

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

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| DYDDIAD Y CYFARFOD: DATE OF MEETING: | 17 th September 2019 |
| EITEM AR YR AGENDA: TITLE OF REPORT: | Mental Health Legislation Assurance Committee Quarterly Performance Report. Quarter 1, April - June 2019 |
| ARWEINYDD CYFARWYDDWR: EXECUTIVE LEAD: | Joseph Teape, Deputy CEO and Executive Director of Operations. |
| SWYDDOG ADRODD: REPORTING OFFICER: | Ms Liz Carroll, Director MH&LD, Lead Officer |

**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 the paper is to present to the Mental Health Legislation Assurance Committee the quarterly Mental Health Performance Report in relation to statutory mental health legislation in Wales including:

- The Mental Health Act (1983), as amended;
- 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 legislation.

Cefndir / Background

This Report provides assurance in respect of the work that has been undertaken by Mental Health and Learning Disabilities (MHLDD) Services during the quarter, that those functions of the Mental Health Act 1983 (the Act), as amended, and the Mental Health (Wales) Measure 2010 (the Measure) which they have delegated to officers and staff, are being carried out correctly; and that the wider operation of the 1983 Act and the Measure in relation to the Local Health Board's area is operating properly.

The hospital managers must ensure that patients are detained only as the Act allows, that their treatment and care fully comply with it, and that the patients are fully informed of, and are supported in exercising, their statutory rights. Hospital managers must also ensure that a patient's case is dealt with in line with other legislation which may have an impact, including the Human Rights Act 1998 and the Data Protection Act 1998.

The Terms of Reference of the Committee itself require the submission of a quarterly report to the Board to summarise the work of the Committee and identify how it has fulfilled the duties required of it. Regulations permit the Hywel Dda University Health Board to delegate functions to committees or sub-committees whose members need not be members of the Board. However, the Board retains the ultimate responsibility for the hospital managers' duties.

This report is prepared following the quarterly meeting of the Mental Health Legislation Scrutiny Group. 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 Committee's attention.

Assesiad / Assessment

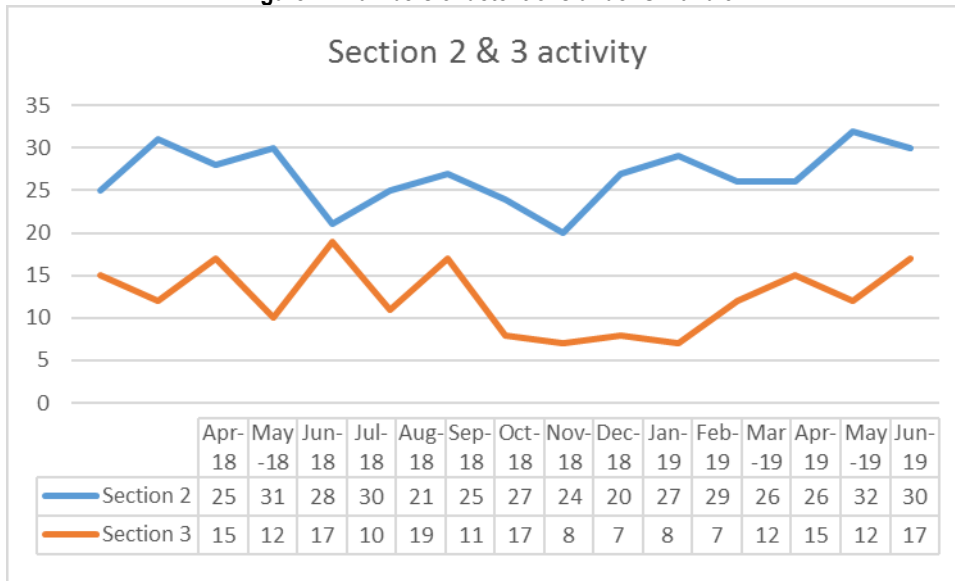
This Quarterly report outlines how the Mental Legislation Assurance Committee has complied with the duties through the Terms of Reference set, and also identifies key actions to address developments.

The Mental Health Act (1983)

Any exceptions highlighted in the Mental Health Act activity report are intended to raise the Committee's awareness of matters relating to the functions of hospital managers and give assurance that the care and treatment of patients detained in Hywel Dda University Health Board and those subject to a community treatment order is only as the Act allows. Rates of detention under different sections of the MHA typically fluctuate between each quarter therefore only significant points are highlighted here. A breakdown of MHA monthly performance can be seen in the performance dashboard to which there is a separate link.

Section 2¹ and Section 3² are the most commonly used sections of the Act in the detention for assessment and treatment of individuals suffering from a mental disorder.

Figure 1 - Numbers of detentions under S.2 and 3

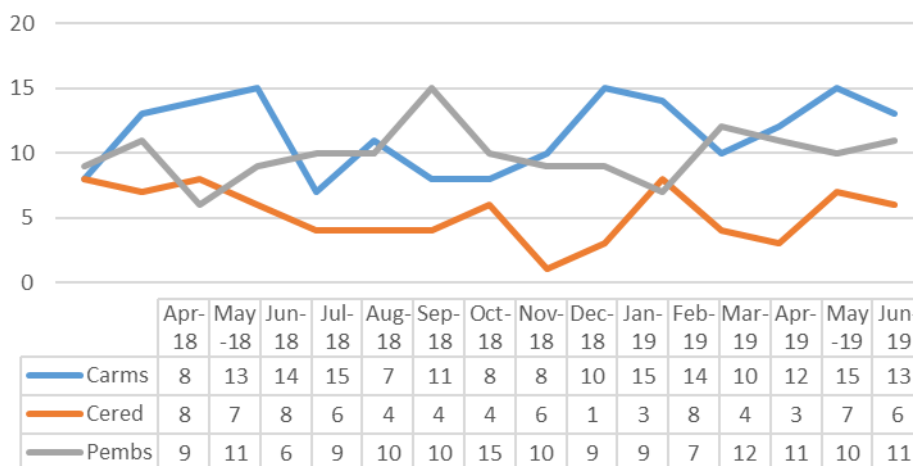


- Use of section 2 has increased 88 compared to 82 for the previous quarter
- 47 patients were admitted direct from the community
- 5 patients were transferred in from another hospitals outside the health board
- 29 patients went on to Section 3 for treatment which is an increase on previous quarters.

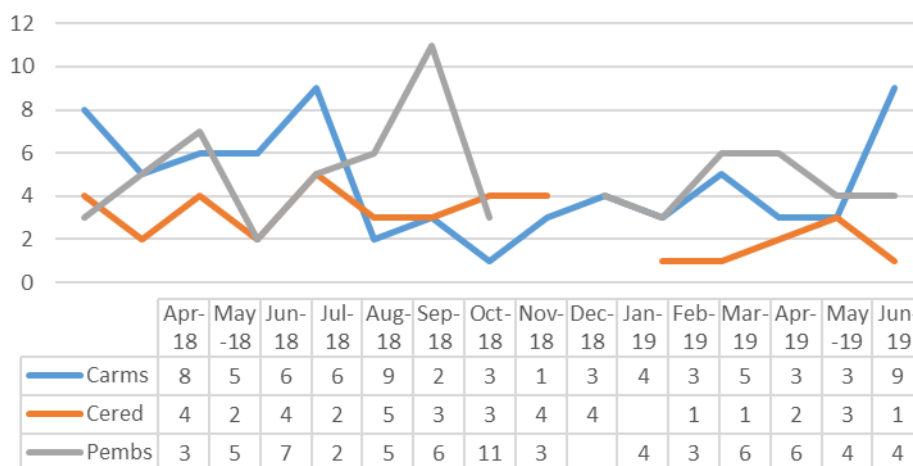
¹ Section 2 of the Act allows for a period of detention in hospital for up to 28 days for assessment and treatment.

² Section 3 of the Act allows for a period of detention in hospital for up to six months for treatment and may be renewed.

Section 2 activity by County

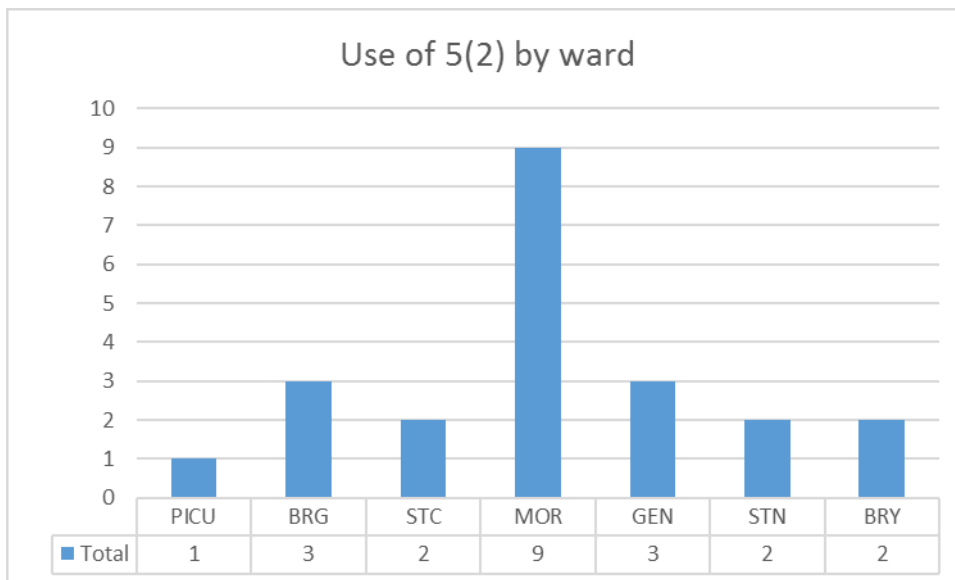
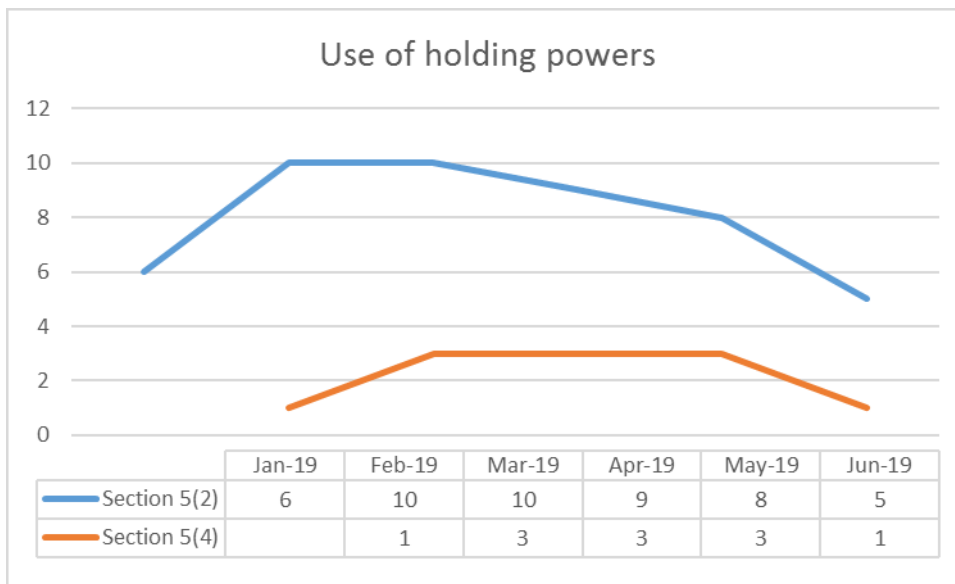


Section 3 activity by county



- Use of Section 3 has increased 35 compared to 27 for the previous quarter
- 22 patients subject to Section 2 had their sections converted to Section 3
- 6 patients were detained to older adult wards
- 2 patients were transferred out of Hywel Dda to specialist placements

Figure 2 – Number of detentions under Section 5



Section 5(2) – used by Doctors in both mental health and general hospital settings to detain an in-patient for up to 72 hours to allow for a mental health act assessment to take place.

- Use of this holding power has decreased 22 occasions compared to 26
- Used in a general hospital setting on 3 occasions
- 18 assessments were carried out within 60 hours
- 16 of those patients were further detained on Section 2 or 3

Section 5(4) – used by mental health and learning disability nurses in mental health in-patient settings for up to 6 hours to allow for a further assessment to take place.

- Use of this holding power has increased 7 occasions compared to 4
- All patients were further detained under the Mental Health Act following assessment

Detention without authority or Invalid Detentions

- 142 statutory documents were medically scrutinised
- 73 rectifiable errors were made on documents - corrections carried out within the statutory time limits (14 days) Nurses errors 25, Doctors errors 23 and AMHP errors 25
- There were no invalid detentions

The use of Section 136³

The number of occasions that Section 135/6 has been used with the UHB has decreased compared to the previous quarter (48 occasions compared to 70). Following assessment fifteen patients were detained on further sections of the Mental Health Act. The Section 136 activity is discussed at the Section 136 review group. Section 135(1) was used not used.

Figure 2 - Number of S.135/6 assessments

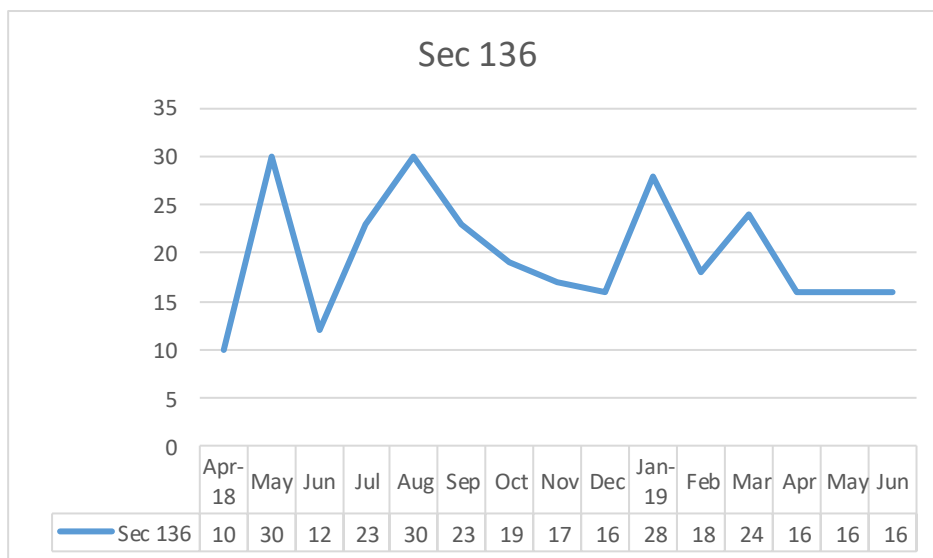
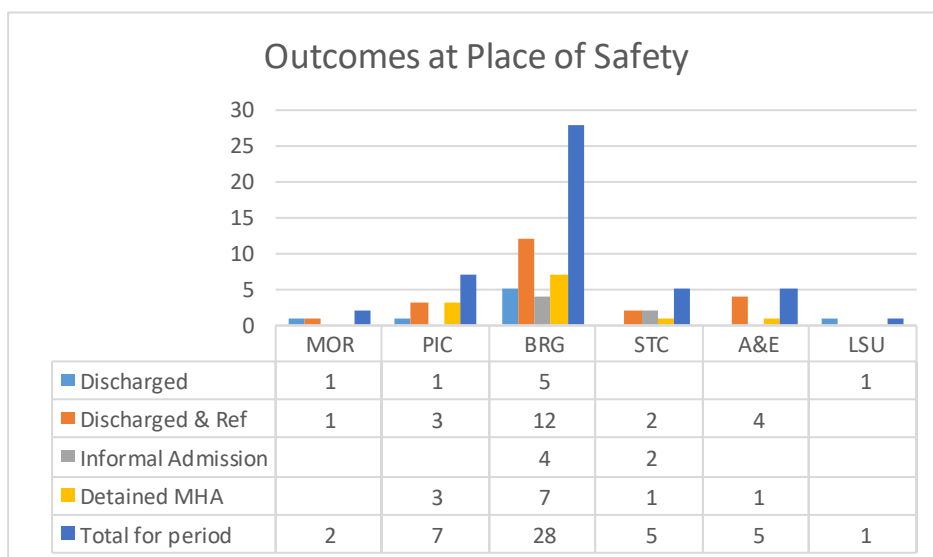


Figure 3 - Breakdown of S.136 assessments by Place of Safety



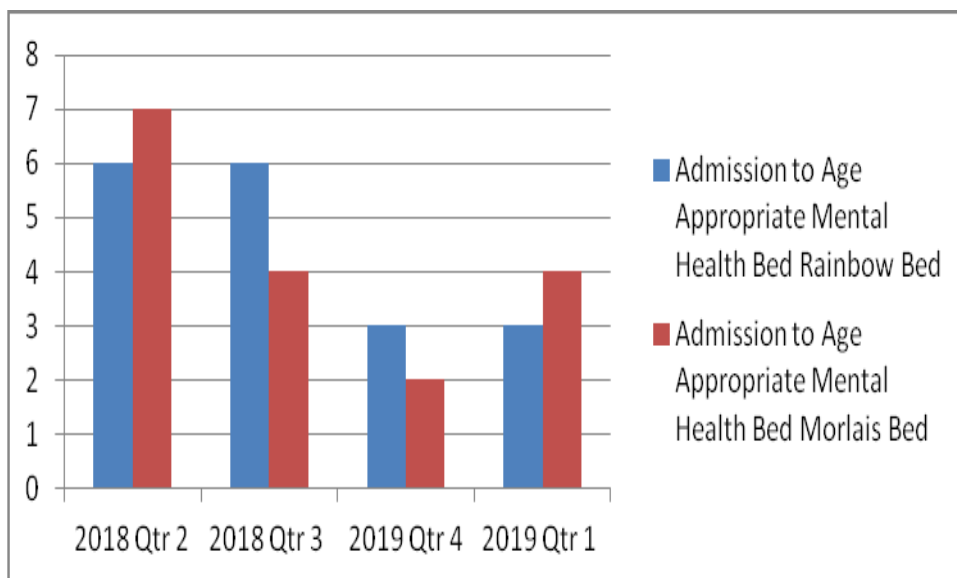
³ Section 136 allows a police officer to remove a person to a place of safety, if the person appears to be suffering from a mental disorder and to be in immediate need of care or control.

- Use of Section 136 has decreased - 48 occasions compared to 70 (28 to Bryngofal, 5 to St Caradog, 7 to PICU, 2 to Morlais, 1 to LSU and 5 to DGHs).
- Following Sec 136 assessments 12 patients were detained on further sections of the Mental Health Act
- 29 patients did not require admission and were discharged back into the community
- 46 assessments were carried out within 24 hours

S-CAMHS admissions to age-appropriate beds

All admissions to the mental health bed must be reported, initially internally as a DATIX, and followed by a Serious Untoward Incident report to Welsh Government in line with the Welsh Governments Admission Guidance Document. All admissions receive a follow up appointment within five working days to monitor risk and provide support.

Figure 5 – Comparison Data 12 months - Age Appropriate Bed



Specialist CAMHS records 7 Admissions in total with 3 admissions to the Paediatric bed and 4 Admissions to the Adult Mental Health Ward (Morlais).

Exclusion of Visitors

There were no visitors excluded from visiting detained patients during Qtr 1.

Applications for Discharge to Hospital Managers and Mental Health Review Tribunal

16 (consistent with previous quarter) applications to the hospital managers resulting in 6 hearings taking place (1 hearing from an application made during Qtr 4)

The hospital managers heard 25 renewal hearings compared to 23 last quarter. The Code of Practice states renewal hearings should ideally be held before the section expiry date.

1 application for discharge was made by a nearest relative– this was barred by the RC however the relative then withdrew his application

There has been 1 discharge by the Hospital Managers during this quarter.

There were 63 applications/referrals to the Mental Health Review Tribunal resulting in 30 hearings taking place

There have been 3 discharges by the MHRT (all section 2 – one immediate and two deferred)

The Mental Health (Wales) Measure 2010

The Mental Health (Wales) Measure 2010 is reported to the Committee on a quarterly basis in order to provide assurance that activity is closely monitored and that practice is compliant with the requirements of The Measure. 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 of the Measure is monitored in two parts, Target 1 and Target 2 as detailed in the table below. Performance is being monitored by the Head of Adult Mental Health Services with the LPMHSS Team Leaders.

| PART 1 | Detail | APR 2019 | MAY 2019 | JUN 2019 |
|-----------------|---|-----------------|-----------------|-----------------|
| Target 1 | 80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral | 93.4% | 87.3% | 94.3% |
| Target 2 | 80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS | 89.9% | 86.3% | 88% |

Part 2 – Care and Treatment Planning

| PART 2 | Detail | APR 2019 | MAY 2019 | JUN 2019 |
|------------------|--|-----------------|-----------------|-----------------|
| Measure 1 | 90% of LHB residents who are in receipt of secondary mental health services (all ages) to have a valid CTP | 90.9% | 91% | 91.6% |

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

| PART 3 | Detail | APR 2019 | MAY 2019 | JUN 2019 |
|------------------|---|-----------------|-----------------|-----------------|
| 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% |

Part 4 – Independent Mental Health Advocacy

| PART 4 | Detail | APR 2019 | MAY 2019 | JUN 2019 |
|--------|--|----------|----------|----------|
| | 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%) | 97.2% | 94% | 100% |

The UHB was not compliant with part 4 of the Measure for two months. There have been several vacancies within community teams and high absence rates. Health and local authority staff are taking joint responsibility for meeting targets. Learning Disability and CAMHS numbers are very low.

Argymhelliad / Recommendation

- To discuss the Mental Health Legislation Assurance Committee Quarterly Performance Paper.

| Amcanion: (rhaid cwblhau) Objectives: (must be completed) | |
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| Cyfeirnod Cofrestr Risg Risk Register Reference: | 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 Statement | <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 |
| 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 | Prevention – can you evidence that this work will prevent issues or challenges within, for example, service delivery, finance, workforce, and/or population health? |

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| Essentials Guide | Integration – can you evidence that this work supports the objectives and goals of either internal or external partners? |
| | Collaboration – The Mental Health Legislation Assurance 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: | |
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| Ar sail tystiolaeth: Evidence Base: | Agendas, papers and minutes of the Mental Health Legislation Assurance Committee, Power of Discharge sub committee and scrutiny group |
| Rhestr Termau: 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 Mental Health Operational 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: | Non-compliance with the Mental Health Act could result in legal proceedings being brought against the Health Board who is the detaining authority. |

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| Enw Da: Reputational: | Not Applicable |
| Gyfrinachedd: Privacy: | Not Applicable |
| Cydraddoldeb: Equality: | Not Applicable |