

**CYFARFOD BWRDD IECHYD PRIFYSGOL
HYWEL DDA UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 th September 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Hospital Managers Power of Discharge Sub-Committee Annual Report 2020/2021
CYFARWYDDWR ARWEINIOL: LEAD EXECUTIVE:	Mr Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Professor John Gammon, Vice Chair (Independent Member)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

The purpose of the report is to present the Hospital Managers Power of Discharge Sub-Committee Annual Report for 2020/2021

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The annual report provides assurance to the Board in respect of the work that has been undertaken by the Hospital Managers Power of Discharge Sub-Committee during 2020/2021, that those functions of the Mental Health Act 1983, as amended, are being carried out correctly; and that the wider operation of the 1983 Act in relation the Local Health Board's area is operating properly.

Cefndir / Background

The Terms of Reference of the Sub-Committee itself require the submission of an Annual Report to the Board. The report summarises the work of the Sub-Committee for the year and represents the fulfilment of the duties required of it by the Board.

As stated in the Terms of Reference, the Sub-Committee is required to:

- Review and monitor how the operation of the delegated functions under Section 23 of the Mental Health Act 1983 (the 1983 Act) and the Code of Practice are being exercised;
- Discuss the work of individual panels;
- Discuss the training requirements of Review Panel Members and produce a training plan for approval by the Mental Health Legislation Assurance Committee;
- Discuss any impact of legislative changes on the role of Hospital Managers;
- Highlight any impact of service changes; and
- Provide learning opportunities

Asesiad / Assessment

Hospital Managers Power of Discharge Sub-Committee Annual Report 2020/2021

This Annual Report outlines how the Hospital Managers Power of Discharge Sub-Committee has complied with the duties through the Terms of Reference set, and also identifies key actions to address developments.

Introduction

The Board (including all Independent Members) are Hospital Managers for the purpose of the Mental Health Act 1983 (the 1983 Act). On the 27 September 2012, the Board delegated its responsibility to the Sub-Committee. Previously, only the Power of Discharge Committee report to the Board and the only delegated responsibility was Section 23 of the 1983 Act – the power of discharge of detained patients.

Whilst the Board retains overall responsibility and accountability for ensuring the quality and safety of health-care for its patients, service users, staff and the wider public, it has delegated authority to the Sub-Committee to undertake functions as set out within the Terms of Reference of the Sub-Committee.

The purpose of the Sub-Committee is to assure the Hywel Dda University Health Board that those functions of the 1983 Act, which they have delegated to officers and staff are being carried out correctly; and that the wider operation of the 1983 Act in relation to the ULHB's are operating properly.

Cyfansoddiad / Constitution

Member of the Hospital Managers Power of Discharge Sub-Committee consists of Independent Members and appointed Lay Members. The Chair of the Sub-Committee is Professor John Gammon. The Mental Health Act Administration Lead is the Lead Officer and the Mental Health Act Administrator is secretary. An Independent Mental Health Advocate is an attendee also.

The Sub-Committee may also request the attendance of any other officers of the Health Board as required.

During 2020/21 the Sub-Committee met on three occasions as identified below:

- 29th September 2020
- 1st December 2020

A meeting arranged 9th April 2020 had to be stood down due to the global pandemic however a paper update that included regular items was circulated to all members.

Terms of Reference requires a minimum of two Independent Board members and two lay members and no less than eight to be in attendance.

Corff Y Adroddiad / Body of Report

The Committee agreed to the establishment of the Hospital Managers Power of Discharge Sub-Committee (the Sub-Committee), made up of Independent Members and Lay Members. Section 23 of the 1983 Act (The Power of Discharge) was delegated to the Sub-Committee. Officers can attend but are not members.

A panel of three or more members drawn from the Sub-Committee hear individual cases where patients or their nearest relative have applied for discharge. The panels also sit on renewal hearings – these are collectively known as Hospital Managers reviews.

The Hospital Managers have a range of responsibilities, including:

- Ensuring that patient's care and treatment complies with the 1983 Act;
- Authority to detain patients admitted under the 1983 Act; and
- Power to discharge certain patients (S23 of the 1983 Act) – which can only be exercised by three or more members of a Committee formed for that purpose.

The Sub-Committee meetings are held three times per year and are training focussed to ensure members are kept up to date with current legislative and of changes within the Health Board. During the year there was some changes resulting from the global pandemic. Both meetings that took place were held via MS Teams. Training was also provided via use of the same and members received training on the following areas:

- Role of the nearest relative under the Mental Health Act
- Human Rights and its relationship with the Mental Health Act.

Hospital Managers Reviews

In March 2020 Welsh Government provided guidance to health boards in relation to Hospital Manager reviews. It advised that whereby a case was being brought before a Mental Health Review Tribunal for Wales six weeks either side of an application to the Hospital Managers a further hospital managers review was not deemed to be in the public interest in light of Covid restrictions. During 2020/2021 there were **27** applications for discharge to the Hospital Managers, which resulted in **4 hearings held** (in light of above guidance). There was **1** patient discharged from their detention orders by the Hospital Managers.

During 2019/2020 there were a total of **72** detentions renewed by Responsible Clinicians, all renewals are heard by Hospital Managers. All renewals were upheld by the Hospital Managers.

A total of **6** applications for discharge were made by nearest relatives that resulted in **2** hearings taking place. **1** patients were discharged at their barring hearings.

Since March 2020 it became necessary in the interests of public health to review the ways in which reviews were conducted. Throughout 2020-1 all patients continued to have their cases reviewed by Hospital Managers in line with the Act requirements. By October 2020 all panel members were equipped with devices in order to provide hearings across the platform of MS Teams. This has continued to be monitored and evaluated appropriately.

Other Areas of Responsibility

During 2020/1 the sub-committee also received, considered and approved actions associated from the following from the following:

- The Sub-Committee also received updates and minutes from the Mental Health Legislation Assurance Committee.
- The Sub-Committee received updates on:
 - Legal updates in relation the MHA Act 1983
 - Independent Mental Health Advocates issues relevant to the sub-committee
 - Service changes within Mental Health and Learning Disability organisational structures.

-

Argymhelliad / Recommendation

- The Sub-Committee is requested to consider the Annual Report 2020/1 and to recommend the approval of the Annual Report at its next meeting.

Amcanion:

Objectives:

Sub-Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	9.1 The Sub-Committee Chair, supported by the Sub-Committee Secretary, shall: 9.1.1 Report formally, regularly and on a timely basis to the Mental Health Legislation Assurance Committee on the Sub-Committee's activities. This includes the submission of Sub-Committee minutes, as well as the presentation of an Annual Report within 6 weeks of the end of the financial year.
Cyfeirnod Cofrestr Risg Risk Register Reference:	N/A
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Standards 1,6,7,8,10,12,14 and 15
Amcanion Strategol y BIP: UHB Strategic Objectives:	The Hospital Managers Power of Discharge Sub-Committee provides an assurance to the Board of the organisation's compliance with the Mental Health Act, 1983.
Amcanion Llesiant BIP: UHB Well-being Objectives:	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; and Ensure a sustainable, skilled and flexible workforce to meet the changing needs of the modern NHS.
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio:	Looking at the long term so that we do not compromise the ability of future generations to meet their own needs.
The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	Understanding the root causes of the issues to prevent them happening in the first place

	Working with others in a collaborative way to find shared sustainable solutions.
	Involvement of a people in decisions that affect them, and ensuring that those people reflect the diversity of our area.
	Taking an integrated approach so that we consider how our well-being objectives may impact upon each of the well-being goals, and on the objectives of other public bodies.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	N/A
Rhestr Termau: Glossary of Terms:	Outlined in report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ceisiadau Gofal Sylfaenol: Parties / Committees consulted prior to Primary Care Applications Committee:	Vice Chairman Mental Health Power of Discharge Sub-Committee Mental Health Legislation Assurance Committee

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Non compliance with the Mental Health Act could result in legal proceedings being brought against the Health Board who is the detaining authority.
Ansawdd / Gofal Claf: Quality / Patient Care:	Safety of patients Working within legislation to detain and treat patients under the MHA 1983.
Gweithlu: Workforce:	To ensure staff are working within legislation and the use of statutory mechanisms in order to detain and treat patients under the MHA 1983.

Risg: Risk:	Risk of non compliance with the 1983 Act and with the Welsh Government's Mental Health Act 1983 Code of Practice for Wales and with the Good Governance Practice Guide – Effective Board Committees (Supplementary Guidance) Guidance.
Cyfreithiol: Legal:	As outlined above to ensure compliance within the Act of the Local Health Board to ensure it is not associated with litigation or damages occurred through non-compliance.
Enw Da: Reputational:	As outlined above
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	N/A