



## PWYLLGOR MONITRO'R DDEDDF IECHYD MEDDWL MENTAL HEALTH LEGISLATION COMMITTEE

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	February 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Mental Health Legislation Scrutiny Group Update
<b>ARWEINYDD CYFARWYDDWR: EXECUTIVE LEAD:</b>	Andrew Carruthers
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Kay Isaacs, Head of Adult Mental Health

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Gwybodaeth/For Information

### ADRODDIAD SCAA

#### SBAR REPORT

##### Sefyllfa / Situation

The Mental Health Legislation Scrutiny Group was established as a Sub-Group of the Mental Health Legislation Assurance Committee (MHLAC) on the 14th of July 2014.

The purpose of this paper is to present to the Mental Health Legislation Committee an update from the Mental Health Legislation Scrutiny Group meeting held on Tuesday 1<sup>st</sup> of February 2022 and any subsequent work that the group have agreed to undertake.

##### Cefndir / Background

The following papers are submitted as regular items on the MHLSG agenda in line with the principal duty of the scrutiny group as described within the Terms of Reference.

- Mental Health Act
- SCAMHS Update Report on admissions to the designated bed on Morlais Ward
- Mental Health (Wales) Measure performance report
- Care and Treatment Audit Report
- Local Authority Data and narrative
- Any other relevant report or memorandum of understanding

Papers are sent out to members of the MHLSG at least seven days in advance of the meeting and members are expected to read and submit agenda items should further scrutiny of the papers be required.

There were no required actions for Scrutiny Group (SG) from the December Committee Meeting

##### Mental Health Act Report

The Mental Health Act report presented to SG once again referenced several detentions where no consultation occurred prior to use of S136, an action was agreed for Dyfed Powys Police's Mental

Health Liaison Officer to identify all circumstances when consultation is not undertaken to establish if it had not been practicable to consult prior to use of the act to ensure further examination and follow up happens when consultation should have been undertaken which will include speaking to the officer concerned.

The second area noted was an increase in use of the nurse holding power S5(4) This data was examined to obtain assurance this was not due to an absence of medical staff. On closer inspection it was determined that use of S5(4) occurred on different wards and there was no correlation with use and current medical recruitment challenges.

There were 49 rectifiable errors on section papers and four invalid detentions which resulted in three re-assessments. All staff involved were notified as well as respective Local Authority colleagues.

### **Mental Health (Wales) Measure performance report**

At close of Quarter Three, all services met Measure Government targets apart from CAMHS who have provided an exemption report below in respect to Part One of the Measure.

#### **Performance**

- Continued pressures within CAMHS services and elevated levels of acuity have impacted on the ability to meet this target.
- Demand and acuity remain significantly high in Primary Care
- Vacant post retention posed a challenge (60 % vacancy due to promotion and internal movement)
- Estates remains a challenge

#### **Actions to mitigate**

- Robust recruitment into vacant posts
- Service exploring use of agency staff to address performance targets
- Three psychology assistants are now in post to assist with the assessments.
- Risk stratification on all referrals undertaken
- Digital resources including Attend Anywhere being used to offer appointments
- Use of Digital online counselling support KOOTH offered to all referrals who do not meet threshold criteria

Part Three data was met by adult with no Part 3 activity in CAMHS, Older Adult or Learning Disability services. Part Three performance requires a period of ten days to be met for an individual to receive an outcome letter post self-referral and assessment from mental health services.

Part 4 of the Measure does not require performance reporting to Welsh Government. Part Four is the extension to the Mental Health Act in Wales to ensure all individuals admitted to hospital have access to an Independent Mental Health Advocate.

To achieve parity of reporting regarding the Measure and the Mental Health Act the Interim Assistant Head of service for adult mental health will provide a report detailing performance data to Committee as well as additional information in respect of Part 3 & 4.

### **Care and Treatment Audit Report**

The senior nurse from the Quality Assurance & Professional Development (QAPD) team explained the reason for the absence of an audit report for the February meeting by outlining a new process.

The CTP (Care and Treatment Plan) audit has been reviewed and amended. Team managers will now undertake a bespoke shortened audit which will be monitored in supervision between the manager and clinician. Data from the audit will be uploaded to the Quality Assurance Performance & Practice Development Department (QAPD) Digital SharePoint and QAPD will audit a sample of patients holding 'Relevant patient' status across the directorate utilising a comprehensive audit tool. This style of CTP audit will be reviewed after six months to provide an opportunity to reflect and adapt as required to ensure it is fit for purpose

### **Local Authority Reports**

Summary of salient points from written reports were provided by the respective county representatives.

#### **Ceredigion:**

Increase use of alternative place of safety positively noted as this avoided transfer of individuals to Llanelli's centralised place of safety.

#### **Carmarthenshire:**

Reduction in MHAs for this quarter compared with 2021

#### **Pembrokeshire:**

No representative available for meeting, it was noted that report did not include October data for Q3 which will be rectified otherwise no comment or questions from the group in respect of the written report.

### **Documents provided to Scrutiny Group for Review or Information**

No documents provided for February meeting

### **Pertinent discussion and actions agreed in MHLSG**

- Investigate a concern from the Mental Health Act Administration Team in respect of in-patient admission information to be assured correct data is provided, immediate action undertaken by Chair.
- Provide an update to SG of the pending review of Mental Health In-Patient Locked Door policy and specifically how the policy will address the need for increased intervals of an open door.
- Formally escalate concerns from SG regarding the proposal that Mental Health Review Tribunals will continue to be heard remotely for the foreseeable future. This follows a pilot that was due to end in January 2022. The body responsible for MHRTs has been contacted to request an update on a decision post pilot.
- Invite Chair of newly formed Workforce Group to MHLSG to discuss group's term of reference kindly provided to MHLSG, to understand the group's role in respect of staffing deficits and any unmet need in service provision

## **Argymhelliad / Recommendation**

To receive the Mental Health Legislation Scrutiny Group Update and accept proposal for new arrangement for reporting Mental Health (Wales) Measure data.

<b>Amcanion: (rhaid cwblhau) Objectives: (must be completed)</b>	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	10.4.1 Report formally, regularly and on a timely basis to the Board on the Scrutiny Groups activity. This includes the submission of a Committee update report, as well as the presentation of an annual report within six weeks of the end of the financial year.
Cyfeirnod Cofrestr Risg Risk Register Reference:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDD UHB Well-being Statement</a>	Improve population health through prevention and early intervention Support people to live active, happy, and healthy lives Improve efficiency and quality of services through collaboration with people, communities, and partners
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio:  The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	
	Long term - the importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs
	Prevention – the importance of preventing problems occurring or getting worse
	Integration - the need to identify how the Health Board's well-being objectives may impact upon each of the well-being goals, on its other objectives, or on the objectives of other public bodies
	Collaboration – acting in collaboration with anyone else (or different parts of the organisation itself) which could help the Health Board to meet its well-being objectives
	Involvement - the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the Health Board serves

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Mental Health Legislation Scrutiny Group.
Rhestr Termau: Glossary of Terms:	MHLSG – Mental Health Legislation Scrutiny Group MHLOG – Mental health Legislation Operational Group CWCDG – Clinical Written Control Document Group MH/LD – Mental Health / Learning Disabilities WCDG – Written Control Document Group WMF – Ward Managers Forum CRHT – Crisis Resolution Home Treatment QAPD – Quality Assurance Practice Development AMH – Adult Mental Health IMHA – Independent Mental Health Advocate SSWA – Social Services and Wellbeing Act MHA – Mental Health Act MHM – Mental Health Measure DOL – Deprivation of Liberty HIW – Healthcare Inspectorate Wales CIW – Care Inspectorate Wales CHC – Community Health Council CTP – care and Treatment Plan CMHT – Community Mental Team CTLD – Community team Learning Disability OAMH – Older Adult Mental Health
Parties / Committees consulted prior to the Mental Health Legislation Assurance Committee:	MHLSG Mental Health Act Legislation Manager

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Non-compliance with Mental Health Legislation could result in legal proceedings being brought against the University Health Board.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	SBAR template in use for all relevant papers and reports.
<b>Gweithlu: Workforce:</b>	SBAR template in use for all relevant papers and reports.
<b>Risg/Cyfreithiol: Risk/ Legal:</b>	Risk of non-compliance with the 1983 Act and with the Welsh Government's <i>Mental Health Act 1983 Code of Practice for Wales</i> ; the <i>Mental Health (Wales) Measure 2010 Code of Practice</i> ; and with the <i>Good Governance Practice Guide – Effective Board Committees (Supplementary Guidance) Guidance</i> .  Safety of patients  Assurance – use of statutory mechanisms

<b>Enw Da: Reputational:</b>	Not Applicable
<b>Gyfrinachedd: Privacy:</b>	Not Applicable
<b>Cydraddoldeb: Equality:</b>	Not Applicable