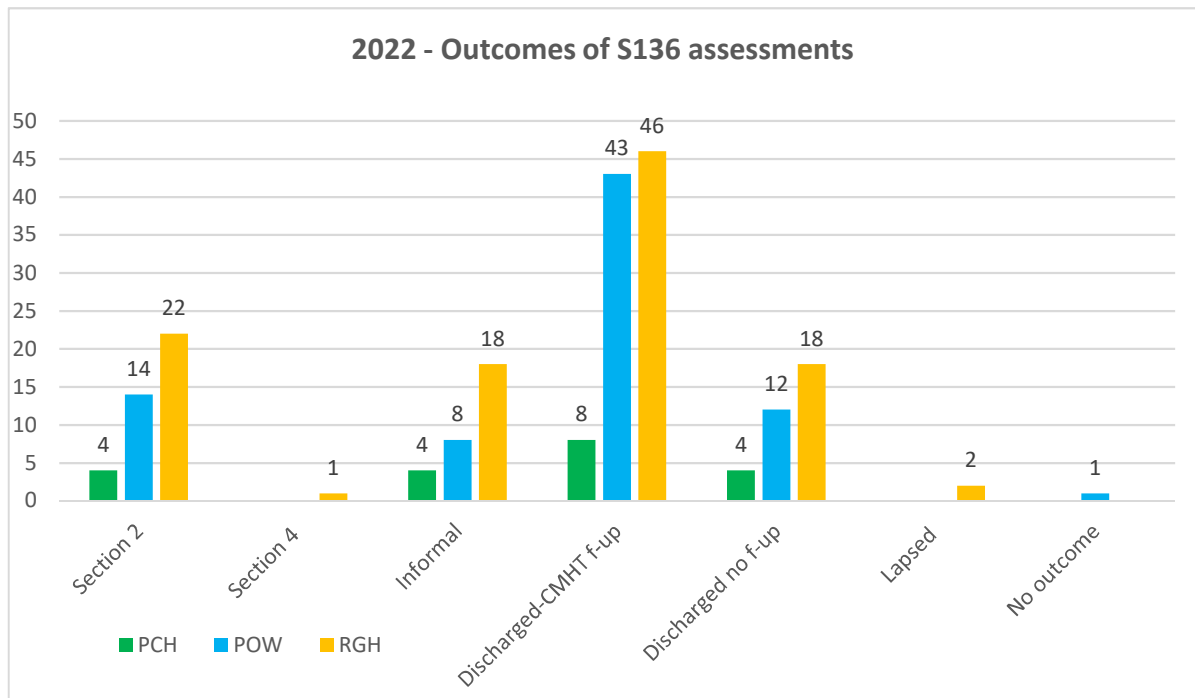
Paragraph 14.70 of the "Mental Health Act 1983: Code of Practice for Wales" states:

"Local health boards are responsible for commissioning mental health services to meet the needs of their areas. Under section 140 of the Act, local health boards have a duty to notify local authorities in their areas of arrangements which are in force for the reception of patients in cases of special urgency or the provision of appropriate accommodation or facilities specifically designed for patients under the age of 18."

The Mental Health Act manager understands from attendance at the All Wales group that no Health Board within Wales has a current Section 140 Policy. The group are helping to review arrangements and share any policy examples as they develop. Across the UK access to mental health beds can be a challenge both within the NHS and Independent Sector. Notwithstanding this examples where a proposed detention cannot be delivered because of a lack of beds is rare. Health Boards across Wales support each other in providing emergency short term access to beds where there are capacity issues in individual Health Boards.

2.9 **Use of Section 136 and the Individual Places of Safety January – December 2022**

The Operational Group reviewed the Section 136 activity through 2022 and has agreed to complete a 3 year review for consideration at its April meeting. The table below shows the reduced use of the Prince Charles Hospital Place of Safety which transfers to the Royal Glamorgan Hospital out of normal working hours. Nurse Director, Primary Care, Community and Mental Health and the Deputy Director or Nursing have recently attended a site meeting at the Emergency Department within Prince Charles Hospital to seek assurance on the progress to upgrade the current place of safety. The scheme content was reconfirmed and the Estates Department have been asked to prioritise this work. The local Crisis Team have completed a risk assessment to help manage ongoing risks in the interim period.





The Operational Group discussed reported delays in the availability of Section 12 Approved Doctors. The AMHPs reported these delays during normal working hours when medical staff were engaged in other pre-planned activities such as Outpatients. This was confirmed by the EDT Team Manager who did not report any particular problems out of normal working hours when the on call system was available to provide such medical staff. There was a shortage of specific detail and it was agreed that the monthly Police Liaison Group would be a good place to capture examples of any delays in the provision of Section 12 Doctors.

2.10 **Mental Health Review Tribunal - arrangements and venues**

The Mental Health Review Tribunal for Wales have issued new 'Guidance on the Minimum Security Requirements and Amenities for Mental Health Tribunals in Wales'. The guidance sets out minimum standards for accommodation and suggests if a patient is being treated in the community a venue other than a hospital may be more suitable. The guidance also requests the reservation of parking places for the 3 Tribunal members and the completion of a risk assessment for the Hearing Room by the Mental Health Act Administrator in advance of the Hearing. A meeting is being scheduled with the Tribunal Office to discuss the new requirements.

The Tribunal were also to offer patients 'face to face' or video conferencing Hearings for a 6 month trial period starting 01 March 2023.

2.11 **Feedback on the application of the Mental Health Act following recent Healthcare Inspectorate Wales (HIW) Inspections:-**

1) Review of Discharge Arrangements from Adult Inpatient Mental Health Units within CTMUHB

HIW have completed the above review which included on site patient case study reviews of 9 patients admitted to the Princess of Wales Hospital Mental Health Unit and 18 case reviews for patients admitted onto the Royal Glamorgan Hospital Mental Health Unit.

The Health Board is awaiting publication of the final report on 07 March 2023 which it is understood will include a number of recommendations relating to discharge planning.



2) Visit to Angelton Clinic - 14 – 16 November 2022

Following the visit the inspectors gave some informal feedback which indicated that documentation required by legislation under the Mental Health Act was in place. They did identify an example where the Consent to Treatment form was not kept with the patient's medication chart and reminded staff of a need to ensure that there was an ongoing process for the provision of patients' rights under the Act. There were some immediate concerns following the visit none related to the Mental Health Act. The Health Board is awaiting publication of the final report on 15 March 2023.

3) Visit to North Bridgend CMHT - 13 – 14 December 2022

During the informal feedback from the visiting inspectors, compliance with provisions of the Mental Health Act was found to be good. The inspectors did indicate the value of introducing an audit process to confirm the 'reading of rights to patients' subject to a Community Treatment Order (CTO). The Mental Health Act Team will develop the existing audit protocol to include this recommendation. The Operational Group has asked Advocacy Support Cymru to obtain some patient feedback on the use of CTO's. The Health Board is awaiting publication of the final report on 16 March 2023.

2.12 Independent Mental Health Advocacy – Q3 Report

52 referrals had been received in Q3 for detained patients and 93 for informal patients. 80 of the referrals were for females with the remainder being for males. There remained lower levels of activity for Bridgend and a targeted meeting was to be arranged with Advocacy Support Cymru to discuss this.

2.13 Mental Health Act Training

A training event on the role of the Nearest Relative had taken place on 13 October 2022. This would help support AMHP colleagues in avoiding errors on Mental Health Act documentation. Training was provided on people with mental health problems who commit offences on 06 December 2022. Medication Awareness training for Associate Hospital Managers has been arranged for 09 March 2023.



2.14 Operational Policy Review

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.

Schedule of Operational Policies

REF NUMBER	TITLE	LEAD PERSON	PROGRESS
MH09	Hospital Managers Operational Procedure	MHA Team Manager	Agreed 09/07/2021
MH12	Section 17 leave policy	MHA Team Lead	Agreed 09/07/2021
MH28	Hospital Managers Scheme of Delegation	MHA Team Manager	Agreed 09/07/2021
MH04	Community Treatment Policy	MHA Team Manager	Agreed 15/10/2021
MH17	Section 132&133 patient's rights procedure	MHA Team Lead	Agreed 06/05/2022
New	Allocation of Responsible Clinician	MHA Team Manager	Agreed 05/08/2022
MH06	Section 5 (4)	MHA Team Manager	Agreed 27/01/2023
MHA117	Section 117 Policy	MHA Team Lead	Working group to meet 14/02/2022. Policy to be ratified at next Operational Group meeting on 28/04/2023
MH03	Section 136	MHA Team Lead	Awaiting Police to update national policy- 23/08/2022
MH02	Section 135(1) Section 135(2)	MHA Team Lead	Awaiting Police to update national policy-23/08/2022
MH16	IMHA Procedure	MHA Team Manager	For review Lapsed 18/07/2021-AT awaiting Policy update from LD
MH29	Applying to become an Approved Clinician	MHA Team Manager	For review Lapsed 18/07/2021
MH07	Section 5 (2)	MHA Team Lead	In progress- for ratification in next Operational Group meeting on 28/04/2023
MH08	Consent to Treatment Sec 58 and Sec 58a	MHA Team Manager	In progress- for ratification in next Operational Group meeting on 28/04/23

AGREED
 FOR REVIEW
 FOR PRIORITY REVIEW

The Operational Group approved the Nurses Holding Power Section 5(4) Policy at their meeting on 27/01/23



2.15 Operational Group Work Plan

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

Operational Group Work Plan

Activity	Progress	Timescale
Service user feedback	Advocacy Support Cymru to circulate CTO Questionnaire through the MHA Team. Report back to the Operational Group.	April 2023
Audit	MHA Team to complete audit of Inpatient Statutory Documentation and report to Operational Group.	April 2023
Policy Work	All remaining policies identified as a priority for review to be ratified at the Operational Group meeting on 28/04/23.	April 2023
Monitoring of Section 12 Doctor waiting times for Section 136 Assessments	Monthly Policy Liaison meetings are to be used to collect information on waiting times for Section 12 Approved Doctors.	June 2023
Nominated Adolescent Bed on Adult MH Wards	Capital funding and policy work to be concluded in order to facilitate the transfer of this service to Ward 14 POWh.	June 2023
Monitoring of AMHP waiting times	The regional monthly AMHP meetings are to be used to monitor waiting times from the EDT service.	June 2023

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

3.1 Review of Cwm Taf Morgannwg Emergency Duty Team

Waiting times for AMHPs out of hours can be extended. The Regional AMHP Group is to monitor this waiting activity.

3.2 Waiting times for Section 12 Approved Doctors

Waiting times for Section 12 Doctors to complete a Mental Health Assessment can be extended during the day when medical staff are engaged in other scheduled duties. The monthly Policy Liaison Group will closely monitor waiting times for patients requiring a Section 136 Mental Health Act Assessment.



3.3 Review of General Hospital Place of Safety Arrangements

Concern has previously been raised about the suitability of the Prince Charles Hospital Place of Safety which is located within the Emergency Department. The temporary upgrading of a room prior to the development of a more permanent solution on the site has been prioritised within the Estates Department.

3.4 Fundamental Errors and Breaches of the Mental Health Act

A range of actions are being taken to reduce the above errors. The Operational Group also closely monitors performance in comparison with other Health Boards. The information in the Q3 All Wales Benchmarking return has shown our Health Board to compare favourably with other areas.

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
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5. RECOMMENDATION

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