

MENTAL HEALTH SCRUTINY GROUP

DYDDIAD Y CYFARFOD: DATE OF MEETING:	28 th July 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Scrutiny Group April 2023 – June 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 March to June 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

PART 1	Detail		Apr 23	May 23	Jun 23
Target 1	80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral	Adult	76.3%	66.8%	56.3%
Target 1	80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral	CAMHS	88.2%	86.6%	93.5%
Target 2	80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS	Adult	99.3%	99.2%	97.9%
Target 2	80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS	CAMHS	45.2%	72.9%	72.2%

Discussed Adult part 1(target1) with the Adult Service having a reduction in compliance over the last three months to 56.3% in the last reported month-all three months under currently under target.

Feedback given from the Service. The Service has now instigated performance monitoring meetings with the LPMSS teams. Challenges currently in the Ceredigion area. Ceredigion has been impacted by long term sickness, vacancies and an increase in the number of referrals. Ceredigion referrals per month have increased to an average of 150 referrals a month, compared to the average of Pembrokeshire and Carmarthenshire rate of 120 per month (with smaller populations). No recognised factor for increase identified.

The service has mobilised resources, and the team leaders are now working clinically with a prediction of meeting the target next quarter.

CAMHS target one is very positive with all three months above target.

Target 2 in Adult Service exceeding the 80% target with high level of compliance achieved within the service.

Target 2 in CAMHS discussed on trajectory for improvement. The Delivery Unit are satisfied with the current improvement plan, with the Enhanced Monitoring in place

Part 2 – Care and Treatment Planning

PART 2	Detail		Apr 23	May 23	Jun 23
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	Adult	89.2%	93.9%	89.8%
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	OAMHS	97.4%	97.4%	93.5%
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	LD	85.3%	89.2%	89.2%

Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	CAMHS	100%	100%	100%
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S-CAMHS

All targets at 100%

OAMHS

All targets achieved

Learning Disabilities

Services is slightly under the 90% target in June. Reported issues with obtaining information and dates from LA care coordinators, in Carmarthenshire. This is now improving
Pembrokeshire LA issues have now been reported as resolved.

Adult Mental Health

Adult services are just below the 90% target. This is due to recruitment/vacancy issues currently in South Carmarthenshire, Ceredigion and North Pembrokeshire, also impacted further by staff sickness. All three areas are currently on the risk register regarding the staffing. Teams within the other areas are exceeding the 90%with the targets which is assisting the other areas. North Pembrokeshire and South Carmarthenshire are the high acuity areas but there is ongoing support via the Senior Nurses within these areas. Recruitment and retention is showing current signs of improvement in Carmarthenshire and Ceredigion.

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 form the service areas.

New to secondary Mental Health services under CTP	Apr 23	May 23	Jun 23
Adult	28	21	55
Older	28	16	24
CAMHS	18	5	10
LD	0	1	0

Increase in new patients in Adult June, with no reported reason for this. Appear to be seeing an increase in activity within Adult Services within July and August also. CAMHS saw a lower level of referrals in June.

Discharged from secondary Mental Health services	Apr 23	May 23	Jun 23
Adult	18	30	16
Older	13	12	21
CAMHS	3	3	2

LD	0	1	0
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Discharges from the services remain variable across the teams. Changes in CTP caseloads reviewing the 3 months information indicate an increase inpatients under CTP within Adult, Older Adult and CAMHS services.

40 patients increased in adult services

22 patients increased in OA services

25 in CAMHS increased

LD remained the same

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

Details	Month	April	May	June
Over All Monthly Total Calls Answered		814	1027	1073
Over all Referred to CMHT Sub to Measure		1	3	3
Over All Monthly Total Calls referred to CMHT		54	28	33
Over All Monthly Total Calls advised to self-refer to CMHT		0	0	0

May and June reported an increase in calls to 111#2 in May and June. The service was Nationally launched, which possibly impacted the increased call activity.

Referrals onto CMHT and secondary Mental Health services remained low. Increased numbers of repeat callers to the service and patients known to the CMHT making contact for support.

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

PART 3	Detail	Apr 23	May 23	Jun 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.

	Apr 23	May 23	Jun 23
Average wait times in days for adult mental health	42	42	41

Scrutinised the reason for the increase in waiting times was due to the staffing issues in some CMHT areas. Working is currently being completed with GPs in the high acuity areas of Pembrokeshire and Carmarthenshire to promote the use of 111#2, with a view to reduce the number of routine referrals that are received by the CMHT.

High acuity CMHT areas are seeing more difficulties with recruitment, but future review to ensure geographical areas are more equitable with staffing ratios, to assist the teams in these areas.

Detail	Apr 23	May 23	Jun 23
Amount of People who have self-referred under Part 3 of the Mental Health Measure (in Adult Mental Health).	6	13	10
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).	4	6	6

Continue to see some patients who could have self-referred, but the GP's have referred. To look at more detail at this for the next report to see if this is a particular area that this is occurring. Possible further discussions with the introduction of a GP lead to the Scrutiny Group attendees for future meetings.

Part 4 – Independent Mental Health Advocacy

PART 4	Detail	Jan 23	Feb 23	March 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 advocacy services in the mental health services (Target 100%)	100%	100%	98.1%

Slight dip which was an administration error on PAS in Pembrokeshire –this has now been resolved.

Further report included below.



AWW IMHA
Scrutiny Information

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:	The Mental Health Legislation Scrutiny Group

Parties / Committees consulted prior to University Health Board:	
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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:	<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>
Cyfreithiol: Legal:	
Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

ADVOCACY WEST WALES IMHA STATISTICS REPORT Apr - Jun 23					
No of Clients	APR	MAY	JUN		
New	39	52	51		
Ongoing	63	68	88		
TOTAL	102	120	139		
Carmarthenshire	45	63	72		
Pembrokeshire	37	39	46		
Ceredigion	20	18	21		
TOTAL	102	120	139		
Missed contact target	0	0	0		
REFERRAL SOURCE	APR	MAY	JUN		
	Total	New	Total	New	Total
AWW initiated	16	7	22	6	24
Carer	0	0	0	0	0
Donee/Dep	0	0	0	0	0
Family	0	0	0	0	0
GP	0	0	0	0	0
Health - Hospital	78	28	84	38	103
Health - Primary	0	0	0	0	0
Health - Secondary	0	0	0	0	0
Other Advocacy	1	1	0	2	2
Police	0	0	0	0	0
Self referred	4	7	3	4	4
Social Prescriber	0	0	0	0	0
Safeguarding	0	1	0	0	0
Social Services	2	2	1	2	1
Third Sector	1	1	5	5	4
TOTAL	102	39	120	52	139
STATUS	APR	MAY	JUN		
Informal & DoLS	38	47	54		
Formal	65	76	90		
Informal	33	46	50		
DoLS	5	1	4		
S4	0	0	1		
SS(2)	0	1	1		
SS(4)	0	0	1		
S2	37	44	59		
S3	12	11	12		
S7	0	0	1		
S17A - CTO	5	8	4		
S35	0	0	0		
S36	0	0	1		
S37	0	0	0		
S37/41	7	7	6		
S38	0	0	0		
S47	1	1	1		
S47/49	3	3	3		
S41	0	0	0		
S48/49	0	0	0		
S48	0	1	0		
SS8A	0	0	0		
Changes of Status	1	3	5		
Mental Health Ward	APR	MAY	JUN		
Bryngofal - Carm	10	17	27		
Bryngolau - Carm	10	10	12		
LSU - Carm	8	8	8		
PICU - Carm	11	16	11		
Morlais - Carm	6	10	15		
Ty Bryn - Carm	1	1	1		
Rainbow Suite/CAMHS - Carm	0	0	0		
Bro Myrddin - Carm	0	0	0		
St Caradog - Pembs	14	18	16		
St Non - Pembs	15	15	16		
Enlli - Ceredigion	6	7	13		
Total Carmarthenshire	46	62	74		
Total Pembrokeshire	14	18	16		
Total Ceredigion	21	22	29		
Total MH Units	81	102	119		
General Hospital	APR	MAY	JUN		
Prince Phillip - Carm	0	0	0		
Glangwili - Carm	1	0	1		
Llandoverly - Carm	0	0	0		
Amman Valley - Carm	0	0	0		
Withybush - Pembs	5	6	11		
South Pembs - Pembs	0	0	0		
Tenby Cottage - Pembs	0	0	0		
Bronglais - Ceredigion	9	4	4		
Tregaron - Ceredigion	1	0	0		
Total Carmarthenshire	1	0	1		
Total Pembrokeshire	5	6	11		
Total Ceredigion	10	4	4		
Total General Hospital	16	10	16		
Community	APR	MAY	JUN		
Carmarthenshire	2	3	2		
Pembrokeshire	2	4	1		
Ceredigion	1	1	1		
Community Total:	5	8	4		

SUMMARY OF ISSUES	APR	MAY	JUN
	X1*	X1*	X1*
Access to health services	21	32	33
Access to social services	4	1	4
Access to other services	10	14	16
Access to records/FOIR	0	1	2
Accommodation	40	47	54
Asylum and Immigration	0	0	0
Care Provision	17	22	27
Cars and Driving	0	1	0
Children/Contact	1	1	0
Complaints	2	5	5
Cultural / Spiritual Needs	0	2	1
Daily Activity	20	27	14
De Fact Detention	1	1	1
Delayed Disch/move on	13	10	10
DoLS	2	5	5
Domestic Abuse	0	0	2
ECT	1	4	4
Employment/training	1	2	3
Family relationships	15	20	20
Finance/benefits	9	13	9
Forensic	1	1	0
Funding issue	1	3	1
Hospital Admission	17	17	19
Hospital Discharge	31	50	59
Hospital Transfer	16	17	12
Leave from ward	32	37	33
Legal rights	49	56	56
LPA/Deputyship queries	0	1	1
Medication, Treatment	57	71	64
Mental Health	51	69	79
Not ready for discharge	2	2	5
Observation levels	0	0	2
Other non-stat advocacy	2	3	2
Other service users	4	3	1
Out of county placement	3	2	1
Personal Property	4	10	4
Physical health	30	32	30
Safeguarding Adults	1	3	4
Safeguarding Children	0	0	0
Substance Misuse	3	6	0
Transport	0	0	0
Total	461	559	583

Age and Gender:	APR	MAY	JUN
Under 18	2	2	5
18-29	12	20	12
30-49	27	32	34
50-64	15	24	32
65+	31	32	37
80+:	15	10	19
Total	102	120	139
Male	60	78	92
Female	41	39	46
Non-binary	0	1	0
Other	0	0	0
Prefer not to say	1	2	1
Total	102	120	139
Language/Comm Requirements	APR	MAY	JUN
Welsh	5	4	4
English	94	115	133
Other spoken:	0	0	0
List number and type of other spoken in a vertical list:			
BSL	0	0	0
Pictures/Symbols	0	0	0
Non-Verbal Aids	2	0	1
Not determined	1	1	1
Total	102	120	139

Outcomes:				Case Studies
DYNAMIC OUTCOMES/NOTABLE EVENTS	APR	MAY	JUN	
Appropriate discharge planning completed	11	7	13	A: We supported a client on a long standing CTO to appeal their CTO. We explored the options, the criteria for maintaining the CTO and the person's views around this. The person hadn't felt able to put in an appeal for some time as they found them very stressful. The person provided instruction to appeal and the RC visited the person. On reviewing the criteria the RC agreed that the CTO was no longer appropriate and discharged the person from CTO. The person, who still has long standing issues around accommodation and who requires advocacy support, is no longer supported by the IMHA service but has the same advocacy in the community by way of our community service. Client was delighted with discharge from CTO and continues in placement pending planning for a move to their preferred area.
Better able - informed decisions	8	6	31	
Better able - manage finances	0	0	0	B: Client on acute adult ward for the first time – admitted as a result of depression and risks to self. Explored hospital admission and options for client; supported to understand legal rights on section 2. Client hadn't wanted to engage with ward staff. Advocate discussed with person around needs and wishes and supported person to speak to ward staff including around physical health difficulties that were impacting their mental health. Client as result was able to start to engage with the care team and be involved in creating his care plan.
Better access - care and treatment	0	1	1	
Cared for - admission avoided	0	0	0	
Change of plan/feeling on issue	0	0	0	
Client achieved desired outcome	0	3	4	
Client felt listened to and supported	15	14	26	
Control of care improved	1	1	1	
Decreased isolation	0	0	0	
Empowered to participate in CTP/planning	0	0	1	
Enabled access to specialist help / signpost	0	1	6	
Enabled clients voice to be heard	1	4	8	
General health improved	0	0	0	
Improved Benefits access	0	0	0	
Improved financial access	0	0	0	
Improved housing access	0	0	0	
Improved journey	1	0	1	
Improved MH or wellbeing	0	1	1	
Improved self-advocacy	5	4	0	
Improved confidence	0	0	1	
Informed decision	1	0	0	
Legal rights upheld	5	7	10	
Referred to training or volunteering	0	0	0	
Supported at court/hearing	2	6	5	
Supported DWP/tribunal	0	0	0	
Outcomes assessed: at close	APR	MAY	JUN	
Cases Closed This Month	17	17	77	
Outcomes Scales Completed:	8	1	7	
My voice is heard	7	1	7	
Improved self ad	5	1	7	
Understand rights/entitlements	6	1	7	
Better/informed decision making	5	1	7	
More control of care	6	1	7	
New skill learned	3	1	5	
Decrease in isolation	5	1	7	Awareness Raising of Service:
Advocacy improved wellbeing	4	1	6	See links to our published IMHA for Professionals Infomercials in both
Outcome Scales Not Completed:	9	16	70	English (https://www.youtube.com/watch?v=zMj39UI71Dc)
Not completed: Lacking Capacity/Too Unwell	3	0	20	and Welsh (IMHA Ar gyfer Gweithwyr Proffesiynol - YouTube).
Not completed: Discharged/Not on Ward	5	14	42	
Not completed: Deceased	1	0	2	
Not completed: Other	0	0	0	