



**PWYLLGOR DEDDFWRIAETH IECHYD MEDDWL
MENTAL HEALTH LEGISLATION COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	08 February 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Legislation Scrutiny Group Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Amanda Davies, Chair for the February 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 Committee (MHLC).

The purpose of this paper is to present the Mental Health Legislation Committee an update from the Mental Health Legislation Scrutiny Group meeting held on the 8th February 2024.

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 other relevant reports.

- Mental Health Act Use which includes a Specialist Child & Adolescent Mental Health Service (SCAMHS) report on admissions to the designated bed on Morlais Ward
- Mental Health Measure performance report
- Three County Local Authority Mental Health Act Data reports
- Quality Assurance and Practice Development 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.

Meeting on the 8th of February 2024

The meeting was well represented by all three local authorities, advocacy and the police. The meeting was chaired by the Head of Service for Adult Community Services in the absence of the Chair and Deputy Chair.

Section 136 Place of Safety Review

Following the S136 Place of Safety review, which was undertaken following a directive by the Health and Safety Committee, a task and finish group has been convened which comprises of Health Board staff, Local Authority, Dyfed Powys Police and West Wales Action on Mental Health (WWAMH) who are undertaking an Option Appraisal in order to agree the location of the

S136 Place of Safety provision for the Health Board. Llais, the independent statutory body, set up by the Welsh Government have been notified and advise that an eight-week period of consultation is required ahead of the agreed options being presented to Board.

Risk Register

There is one service risk on the register in relation to Gorwelion Community Place of safety, which is temporary closed due to safety concerns, this risk will be managed as part of the option appraisal process.

Other potential legislative risks were discussed with actions allocated as they remain below the risk register threshold.

Quality Assurance Practice Development Team Paper

This paper provided a report of the Care and Treatment Plan (CTP) Audit for Part 2 of the Mental Health (Wales) measure.

The audit captures data both legislative and qualitative that is required for care and treatment planning. The audit aims to give assurances that individuals who hold the status of Relevant Patient (RP), have a current assessment of their needs and strengths as well as a CTP created or updated within a twelve-month period which meets the required qualitative standards. This audit is currently under review and an update will be provided at the next meeting.

Mental Health Act Report

Mental Health Act data in the form of a report was circulated by the Mental Health Act Administration lead prior to Scrutiny Group. This data was scrutinised and debated and the Mental Health Act report on the agenda for Committee outlines more detail alongside any agreed actions.

Measure Report

Mental Health Measure data was circulated prior to the meeting. The data was scrutinised and debated at SG and the Measure report on the Committee agenda outlines this detail alongside any actions required.

Local Authority Reports

There was no exceptional reporting in the Pembrokeshire Local Authority paper, the Carmarthenshire paper questioned how we can be assured that we adhere to least restrictive practice as referenced in the Code of Practice and for Ceredigion, the number of S136 detentions that were undertaken in the Emergency Department (ED) was noted following the temporary closure of the Community Place of Safety at Gorwelion.

Scrutiny Group Actions

- To explore recording data where a Mental Health Act Assessment (MHAA) has been avoided by Local Authorities.
- To examine Emergency Department (ED) data in respect to S136 detentions to ascertain if there was a medical requirement to attend ED.

Argymhelliad / Recommendation

The Committee is asked to receive the Mental Health Legislation Scrutiny Group Update.

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 Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Mental Health Legislation Scrutiny Group.
Rhestr Termiau: 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

	<p>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</p>
<p>Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Deddfwriaeth Iechyd Meddwl: Parties / Committees consulted prior to Mental Health Legislation Committee:</p>	<p>MHLSG Mental Health Act Legislation Manager</p>

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.
Risg: Risk:	<p>Risk of non-compliance with the 1983 Act and with the Welsh Government's Mental Health Act 1983 Code of Practice for Wales; the Mental Health (Wales) Measure 2010 Code of Practice; and with the Good Governance Practice Guide – Effective Board Committees (Supplementary Guidance) Guidance.</p> <p>Safety of patients</p> <p>Assurance – use of statutory mechanisms</p>

Cyfreithiol: Legal:	Not Applicable.
Enw Da: Reputational:	Not Applicable.
Gyfrinachedd: Privacy:	Not Applicable.
Cydraddoldeb: Equality:	Not Applicable.

MENTAL HEALTH LEGISLATION COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	26 th March 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health (Wales) Measure 2010 Report October 2023 – December 2023
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mr Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Ms Amanda Davies, Head of Adult Mental Health

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 from October 2023 to December 2023 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

In November 2023 Part 1a Assessments undertaken within 28 days of referral was sitting at 92%, this has slightly dipped since October, however, is well above the 80% target. To note referrals have increased in (July 401 /Aug 351/Sept 319/Oct 413/Nov 418).

In November 2023 Part 1b Interventions undertaken within 28 days of Assessment was sitting at 98.2, which was an improvement since Octobers 87.8%. Again, this is well above the 80% target.

PART 1	Detail		Oct 23	Nov 23	Dec 23
Target 1	80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral	Adult	97.1%	92.7%	97.9%
Target 1	80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral	CAMHS	93.8%	86.9%	86.6%
Target 2	80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS	Adult	96.5%	98.3%	98.8%
Target 2	80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS	CAMHS	65.5%	81.3%	80.0%

Part 1 Targets-exception information and recovery plan for CAMHS

Dip in performance for Part 1(1) reflects increased referrals into Autumn school term time. Significant improvement for Part 1(2) reflects increase in initial intervention appointment capacity in line with recovery plan.

Part 2 – Care and Treatment Planning

PART 2	Detail		Oct 23	Nov 23	Dec 23
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	Adult	93.6%	93.4%	95.6%
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	OAMHS	95.4%	96.6%	96.2%
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	LD	91.8%	93.9%	86.8%
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	CAMHS	93.2%	92.7%	92.9%

Noted in the meeting the improved position across the teams regarding Part 2, which was a positive improvement.

S-CAMHS

Compliance remains stable and within target. Continued bi-monthly monitoring meetings to ensure ongoing compliance.

OAMHS

Improved position from the previous quarter, compliance remains within target for this period.

Learning Disabilities

Compliance continues to improve

Adult Mental Health

Business manager, Senior nurses and Team leads continue to work together to ensure that the CTPs remain compliant. Discussed how to maintain the target, given the improved compliance. Weekly data collection to review compliance, to identify areas of early improvement required, to ensure targets are maintained.

Data that is being collated to evidence the number of new/or previously known patients receiving treatment under secondary care and being discharged from services due to recovery. These will continue to be used to analyse the demand and discharges from the service areas.

New to secondary Mental Health services under CTP	Oct 23	Nov 23	Dec 23
Adult	32	11	8
Older	35	37	15
CAMHS	11	10	9
LD	3	3	2

Decrease in demand across all areas in December, which is usual for referrals into Mental Health Services but a reported increase in January identified.

Discharged from secondary Mental Health services	Oct 23	Nov 23	Dec 23
Adult	23	28	28
Older	20	27	23
CAMHS	3	4	6
LD	4	3	8

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

We have started to collate information on four key areas within SPOC which pertain to the Part 3 measure as well as information on how CMHT patients are using the service

Month	Oct 23	Nov 23	Dec 23
Details			
Over All Monthly Total Calls Answered	994	1126	1480
Over all Referred to CMHT Sub to Measure	12	4	6
Over All Monthly Total Calls referred to CMHT	29	40	34
Over All Monthly Total Calls advised to self-refer to CMHT	0	3	0

Christmas period calls increased to 111#2 which was positive and the service managed and maintained the demand effectively .

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

PART 3	Detail	Jul 23	Aug 23	Sept 23
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%	100%	100%	100%

This quarter the figures for the average time for the assessment to be undertaken are as below. This would be from the time the request is made, by the service user or carers, until the assessment was undertaken.

Month	Oct 23	Nov 23	Dec 23
Average wait times in days for adult mental health	33	29	20

Detail	Oct 23	Nov 23	Dec 23
Amount of People who have self-referred under Part 3 of the Mental Health Measure (in Adult Mental Health).	6	14	6
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).	3	3	4

Part 4 – Independent Mental Health Advocacy

Compliance is on target

PART 4	Detail	Oct 23	Nov 23	Dec 23
	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	100%	100%	100%

	advocacy services in the mental health services (Target 100%)			
--	---	--	--	--

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.
Partion / 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