

COFNODION Y CYFARFOD
PWYLLGOR SICRWYDD DEDDFWRIAETH IECHYD MEDDWL
HEB EU CYMERADWYO / UNAPPROVED
MINUTES OF THE
MENTAL HEALTH LEGISLATION ASSURANCE COMMITTEE (MHLAC)

Date and Time of Meeting:	09.30-11.30am, Tuesday 2 nd March 2021
Venue:	Via MS Teams

Present:	<ul style="list-style-type: none"> • Mrs Delyth Raynsford, Independent Member • Mr Paul Newman, Independent Member • Mr Maynard Davies, Independent Member • Mr Mike Lewis, Independent Member
In Attendance:	<ul style="list-style-type: none"> • Mr Clive Smith, Carer Representative • Mr Andrew Carruthers, Director of Operations • Ms Liz Carroll, Director of Mental Health & Learning Disabilities • Ms Ruth Bourke, Mental Health Act Administration Lead • Mr Richard Jones, Head of Clinical Innovation and Strategy, MH&LD • Mrs Sara Rees, Head of Service Adult Mental Health • Ms Donna Pritchard, Ceredigion County Council • Dr Warren Lloyd, Associate Medical Director/Consultant Psychiatrist • Mr Rob Jeffrey, Welsh Ambulance Service • Mrs Elizabeth Cook, (EC3) MH&LD PA (Secretariat) • Ms Angie Darlington, Third Sector Representative • Mr Ken Jones, Community Health Council Representative • Mrs Sarah Roberts, Mental Health Act Legislation Manager • Ross Evans, Dyfed-Powys Police • Ms Eleanor O'Connor, representing Head of Service, Learning Disabilities • Ms Jane Hitchings, Pembrokeshire Local Authority • Ms Aileen Flynn, Transformation & Strategic Partnerships Manager

Agenda Item	Introductions and Apologies for Absence	Action
MHLAC(21)1.1	<p>Mrs Delyth Raynsford welcomed all to the meeting as interim Chair for this meeting on behalf of Mrs Judith Hardisty.</p> <p>The following apologies for absence were received:</p> <ul style="list-style-type: none"> • Ms Angela Lodwick, CAMHS & IPTS Head of Service • Ms Kay Isaacs, Head of Service, Adult Mental Health • Ms Melanie Evans, Head of Service, Learning Disabilities • Mrs Judith Hardisty, Vice Chair of Hywel Dda University Health Board 	
MHLAC(21)1.2	<p>Declarations of Interests</p> <p>No declarations of interest were made.</p>	
MHLAC(21)1.3	<p>MHLAC Terms of Reference</p> <p>The revised Terms of Reference incorporating the amendments agreed at the meeting held on 1st September 2020 were received and accepted. Mr Clive Smith acknowledged the amount of work that had been undertaken reviewing the Terms of Reference across the corporate governance structure and welcomed the changes that had been made.</p>	

	Mrs Delyth Raynsford thanked Mr Smith for his participation in the review of the Terms of Reference that had taken some time and effort to develop outside of the meeting.	
	The Committee NOTED and APPROVED the content of the revised MHLAC Terms of Reference 2020/21.	

MHLAC(21)1.4	The minutes of the meeting held on 1st September 2020 were APPROVED as an accurate reflection of the previous meeting.	
	The Committee NOTED and APPROVED the minutes from the previous MHLAC meeting in September 2020.	

MHLAC(21)1.5	Matters Arising, including Table of Actions from the Minutes of the Meeting held on 1st September 2020	
	<p>The Table of Actions was reviewed and the following noted:</p> <ul style="list-style-type: none"> the timescales noted on the Table of Actions should be revised (where they remain active and appropriate) to June 2021, to take into account the cancellation of the December 2020 MHLAC meeting, due to the COVID-19 pandemic. <p>MHLAC (19)59 Mrs Sara Rees confirmed that a Staff/patient story would be deferred to the June 2021 meeting. Mrs Sara Rees explained that Ms Alison Evans in the Quality Assurance Professional Development Department had identified a suitable staff story for presentation, however was now undertaking a redeployment role due to the pandemic within the national vaccination programme. Mr Andrew Carruthers noted his support for the request for a staff story as it was important to reflect the experience of the Directorate in addition to the known experiences within the Acute side.</p> <p>MHLAC (19)60 Mrs Liz Carroll confirmed that data collection recommenced in December 2020 and quarterly data will be available for the June meeting and has requested that data will be separated between CAMHS and Adult for Part 1 data.</p> <p>MHLAC (19)63 Mrs Liz Carroll explained that Ms Angela Lodwick had prepared the draft papers for MHLAC however due to operational pressures this was not able to be finalised for the March meeting and would be presented at the June 2021 meeting.</p> <p>MHLAC (20) 70 The revised Workplan 2020/21 was provided as part of the papers for this meeting.</p> <p>MHLAC (20) 71 Scrutiny Group reporting: Action completed.</p>	<p>EC3</p> <p>SR</p> <p>LC</p> <p>LC</p>

	<p>MHLAC (20) 72 All admissions are robustly and rigorously scrutinised. Action completed.</p> <p>MHLAC (20) 73 It was acknowledged that Mrs Judith Hardisty had raised the issue relating to Tribunals being held by telephone only with AllWales Vice Chairs meeting and Mrs Liz Carroll had also highlighted the issue at the National Covid-19 Leads meetings. At the time of the meeting there had been no movement from the Tribunal Service and this continued to be highlighted as a risk and disadvantage to patients. This action point is to be reviewed again at the June 2021 meeting.</p> <p>MHLAC (20) 74 Timescale deferred to June meeting.</p> <p>MHLAC (20) 75 The amended report had been submitted to Board as requested and the action is to be marked as completed.</p> <p>MHLAC (20) 76 The amendments had been made to the policy and since the last meeting has received approval from the Written Control Group and is now in circulation. The action point is to be marked as completed.</p> <p>MHLAC (20) 77 Scrutiny Group monitor the movement of individuals and service contact. This action point is to be marked as completed.</p> <p>No other issues were raised.</p>	JH
	The Committee NOTED the MHLAC Table of Actions.	

MHLAC(21)2.1	<p>MHLAC report to Audit and Risk Assurance Committee</p> <p>The MHLAC report to Audit and Risk Assurance Committee was received for information by the Committee, which gave a general overview of the considerations undertaken by the Committee. Mrs Ruth Bourke also tabled the Quarterly Performance Report for Quarter 3 (October to December 2020) and the Power of Discharge Sub Committee Minutes (from 1st December 2020).</p> <p>Mrs Ruth Bourke invited any queries relating to the Quarterly Performance Report. It was noted that the use of the Act was reduced in comparison to the previous year, however due to the pandemic it was difficult to compare on a like-for-like basis and was too early to confirm any trend.</p> <p>Mrs Ruth Bourke confirmed that work had been undertaken relating to the use of Section 5.2 Doctors Holding Powers, particularly within general hospital settings. Section 5.2 policy had been reviewed and approved as an active working document in January 2021 with a programme of training underway.</p>	
---------------------	---	--

Mrs Ruth Bourke informed that the Tribunal Service was continuing to provide a telephone only service despite various attempts to challenge this sole provision. It was noted that patients find it difficult to conduct hearings over the telephone.

Mrs Delyth Raynsford reported that Mrs Judith Hardisty had raised the issue within the Vice Chairs' Group and all healthboards had raised similar concerns. It has been raised at Welsh Government who were raising the issue with Mental Health Tribunals. Mrs Delyth Raynsford confirmed this would continue to be raised as an issue as it was putting patients at a disadvantage and the healthboard have a duty to continue to maintain it as a raised agenda item.

JH

Mrs Ruth Bourke also tabled the Power of Discharge report and minutes of the meeting held in December 2020 for information and would accept any queries directly or to the Chair of the meeting, John Gammon.

Mr Clive Smith requested additional information regarding addressing the responsibilities of MHLAC within Part 1, Part 2 and Part 3 of the Measure. It was acknowledged that further information was available within the tabled Quarter 3 Report.

Mrs Liz Carroll explained that Improvement Plans were continuously being reviewed and worked towards within the Directorate.

Mrs Sara Rees confirmed additional training for staff and Care & Treatment Plan improvements. Mr Clive Smith had been actively involved in the CTP audit, which was particularly driven by dates/times and reviewing the quality of the CTPs. Mr Clive Smith was requesting metrics and audit plans that demonstrate progress however this had wider implications than an audit cycle and would be considered and lead by Scrutiny Group which in turn reports to the MH&LD Quality & Safety Experience Group.

Mr Andrew Carruthers acknowledged there was a recognition that work was continuing and ongoing towards improvement however this was not necessarily specifically referred to within a committee's Terms of Reference. Mr Carruthers suggested consideration to be given to the committee and other groups within the assurance structure and a way to have detailed conversations around the committee as it may not be appropriate to discuss within the committee meetings and would need to be developed and considered outside of the meetings.

Mr Clive Smith suggested that the annual report to the Board should reflect a picture of successes and identification of where any problems lie. Whilst delivery may be in accordance with the legislation the report should include sufficient information for the Board to understand the realistic position for each of the 24 items within the Code of Practice.

The Committee was **ASSURED** that MHLAC has complied with duties through the Terms of Reference set and identified key actions to address developments.

The Committee was **ASSURED** that activity is closely monitored and that practice is compliant with the requirements of The Measure.

MHLAC(20)3.1	ASSURANCE Scrutiny Group Update	
	<p>Mrs Sarah Roberts presented the Scrutiny Group Update Report on behalf of the Chair, Mrs Kay Isaacs.</p> <p>It was noted that Scrutiny Group had continued to meet throughout the pandemic, with the last meeting held in February 2021. An updated Care & Treatment Plan briefing paper had been received by the Quality Assurance and Professional Development Team and a proposed template was distributed to the Group. Healthy Ward checks would be recommencing shortly and the Group were also provided with quarterly data from the three local authorities relating to assessments which had been undertaken.</p> <p>The Group also discussed carers information regarding Mental Health Assessments and an example of how Ceredigion County Council record assessments was shared as an exemplar.</p> <p>Mrs Sarah Roberts referred to the request for scrutiny of Section 2 admissions and confirmed that robust scrutiny is in place to review all admissions regarding necessity of admission and reviewing any admissions in detail.</p> <p>Data on the Alternative Place of Safety in Gorwellion and Bro Cerwyn is expected for the next meeting of the Scrutiny Group.</p> <p>The Scrutiny Group were also kept informed of the Review of Mental Health Act consultation document and received an update on case law regarding virtual assessments which had recently been processed through the High Court.</p> <p>Mr Clive Smith requested further information and signposting for support be provided to the carer of a patient who is not able to be admitted but may still remain unwell.</p> <p>Mrs Jane Hitchings confirmed that any hospital admission would be seen as the most restrictive option and reference to Crisis Teams, MiND or other support services within the community would be considered and the family/carers would be included within this decision making. All information and contacts are included within the AMPs report which is provided to the family/carer.</p> <p>Mr Clive Smith considered that the letter provided to the carer is limited and would expect explicit signposting detailing contacts and would raise this at the next Scrutiny Group meeting and would welcome more active discussions with carers outside of the Scrutiny Group meeting.</p> <p>Mrs Sara Rees suggested that a joint meeting including Mr Clive Smith, Mr Ken Jones (as Carmarthenshire Carers Association Chair) and Mrs Angie Darlington would be arranged to explore how to engage more with carers and service users outside of committee meetings, using existing meeting schedules and structures.</p>	SR
	<p>The Committee NOTED the content of the Scrutiny Group Update Report, Minutes and Terms of Reference and was ASSURED that the group is progressing well and processes are being duly monitored.</p>	

MHLAC(20)3.2	Update from MH&LD Quality Safety & Experience Group (QS&EG)	
	<p>Mrs Sara Rees introduced the report from the first meeting of the newly formed Quality Safety & Experience Group. As a result of the committee structure audit, the previous Sub-Committee within Mental Health & Learning Disability as stood down and generalised Terms of Reference for all Groups had been issued and adopted.</p> <p>Mrs Rees confirmed that any exception report to the Operational Quality Safety & Experience Assurance Committee, based on the Risk Register.</p> <p>Details will be provided to the Q&SEG discussing risk and mitigations and developments throughout transformation and attainment. Mrs Sara Rees welcomed any comments to develop the paper for future meetings and how these may address some of the queries raised earlier by Mr Clive Smith.</p> <p>Mrs Delyth Raynsford queried if there was any identification of trends. Mrs Sara Rees explained the connectivity between the groups within the Directorate and that the MH Legislation Scrutiny report was also received by the Q&SEG to highlight any issues. The Q&SEG focus on service users and carers experience – Scrutiny Group identify the trend, further investigated by the Q&SEG reviewing impact and resolution. Mrs Sara Rees reported that the clinical governance structure would be provided for the next MHLAC meeting to give a clear focus on how it can give corporate governance the assurance required.</p> <p>Mrs Sara Rees also highlighted that within the transition of committee structure, an audit was conducted on quality processes which received an approval rating with only one request regarding risk review. Currently risk is reviewed within the BPPAG Directorate meetings and consideration is being given as to how to provide this information to the Q&SE Group.</p> <p>Mrs Liz Carroll noted that the issue regarding data and scrutiny of data is significant, restrictions within current mechanisms are acknowledged and a new Service Delivery Manager has been appointed which will give expertise and development to the Service, providing information on people on waiting lists within the Directorate and input from service and carers with confirmation of what can be offered in the interim.</p> <p>Mrs Delyth Raynsford asked how children and young people were able to participate and if specific groups were identified. Mrs Sara Rees confirmed use of service user and carer representation on the Partnership Board. The existing contact with Angie Darlington is key and the further meeting with Mr Clive Smith and Mr Ken Jones is not to set up a separate engagement process within the Directorate but will consider how to engage with existing groups.</p>	SR
	The Committee NOTED the content of the QS&EG Report.	
MHLAC(21)3.3	Update report for Transformation of Mental Health Services during Covid-19 Pandemic	
	Ms Aileen Flynn presented the report which provided extensive information to all areas within the Directorate. Ms Flynn explained that transformation work had continued alongside the pandemic with some	

aspects being able to progress quicker due to application of alternative or shorter approval processes being applied.

- Successful co-location of some teams. It was noted that Organisational Change will need to be completed with staff, commenced with extended hours and eventually leading to 24/7. A project team had been created and were working on final staffing structures. Staff and triumvirate have engaged via MSTeams and a good response had been received to the two meetings.
- Place of Safety has been centralised to Bryngofal (in line with transformation plan);
- Involvement in the Welsh Government 111 pilot. This is a regional single point of contact involving Hywel Dda, Aneurin Bevan and Swansea Bay healthboards on a 5 week pilot. Teams are operating in each county to enable any mental health calls to be directed to 111 return to a local footprint and the local team. Existing staff are currently involved. An evaluation is underway from Welsh Government who are currently planning Phase 2 which is likely to commence in April and would extend the current facility (Fri-Sun until 10pm). A successful evaluation would have an expectation this would become a national roll out and be fully advertised;
- Successful pilot for Welsh Government scheme (within Hywel Dda and Powys) with funding for 6 months for St Johns' Ambulance and x2 staff (1 based in Glangwili Hospital) to start in mid-April. This will be useful for the transportation of MHA patients and discharge to home/inter-ward transfers;
- Psychiatric Liaison Services was continuing with a further 2 Senior Nurses and ANP recruited. A pilot phase is continuing in Carmarthenshire which would then expand to other counties;
- SCAMHS have out of hours teams working as part of the team across all ages and are based within the Liaison team;
- Maintaining regular treatment plans and using RAG rating system to determine contact and use of virtual equipment and telephone contact with patients currently on waiting lists;
- Closure of Day Units has increased risk particularly to learning disability patients and this continuing to be reviewed with the local authorities and it is hoped with the continuing success of the vaccination programme, units will begin to re-open gradually;
- MH Service Improvement Funds were received later in the year and were able to be applied effectively across SCAMHS and AMH to integrate sustainable services and improve services in line with the Covid needs and longer term transformation. Currently planning for next year and expecting the funding confirmation within the next 4-6 weeks and have met as an internal scrutiny to identify where to pinpoint funding.
- Older Adult Mental Health reported high levels of shielding and isolation across the population with high acuity across the board with limited capacity due to inpatient wards and care home placements due to Covid-19. Some funding was received from Welsh Government in November and some underspend in other funding enabled AgeCymru to provide services, including a Sit-In service which provided meaningful contact for patients;
- Commissioning also received £200,000 from Welsh Government (to be fully used by March 2021) which created multi-agency (including third sector) 8 service level agreements, 9 community

based including advocacy, digital counselling (Kooth – online counselling for young people whilst on waiting lists) and mens' groups.

Mrs Delyth Raynsford contracted all mental health teams working and changing practices throughout the pandemic.

Mrs Liz Carroll echoed that despite the pandemic enormous service improvement has been achieved and commended the way in which different services have worked together. Adult Mental Health has withstood provision in throughout the pandemic and community and inpatient teams have been working hard together and this should be noted.

Mr Andrew Carruthers noted that it had been a year of challenge and difficulty but significant progress had been made towards the longer term ambition for the Service. The impact on MH Services should not be underestimated and it is not yet known what will happen in the longer term. As in other parts of the Healthboard and service response in terms of acute operational response, MH&LD have had significant challenges and pressures. Teams have responded and have managed outbreaks. It should be acknowledged that the response to the pandemic is not just Acute and A&E. Mr Carruthers extended thanks to all and their teams for all the work done over the year and continuation over next phase.

Mr Ken Jones acknowledged that whilst some approval processes had been easier navigated which helped moved things forward (ie 7 day week working), cultural change is needed. Repositioning of MHLD in funding aspects and asked if there is any support for additional funding from existing resources to be directed through to MHLD to address the expected increase in demand.

Mrs Liz Carroll responded that we should avoid creating a mental health situation and need to focus on Mental Wellbeing and Resilience. People will be facing austerity and will require good signposting and enabling. Mrs Liz Carroll reported meeting the Pandemic Leads group fortnightly and there is a desire to create some services equitable to all, across the different Healthboards. National work is being undertaken (which the Triumvirate contribute to). Workforce are retaining good practice and additional service capacity. Developing services across advocacy and support enabling, which will mean that not all patients will need to come into secondary services. Wellbeing and Resilience rather than MH will be more positive communication for population.

A further discussion continued which included, but was not restricted to:

- Early involvement of children and young people with education services relating to wellbeing and resilience;
- Inclusion of solutions from carers to also influence commissioning;
- Continuing tier 0 plans, to include discussions with local authority, third sector, social care and education.
- Audit of full commissioning process (current timeline of November 2022);
- How patients currently on waiting lists (pre-pandemic) will receive interventions due to significant delays in assessment;

	<ul style="list-style-type: none"> • Challenges using virtual platform for assessments; • Non substantive workforce for Integrated Autism Service raised with Welsh Government; • Support to families of children and young people who have been on a waiting list but then do not receive a diagnosis of ASD but specific needs remain. Challenge for the service provision which adds to the complexities of the issues and the number of patients on the waiting list. 	
	The Committee NOTED the content of the Transformation Update Report.	

MHLAC(21)5.1	Annual Work Plan	
	The Annual Work Plan 2020-21 was received and approved.	
	The Committee NOTED the Annual WorkPlan 2020-21.	

MHLAC(21)6.1	For Information	
	Mental Health Act Review Summary Any feedback on the Review to be provided to Mrs Sarah Roberts by 12 th March 2021.	

MHLAC(20)8	Any Other Business	
	None raised.	

MHLAC(20)9	Date, Time and Venue of Next Meeting	
	The next meeting of the Mental Health Legislation Assurance Committee will be held on Thursday 3 rd June 2021 at 9.30am via MS Teams.	