

PWYLLGOR IECHYD A DIOGELWCH HEALTH & SAFETY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	11 September 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Review of 136 Suites within Mental Health and Learning Disability (MHL) Directorate
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Rebecca Temple-Purcell, Assistant Director of Nursing MHL

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report is presented to the Health and Safety Committee (HSC) to provide findings from the review undertaken at the Health Board's 136 suite facilities located across the Mental Health and Learning Disability (MHL) Directorate.

Cefndir / Background

A '136 suite' is a place of safety for those who have been detained under Section 136 of the Mental Health Act by the police following concerns that they are suffering from a mental disorder. Once in the suite, the individual is assessed to establish whether they need treatment.

The Health Board currently has two 136 Suites located in Bryngofal Ward, Prince Phillip Hospital and the Child and Adolescent Mental Health Services (CAMHS) suite located at Morlais Ward, Glangwili Hospital.

The review also encompassed alternative/community 'places of safety' situated at St. Caradogs Ward, Haverfordwest, Gorwellion, Aberystwyth and Cwm Seren, Carmarthen.

The review has been undertaken jointly by the MHL Directorate and the Health, Safety and Security Team and has encompassed site visits, triangulated with information in relation to 136 activity and related incidents reported over the last 2 years. The following National guidance and best practice standards have been consulted as part of the review:

- Health Building Note 03-01: Adult acute mental health units
- Guidance for Commissioners: service provision for section 136 of the Mental Health Act 1983, Royal College of Psychiatrists

The purpose of the review was to check environmental conditions and operational arrangements of the service and facilities. This included the risks and impacts associated with staff and patient safety.

Asesiad / Assessment

Findings from the review highlight that many of the 136 facilities require environmental improvements including removal of ligature risks due to the design, building structures. The current risk associated with 'points of ligature' is substantially mitigated by staff presence and supervision. Point of ligature risks are identified and monitored through the Health Board's point of ligature review processes. Capital works to address this are within current schemes of estates work overseen by the directorate Accommodation Strategy Group.

Two of the 136 sites visited, Morlais Ward, GGH and Gorwellion, Aberystwyth, have been identified as unsuitable due to environmental safety concerns that cannot be fully mitigated.

At Morlais, the physical location of the 136 facility on the ward and space used, precipitates safety as well as privacy and dignity issues. A plan to relocate the facility to an alternative space on Morlais Ward is being addressed by the Estates Directorate. Dates for completion of the work will be set later in September.

The physical location, environment and staffing model of the community-based place of safety at Gorwellion precipitates safety and business continuity issues. The facility does not currently meet standards defined through professional guidance, has limited back up support and negatively impacts crisis services across the county when in use. Whilst infrequently used, the review recommends standing down Gorwellion as a place of safety and discussions with partner agencies will be taken forwards by the directorate to review alternatives and progress a plan.

Current 136 protocols require strengthening to ensure that intelligence and risk information is fully and consistently exchanged between agencies at the point of arrival and must include a robust searching procedure. This is to promote effective and safe risk management and the prevention of any harmful or prohibited items being brought into the units. This work will be taken forwards through existing forums to be jointly developed with relevant agencies.

The 136 pathway is currently staffed by Inpatient and Crisis Home Treatment staff and does not have a dedicated funded establishment which impacts on use of temporary workforce and service delivery. A review of 136 staffing needs is in progress and will be completed by the end of September 2023. It will then be incorporated in current establishment review work across the directorate to address this.

The review has noted potential benefits in forming a centralised place of safety where environment, staffing and back up support, can be more consistently provided and the interface with partner agencies consistently applied. Further scoping will be undertaken by the directorate to consider and review longer term options for this.

Argymhelliad / Recommendation

For the Health and Safety Committee to:

- Take assurance that work has progressed, and improvements are being made in relation to the health and safety themes as detailed within the report.

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

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers contractors etc.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	3. Data to knowledge
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	2. Safe Care
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Working together to be the best we can be All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	4c Mental Health Recovery Plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Contained within the body of the report.
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Committee:	Health and Safety Advisory Group Partnership Forum meetings

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable.
Ansawdd / Gofal Claf: Quality / Patient Care:	There is a positive impact on staff and patient safety, health and wellbeing through compliance with health and safety regulations.
Gweithlu: Workforce:	Potential for adverse future staffing impacts if this legislation is not complied with as it relates to employee safety.
Risg: Risk:	Risk to health and safety management.
Cyfreithiol: Legal:	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
Enw Da: Reputational:	Potential for enforcement action including Improvement Notices/Prosecutions and claims due to breaches in legislation.
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	No evidence gathered to indicate a negative impact on any protected group/s.