

### CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 July 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Legislation Committee Annual Report 2022/23
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Judith Hardisty, Chair, Mental Health Legislation Committee
SWYDDOG ADRODD: REPORTING OFFICER:	Andrew Carruthers, Director of Operations

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

The purpose of this paper is to present the Mental Health Legislation Committee's Annual Report for 2022/23.

The Mental Health Legislation Committee provides assurances in respect of work that has been undertaken by the Sub-Group during 2022/23 and that the terms of reference are being adequately discharged.

## Cefndir / Background

Hywel Dda University Health Board's Standing Orders and the Terms of Reference for the Mental Health Legislation Committee (MHLC) require the submission of an Annual Report to summarise the work of the Committee and to identify how it has fulfilled the duties required of it.

### Member

Independent Member with responsibility for Mental Health (Board Vice-Chair) (Chair) Independent Member (Vice Chair)

2 X Independent Members

## In Attendance

Director of Operations (Lead Director)

Director of Mental Health & Learning Disabilities Services (Lead Officer)

Associate Medical Director for Mental Health Services

Head of Nursing Mental Health & Learning Disabilities

Head of Older Adult and Learning Disability Services

Head of SCAMHS and Psychological Therapies

Mental Health Act Administration Lead

Chair of Mental Health Legislation Scrutiny Group

Nominated representative from Dyfed/Powys Police

Nominated representative from Welsh Ambulance Services NHS Trust

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Nominated representative from Carmarthenshire County Council

Nominated representative from Ceredigion County Council

Nominated representative from Pembrokeshire County Council

Nominated representative from West Wales Action for Mental Health (WWAMH)

2 x Nominated Service Users: patient representative and carer representative

Nominated representative from Primary Care: GP Lead

Nominated representative from Hywel Dda Community Health Council (not counted for quoracy purposes)

Nominated representative from Advocacy Network

Whilst the Board retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its patients, service users, staff and the wider public, it has delegated authority to the Committee to undertake functions as set out within the Terms of Reference of the Committee.

In respect of its provision of advice to the Board, the Mental Health Legislation Committee is required to:

- Review reports from Healthcare Inspectorate Wales visits, the Delivery Unit and other external scrutiny bodies and approve the action plans for monitoring through its sub-committee structure;
- Review the Mental Health & Learning Disabilities Risk Register bi-annually to ensure that risks relating to compliance with mental health legislation are being appropriately managed by the Mental Health Legislation Scrutiny Group;
- Receive Mental Health Legislation Scrutiny Group updates;
- Consider issues arising from its sub-committee and group structure;
- Receive the Hywel Dda Mental Health Partnership Board Annual Report and consider issues in relation to the implementation of the Mental Health Strategy across the Hywel Dda area;
- Receive update reports from the Mental Health Programme Group on improvement programmes for high quality, safe and sustainable mental health services which are consistent with the Board's overall strategic direction.
- Receive Hospital Manager's Power of Discharge Committee Update Report & Minutes from previous meetings.

The revised Terms of Reference for MHLC (as presented to Public Board on 24<sup>th</sup> of November 2022) were received.

# CONSTITUTION

Membership of the Mental Health Legislation Committee consists of Independent Members. The Vice Chair of the University Health Board (UHB) undertakes the role of Chair of the Committee given their specific responsibility for overseeing the Board's performance in relation to Mental Health Services. Membership of the Committee consists of two Independent Members.

In attendance, membership includes UHB manager representation, a wide range of partner organisations, including local authority, police, advocacy, user representation, carer representation, Welsh Ambulance Services NHS Trust and the Community Health Council. The Committee may also request the attendance of any other officers of the UHB as required.

Mr Andrew Carruthers, Director of Operations has been Executive Director for the meeting since December 2019.

## MEETINGS

The Committee meets on a quarterly basis. During 2022/23, as a result of the unprecedented situation of the pandemic, the Committee was quorate and met on a hybrid model on 4 occasions, as follows:

- 12 June 2022
- 3 October 2022
- 12 December 2022
- 13 March 2023

# AREAS OF RESPONSIBILITY

In discharging its duties, the Committee receives information of all activity undertaken in relation to the 1983 Act and the MH Measure which includes:

- Regular reporting on the use of the Mental Health Act within the area served by the University Health Board;
- Regular reporting on the activity and compliance with the Mental Health (Wales) Measure 2010;
- Performance reporting;
- Healthcare Inspectorate Wales reviews.

## SUB-COMMITTEE

The Committee has one Sub-Committee following the UHB's governance review in 2015; the Hospital Managers Power of Discharge Sub-Committee.

The Committee agreed to the establishment of the Hospital Managers Power of Discharge Sub-Committee (the Sub-Committee), made up of all Independent Members and Lay Members. Section 23 of the 1983 Act (the power of discharge) was delegated to the Sub-Committee. Officers can attend but are not members.

A panel of three or more members drawn from the Sub-Committee hear individual cases where patients or their nearest relative have applied for discharge. The panels also sits on renewal hearings – these are collectively known as Hospital Managers reviews.

In respect of its provision of assurance to the Board, the Sub-Committee is required to:

- Review and monitor how the operation of the delegated functions under Section 23 of the 1983 Act are being exercised;
- Discuss the work of individual panels;
- Discuss the training requirements of review panel members;
- Discuss any impact of legislative change on the role of Hospital Managers;
- Highlight any impact of service changes; and
- Provide learning opportunities.

The Sub-Committee meetings are held three times each year and are divided into two parts: the first part deals with the Sub-Committee's governance and the second part have a training focus to ensure members are kept up to date with current legislation and of changes within the UHB. The Chair of the Sub-Committee is Chantel Patel (Independent Member). This provides an additional level of assurance and scrutiny. The Mental Health Act Administration Lead is an attendee.

During the year members received training on the following areas:

- IT basic skills delivered by Jack Trumper
- Associate Hospital Managers Training Richard Griffith, Lecturer, School of Health Science

# Compliance with Mental Health Legislation (Sub-Groups)

The Mental Health Legislation Committee has one Sub-Group that provides an additional layer of scrutiny to the UHB's compliance with statutory mental health legislation.

# SUB-GROUP

The Mental Health Legislation Scrutiny Group (Scrutiny Group) representation consists of Head of Services from health and local authority stakeholders. The Assistant Director of Mental Health Service chairs it and its Vice Chair will be the Mental Health Legislation Manager. It meets on a quarterly basis, four weeks prior to MHLC. Its purpose is to scrutinise the UHB's compliance with mental health legislation and to investigate any areas of concern, independently or as directed by MHLC. It reports directly to MHLC through a quarterly performance paper and may provide additional papers to MHLC on areas of concern being investigated.

The role of the Scrutiny Group is continually evolving; however, its primary benefits to date have been to:

- More clearly identify any areas of concern and present greater clarity of exception reporting to MHLC;
- Provide a clear line of communication between practicing clinicians and managers to the MHLC assurance process;
- Quickly identify any areas of concern and instigate further investigation and intervention, thereby improving the quality of care delivery.

During 2022/23, the Scrutiny Group has been asked to particularly focus on some key issues by the Committee, namely:

- Examine the use of Section 2 and 3 of the Mental Health Act for known service users and to explore timelines leading up to these detentions. To report on any findings on inappropriate use of the Act or whether less restrictive methods could have been utilised.
- Examine the use of Section 2 and 3 of the Mental Health Act for unknown service users, considering the escalation to detention and whether on these occasions the admissions under the Act where appropriate and proportionate and least restrictive. To report on any findings.
- To scrutinise the use of Section 136 for known service users and to consider whether any detentions as a result could have been avoided.

# Asesiad / Assessment

# The Mental Health (Wales) Measure 2010

The Directorate's ability to report against statutory performance targets relating to the Welsh Measure was restored in April 2021 following a successful migration from a legacy Mental Health Patient Administration System (PAS) to Welsh PAS. Following a period of data quality issues, there is confidence in the data submission, which is overseen as part of the remit of the wider Health Board Informatics Team. Reporting remains manual in parts and reliant on an individual member of staff, although there are plans for the development of automated processes. This is being progressed by Informatics.

### Inspections

The Healthcare Inspectorate Wales (HIW) Annual Report 2022/2023 sets out the findings of the work carried out by HIW during this financial year.

The HIW (and DU) & CHC (now Llais) activity / reports during 2022/23 was as follows:

- Feb 22 (Delivery Unit) All Wales Assurance Review of Crisis and Psychiatry Liaison Services for Adults
- Feb 22 (Delivery Unit) All Wales Assurance Review of Crisis and Psychiatry Liaison Services CAHMS
- May 22 (HIW) National Mental Health Crisis Care report
- July 22 (HIW) Bryngofal unannounced inspection
- Jan 23 (Community Health Council)- S-CAHMS action plan
- March 23 (HIW) Reviewing the Quality of Discharge Arrangements from Adult Inpatient Mental Health Services Within Cwm Taf UHB

Full report can be accessed via the following weblink: <u>https://www.hiw.org.uk/reports</u>

### Other Areas of Responsibility

- The Committee agreed on the following policies for approval Section 117 After-care Procedure Mental Health Act, 1983 - Extension Request - The provision and access to the IMHA service policy - agreed as a Chair's Action.
- The Committee also noted the changes in practice by the Mental Health Review Tribunal for Wales and Healthcare Inspectorate Wales Second Opinion Appointed Doctor (SOAD) Service.

### Annual Work Plan

The Committee will continue to review all work undertaken by the UHB, which lies within its remit, and provide assurance to the Board that its statutory obligations are being met.

The Committee takes an annual work plan-based approach to the management of its work and reminds members and stakeholders at every meeting that they can influence this work plan at any time. In addition to the previous work highlighted within this paper, this included:

- Regular updates from the Mental Health Programme Group on the transformation project
- Regular updates on the All-Wales Benchmarking report based upon MHA usage data
- Service user representations.

### Argymhelliad / Recommendation

The Board is requested to endorse the Mental Health Legislation Committee Annual Report 2022/23.

#### Amcanion: (rhaid cwblhau) Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Not applicable Cyfredol:

Dativ Dick Degister Deference and	
Datix Risk Register Reference and Score:	
Parthau Ansawdd:	Not Applicable
Domains of Quality	Not Applicable
Quality and Engagement Act	
(sharepoint.com)	
Galluogwyr Ansawdd:	6. All Apply
Enablers of Quality:	····
Quality and Engagement Act	
(sharepoint.com)	
Amcanion Strategol y BIP:	All Strategic Objectives are applicable
UHB Strategic Objectives:	
Amcanion Cynllunio	Not Applicable
Planning Objectives	Not Applicable
Amcanion Llesiant BIP:	9. All HDdUHB Well-being Objectives apply
UHB Well-being Objectives:	4. Improve Population Health through prevention and
Hyperlink to HDdUHB Well-being	early intervention, supporting people to live happy and
Objectives Annual Report 2021-2022	healthy lives

Gwybodaeth Ychwanegol: Further Information:		
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Mental Health Legislation Committee meetings 2022-2023	
Rhestr Termau: Glossary of Terms:	Included within body of the report	
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd lechyd Prifysgol:	Director of MH&LD Vice Chair of UHB/Chair of Mental Health Legislation Committee	
Parties / Committees consulted prior to University Health Board:		

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian:	A sound system of internal control, as evidenced in the
Financial / Service:	Committee's Annual Report, will assist with ensuring
	financial control, and the safeguard of public funds.
Ansawdd / Gofal Claf:	SBAR template in use for all relevant papers and reports
Quality / Patient Care:	
Gweithlu:	SBAR template in use for all relevant papers and reports
Workforce:	
Risg:	SBAR template in use for all relevant papers and reports
Risk:	

Cyfreithiol: Legal:	A sound system of internal control, as evidenced in the Committee's Annual Report, ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed. Compliance with the Health Board's Standing Orders, and the Committee's Terms of Reference, requires the submission of an Annual Report to the Board.
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	SBAR template in use for all relevant papers and reports.