



MENTAL HEALTH SCRUTINY GROUP

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 th February 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Scrutiny Group October 2024 – January 2025
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mr Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Ms Amanda Davies, Head of Adult Mental Health Community

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

For information

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

The purpose of this paper is to present to the Mental Health Scrutiny Group the Mental Health Performance Report in relation to:

- The Mental Health (Wales) Measure 2010.

The paper also includes assurance of other work carried out by the Mental Health and Learning Disabilities Directorate where related to mental health.

Cefndir / Background

The purpose of this Group is to allow senior managers and clinicians from Hywel Dda University Health Board, its partner agencies, and other stakeholders to scrutinise the University Health Board's (UHB) performance, to highlight areas of good practice, and any areas of concern that must be brought to the attention of the group. This paper summarises performance, and any actions that have been implemented, to ensure improvements in the identified areas.

The Mental Health (Wales) Measure 2010

The Mental Health (Wales) Measure 2010 is being reported to the Group on a quarterly basis in order to provide assurance that activity is closely monitored, and that practice is compliant with the requirements of The Code of Practice. This is primary legislation that was passed by the Welsh Government in 2010 and became operational during 2012. The intention of the legislation is to ensure that people are able to access appropriate mental health support services, receive care that is co-ordinated by a named person, enables direct access back to services following discharge and that the entitlement to independent mental health advocacy is increased.

To achieve this the Measure is divided into four Parts:

Part 1 - The expansion of mental health services within primary care settings

Part 2 - The introduction of the statutory Care and Treatment Planning for individuals receiving secondary mental health services

Part 3 - Enabling former users of secondary mental health services who have been discharged to refer themselves back for assessment without having to first go to their GP
Part 4 - Expanding the Independent Mental Health Advocacy (IMHA) to informal patients.

Part 1 – Local Primary Mental Health Support Services

Commencement of groups across the three counties will support Part 1 (b) and offer more choice for the population, however access to adequate accommodation to deliver groups can be challenging.

PART 1	Detail		Oct	Nov	Dec
Target a	80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral	Adult	98.1%	98.0%	98.4%
		CAMHS	95.2%	87.0%	90.3%
Target b	80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS	Adult	98.1%	97.2%	97.5%
		CAMHS	84.1%	98.0%	98.3%

Part 1 -All areas under Part One compliant

Part 2 – Care and Treatment Planning

PART 2	Detail		Oct	Nov	Dec
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	Adult	97.0%	94.9%	93.7%
		OAMHS	95.5%	97.3%	97.1%
		LD	90.4%	94.7%	94.6%
		CAMHS	90.6%	93.6%	92.7%

S-CAMHS

CAMHS maintains over 90% compliance. Sickness rates in October meant the compliance margin was narrower, but slightly improved into November and December. CAMHS will continue to monitor compliance.

Older Adult Mental Health Services OAMH

Compliant

Learning Disabilities

Compliant

Adult Mental Health

Adult Mental Health maintains over 90% compliance. This will be continuing to be monitored to maintain compliance. Discussed that all areas compliant but informed that Adult Mental Health compliance may be impacted in the future by Ceredigion CMHT. The team is currently not compliant (currently 57% compliant), due to decreased medical and nursing cover. Currently the overall compliance is being maintained due to the other CMHT areas being over the 90% compliance. Also issues raised for the North Pembrokeshire CMHT, when the local authority are unable to undertake the care coordination role for a large amount of patients, due to vacancies and sickness, which may impact future compliance. Pembrokeshire Local authority have this on their risk register and are continuing to find attempt to resolve this.

New to secondary Mental Health services under CTP	Oct	Nov	Dec
Adult	15	11	14
Older	22	13	9
CAMHS	5	9	4
LD	3	4	3

Discharged from secondary Mental Health services	Oct	Nov	Dec
Adult	30	28	26
Older	11	21	31
CAMHS	9	16	8
LD	1	4	5

Part 3 – Referrals from the 111 option 2 (SPOC) Service

	Oct	Nov	Dec
--	------------	------------	------------

Over All Monthly Total Calls Answered	1349	1534	974
Over all Referred to CMHT Sub to Measure	9	10	3
Over All Monthly Total Calls referred to CMHT	52	67	31
Over All Monthly Total Calls advised to self-refer to CMHT	0	0	0

Reduction in calls over December period noted ,no identified rational for this .

Part 3 – Self Referral to Secondary Care for Former Service Users

Adult Mental Health

Older Adult Mental Health Services OAMH

PART 3	Detail		Oct	Nov	Dec
Measure 1	Individuals are re-assessed in a timely manner; and a copy of a report to that individual is provided no later than 10 working days. (Total number of requests for re-assessment received) Target 100%	Adult	91.7%	83.3%	100%
		OAMHS	100%	100%	100%

Adult Mental health will be continuing to monitor the outcomes of part 3 assessments to improve compliance .This is now being closely monitored via the Business Manager and the Team Leaders.

	Oct	Nov	Dec
Average wait times in days for adult mental health	34	28	27

Detail	Oct	Nov	Dec
Amount of People who have self-referred under Part 3 of the Mental Health Measure (in Adult Mental Health).	15	9	11
Amount of People who could have self-referred under Part 3 of the Mental Health Measure but were referred by a GP (in Adult Mental Health).	2	3	5

Part 4 – Independent Mental Health Advocacy

Adult inpatient wards

Currently 100% compliant

Older Adult inpatient

Currently 100% compliant

Detail		Oct	Nov	Dec
100% of hospitals to have arrangements in place to ensure advocacy is available to all qualifying patients – Percentage of qualifying compulsory / voluntary patients have been offered advocacy services in the mental health services (Target 100%)	Adult	100%	100%	100%
	OAMHS	100%	100%	100%

Further breakdown from the IMHA Report is:

Age and Gender:	Oct	Nov	Dec
Under 18	6	9	6
18-29	20	18	19
30-49	31	39	37
50-64	26	26	19
65+	37	37	39
80+:	22	26	22
Total	142	155	142

Mental Health Ward	OCT	NOV	DEC
Bryngofal - Carms	36	34	32
Bryngolau - Carms	7	12	11
LSU - Carms	9	9	10
PICU - Carms	15	18	12
Morlais - Carms	11	15	15
Ty Bryn - Carms	0	0	0
Rainbow Suite/CAMHS - Carms	0	0	0
Bro Myrddin - Carms	0	0	0
St Caradog - Pembs	12	10	12
St Non - Pembs	17	18	20
Enlli - Ceredigion	11	10	9
Total Carmarthenshire	78	88	80

Total Pembrokeshire	29	28	32
Total Ceredigion	11	10	9
Total MH Units	118	126	121
General Hospital	OCT	NOV	DEC
Prince Phillip - Carms	2	1	2
Glangwili - Carms	1	4	1
Llandovery - Carms	0	0	0
Amman Valley - Carms	0	2	0
Withybush - Pembs	7	6	6
South Pembs - Pembs	0	0	0
Tenby Cottage - Pembs	0	0	0
Bronglais - Ceredigion	8	10	6
Tregaron - Ceredigion	1	0	0
Total Carmarthenshire	3	7	3
Total Pembrokeshire	7	6	6
Total Ceredigion	9	10	6
Total General Hospital	19	23	15
Community:	OCT	NOV	DEC
Carmarthenshire	3	3	3
Pembrokeshire	1	3	3
Ceredigion	1	0	0
Community Total:	5	6	6

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s): Hyperlink to NHS Wales Health & Care Standards	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives: Hyperlink to HDdUHB Strategic Objectives	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	<ol style="list-style-type: none"> 1. Improve population health through prevention and early intervention 2. Support people to live active, happy and healthy lives

	3. Improve efficiency and quality of services through collaboration with people, communities and partners
--	---

MHSG

Gwybodaeth Ychwanegol: Further Information:	
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio:	Please explain how each of the '5 Ways of Working' will be demonstrated
The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	Long term – can you evidence that the long term needs of the population and organisation have been considered in this work?
Hyperlink to Well-being and Future Generations Act 2015 - The Essentials Guide	Prevention – can you evidence that this work will prevent issues or challenges within, for example, service delivery, finance, workforce, and/or population health?
	Integration – can you evidence that this work supports the objectives and goals of either internal or external partners?
	Collaboration – The Mental Health Legislation Committee comprises external agencies, carer representatives and local authorities
	Involvement – can you evidence involvement of people with an interest in the service change/development and that this reflects the diversity of our population?

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Mental Health Legislation Committee and scrutiny group
Rhestr Termiau: Glossary of Terms:	Included within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	The Mental Health Legislation Scrutiny Group

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not Applicable

Ansawdd / Gofal Claf: Quality / Patient Care:	SBAR template in use for all relevant papers and reports.
Gweithlu: Workforce:	Not Applicable
Risg: Risk:	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
Cyfreithiol: Legal:	
Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable