



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	15 th June 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Legislation Scrutiny Group Update
ARWEINYDD CYFARWYDDWR: EXECUTIVE LEAD:	Andrew Carruthers
SWYDDOG ADRODD: REPORTING OFFICER:	Kay Isaacs, Head of Adult Mental Health

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 (the Group) was established as a Sub-Group of the Mental Health Legislation Assurance Committee (MHLAC) and was constituted from 14th July 2014.

The purpose of the paper is to present to the Mental Health Legislation Assurance Committee an update from the Mental Health Legislation Scrutiny Group meeting held on Tuesday 11th of May 2021 and any subsequent work that the group have agreed to undertake.

Cefndir / Background

The following papers will be submitted as regular items on the MHLSG agenda in line with the principal duty of the scrutiny group as described within the Terms of Reference.

- Mental Health Act Use
- SCAMHS Update Report on admissions to the designated bed on Morlais Ward
- Mental Health Measure performance report
- Local Authority Data
- CTP Audit Report
- Any other relevant report or memorandum of understanding

Papers are sent out to members of the MHLSG at least seven days in advance of the meeting and members are expected to read and submit agenda items should further scrutiny of the papers be required.

Mental Health Act Data (Q4):

A paper was presented to the group in relation to Mental Health Act activity data for Q4.

The salient points were as follows;

- During lockdown restrictions in early January 2021 there was a reduction in S136 activity.
- There was an increased number of S5 (2) detentions of twenty-one for Q4. There were two invalid uses. There was an action created to address concerns with regard to delay with

regard to MHA papers being sent to the MHA Administration Team from mental health in-patients wards and wards in our District General Hospitals.

- The remainder of the data was relatively standard with no real trends.
- The group was updated in respect of the tribunal office; some hearings will continue to be held via video link but no longer by telephone conferencing. The Tribunal Office are going to review their position and provide a further update within the next couple of weeks.

Care and Treatment Planning (CTP) update:

The report provided a monthly summary of data which included outlines of how teams have performed in relation to compliance, ensuring the CTP is completed within six weeks and reviewed in 12 months.

Compliance detail is provided below;

Assessment of needs and strengths.

Overall we are seeing an upward trend in reaching the timeframes set for updating the needs and strengths assessment and whilst there has been a slight variation in the green/amber status for the quality element of the assessments there is a positive decline observed in the red status.

WARRN.

In eight out of the eleven months audited we have either reached or surpassed the 90% target set for the timescale for reviewing the risk assessment and we can report an improvement in the quality of the assessment for this month.

CTP.

In nine out of the eleven months audited we have surpassed the 90% target set in ensuring that CTP's are updated within a twelve month period. We are seeing an upward trend in the recording of green status (RAG rating scale) for the quality of outcomes set being

SMART (specific, measurable, achievable, realistic and timely).

Quality of the patients individualised relapse signatures has improved by 10% and the crisis and contingency management plans by 4%. CTP reviews. We are currently seeing a slight drop in our achievements in ensuring that the care and treatment plans are reviewed within a twelve month period. Whilst the combined score for green and amber remains the same as last month we can report that there has been a shift in the balance of green and amber status with little change to the red status

Developments

Bespoke carers training, started 20th April 2021. There are two parts to this training, part one is with regard to expectations in relation to compliance and standards. Part two is facilitated and chaired by carers and people with lived experience, with focus on engagement of carers (and families) there was a comment that whilst the training is of a good standard, it is still a pilot and learning will further develop the content. The aim is to bring the reflective practice and lived experience, including carer's experience, into the CTP training, at the next meeting numbers of staff trained will be provided.

The report provided by QAPD also references compliments and complaints. Future reports will ensure that compliments and complaints that involve MH legislation are shared in the report

The group was reminded to review and provide comments in relation to the previously shared briefing document provided for this meeting so that future reports contain information appropriate and relevant for this group.

The group discussed the data provided and there was a question in respect of accuracy for one element of the data for which an action was created.

The need for a Recovery focus and how CTP documentation should be used to support this pathway was discussed by the group. In particular the roles of allied health professionals i.e. Occupational Therapists and Psychologists who were felt to be fundamental in assisting individuals to acquire skills in order to transition back into society. The OT member of the group was not in attendance so an action was created to ask that a report detailing Recovery interventions is provided to the next group meeting.

Local Authority Data Collection:

The three local authorities provide the group with an overview of their data collection, the salient points are as follows:-

Ceredigion

- Number of Sections 136's was low, two for the last quarter with the same quarter last year about eighty-five.
- Twenty-eight Mental Health Act assessments, which is relatively low, of those assessments seven were community based in the patient's own home, last year same quarter only four were based in the patient's own home.
- Overall, the numbers are not that high but are an indication they are starting to increase slightly.

Carmarthenshire

- During Q4, assessments were up compared to the same period last year. Age profiling for assessments that usually take place in Q4 show older people are the majority seen, however this year whilst older people were still significant the data shows young people under thirty were the main people being assessed.
- Detained a few individuals under eighteen, numbers not high compared to adults but it is a distinctive change worthy of noting.
- More males than females assessed.
- Small number of patients from other areas.

Pembrokeshire

Unfortunately, the LA representative was unable to remain for the whole meeting, the report highlighted an increase in MHAAs and some difficulty obtaining S12 doctors. This is being addressed to a degree by using Health Board doctors wherever possible.

Place of Safety:

The chair updated the group on Place of Safety data

- One Section 136 in Gorwelion Alternative Place of Safety and ten in St Caradogs. It is likely that this is due to the location of the places of safety, one ward based the other Gorwelion in the community.
- There was an action created to review the criteria for Gorwelion APOS to ensure the facility is used for those detained under S136 and when a S136 is avoided.

Matters noted

On 2 February 2021, the Welsh Government circulated a letter to Health Boards, Directors of Social Services and stakeholders highlighting the decision by the high court and confirming that virtual/remote assessments under the MHA should no longer be conducted.

Section 117 Policy

An update was provided to the group on the status of the Section 117 policy which is currently being updated as it is three years old. Work is currently ongoing in relation to collating an accurate Section 117 list for the HB and three local authorities. Good progress is being made and a further update will be provided at the next meeting.

Liberty Protection Standards

The Head of Consent and Mental Capacity joined the meeting to present the Liberty Protection Safeguards agenda.

MAPPA's Victims Code

This was shared with the group for information. It follows on from the Domestic Violence Crime and Victims Act. If any patients who are detained under Part 3 of the MHA have a victim who wants to make representation relating to conditions for a CTO or prior to discharge the MHA Administration team will ensure contact is made with a Victim Liaison Officer.

Conveyance

The Health board now has a six month pilot of access to St Johns Ambulance to assist with in-patient ward transfers, discharges home from hospital, admissions to hospital and to support the AMHP during MHA assessments in the community.

Information for Carers after the MHA assessment process:

Our carer's representative raised the issue around a lack of information for carers when the patient has required an assessment under the Act but has not met the criteria for detention. Often the person and the carer can feel left with no support or information.

The group discussed possible solutions including:

- Information documents/leaflets that could be left with the person who has been assessed and the carer after the assessment.
- Adding a page to the AMHP paper assessment document that could be removed and left at the property for the patient and carer with details of outcome and plan. LA members took this as an action to explore alongside exploring what other services there are locally for support.

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Argymhelliad / Recommendation

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