

PWYLLGOR MONITRO'R DEDDF IECHYD MEDDWL MENTAL HEALTH LEGISLATION ASSURANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	November 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Legislation Scrutiny Group Update
ARWEINYDD CYFARWYDDWR: EXECUTIVE LEAD:	Andrew Carruthers
SWYDDOG ADRODD: REPORTING OFFICER:	Kay Isaacs, Chair of Mental Health Legislation Assurance Scrutiny Group

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 is a Sub-Group of the Mental Health Legislation Assurance Committee (MHLAC).

The purpose of this paper is to present the Mental Health Legislation Assurance Committee an update from the Mental Health Legislation Scrutiny Group meeting held on Monday 14th of November 2022.

Cefndir / Background

The following papers are submitted as standing items on the MHLSG agenda in line with the principal duty of the scrutiny group as described within the Terms of Reference alongside any relevant reports or memorandum of understanding

- Mental Health Act Use which includes a SCAMHS update report on admissions to the designated bed on Morlais Ward
- Mental Health Measure performance report
- Three County Local Authority Data
- Quality Assurance and Practice Development Team Paper

Papers are sent out to members of the MHLSG at least seven days in advance of the meeting and members are expected to read all papers to allow for scrutiny and discussion in respect of information provided.

As agreed, the November gathering was a combined Teams and attendance in person meeting the first since the pandemic and this was held in Ty Gwili, Carmarthen.

The first agenda item was dedicated to completing an Ombudsman action in respect of a complaint upheld by the Ombudsman office in respect to a delay in undertaking a Mental Health Act Assessment (MHAA) due to the Approved Mental Health Professional (AMHP) being unable to access a S12 doctor. The action required an escalation process to be agreed and implemented in order to support AMHPs in their role. The group discussed this action in detail and the chair agreed an action to circulate a draft flowchart to ensure due process is in place when a S12 doctor is not available. Once completed this will be provided as evidence to the Ombudsman Case Manager and Scrutiny Group will ensure the guidance is embedded in practice going forward. Another contributory factor was the accuracy of S12 doctor contact details, an action was allocated to the Mental Health Legislation Manager to update the document and re-circulate. It was also agreed that quarterly reports received from Local Authority will detail information relating to this issue so that it can be monitored and addressed.

Other Matters

The group acknowledged that the Terms of Reference and membership requires review in the new year as it is overdue, there was a suggestion that monitoring of our legislation duties to individuals placed out of area should be considered. The Delivery Unit is in the process of producing a report in relation to patients in commissioned hospital placements and the Head of Learning Disability Service agreed to update the next meeting with regard to this.

Mental Health Act Report

The report was presented by the mental health act administration lead and prior to the meeting, the Mental Health Act data report and the draft committee reports were circulated to members for information in preparation for discussion at Scrutiny. The following areas of concern are highlighted;

- An increase in Section 4 applications using external S12 doctors in Pembrokeshire with an action for the Interim Head of Service for Adult Mental Health and Chair to arrange training for medical staff to reduce use of external doctors undertaking MHAAs.
- The need to re-circulate monitoring forms to three local authorities to ensure the mental health act administration office has required data submitted by Local Authorities.
- A concern was highlighted in respect of S132 which refers to patients detained being provided with 'their rights' both orally and in writing, an action was agreed for this to be placed on the agenda at the ward and community manager forums to ensure this is undertaken for every detained patient.

Of note, there is an increase in respect of police consultation prior to a S136 detention and Mental Health Review Tribunals are now being undertaken via Microsoft Teams and not telephone but with no plan to return to person centred meetings until April 2023.

Measure Report

The Measure report was presented by the Interim Head of Service and circulated to Scrutiny members ahead of the meeting.

Scrutiny undertaken at the meeting included, Part One under performance in CAMHS and a missed trajectory for September 2022 performance, the Senior Nurse from CAMHS provided a response

and assurance for the meeting and there will be a follow up meeting with the senior nurse and the author of the Measure report in order to obtain more detail.

Part Two performance was attained with the exception of one team in Adult Mental Health which has resulted in training for the team concerned. The issue with regard to Part 2 performance for Learning Disability community services is attributed to Pembrokeshire and Local Authority not adhering to the performance indicators required. This is being addressed by Head of Service but may require escalation from MHSG to Committee.

Part 3 scrutiny demonstrates some individuals referred to community services by their GP despite being eligible for self-referral. This area of scrutiny will be further examined through Measure reporting going forward. Head of Service for Older Adult explained that predominately theirs is a client group with advanced dementia who are not in a position to self-refer.

The Advocacy Service for West Wales representative provided additional figures for the report in respect of Part 4 including some case studies for members' information.

Quality Assurance and Practice Development Report

Prior to the meeting, a report was distributed which members could review:

The Care and Treatment Plan quality audit requires further consideration as incorporating this in supervision in a monthly audit cycle is not effective learning, this will be undertaken by QAPD in conjunction with heads of service.

The report outlined training provided by the QAPD team as well as the QAPD resource section on the Health Board's SharePoint which details MH&LD structures and training provided by the team. Of particular note to the group was the bespoke Carers Reflection Training which is available on a quarterly basis in conjunction with West Wales Action for Mental Health and also the role of the team to ensure all in-patient and community services as a minimum, are accredited as bronze on the Wales Investment in Carers Programme

Local Authority data collection

Ceredigion:

No data of significance, increased use of place of safety in Gorwelion which is positive.

Pembrokeshire:

Increased use of S4 highlighted which is already referenced in this report.

Carmarthenshire:

Group welcomed information provided that a mental health nurse is undertaking AMHP training at Swansea University.

<p>Policy</p> <p>S117 now ratified.</p>
<p><u>Argymhelliad / Recommendation</u></p> <p>To receive the Mental Health Legislation Scrutiny Group Update</p>

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
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: Hyperlink to HDD UHB Well-being Statement	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:	Long term - the importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs
The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	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

Gwybodaeth Ychwanegol: Further Information:	
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

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Non-compliance with Mental Health Legislation could result in legal proceedings being brought against the University Health Board.
Ansawdd / Gofal Claf: Quality / Patient Care:	SBAR template in use for all relevant papers and reports.
Gweithlu: Workforce:	SBAR template in use for all relevant papers and reports.

<p>Risg/Cyfreithiol: Risk/ Legal:</p>	<p>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>.</p> <p>Safety of patients</p> <p>Assurance – use of statutory mechanisms</p>
<p>Enw Da: Reputational:</p>	<p>Not Applicable</p>
<p>Gyfrinachedd: Privacy:</p>	<p>Not Applicable</p>
<p>Cydraddoldeb: Equality:</p>	<p>Not Applicable</p>