

**Mental Health Capacity and Compliance Committee (MHCCC)  
Minutes of the meeting held on 4.11.22 via Teams**

<b>Present:</b>	
Lucy Reid	Health Board Vice Chair (Chair)
Cheryl Carlisle	Independent Member
John Gallanders	Independent Member
<b>In Attendance:</b>	
Louise Bell	Assistant Director Mental Health
Louise Cunliffe	(Observing)
Michelle Denwood	Director of Safeguarding and Public Protection
Matt Joyce	The Deputy Director of Quality
Wendy Lapin	The Mental Health Act Manager
Paul Lumsdon	Interim Director of Nursing
Chris Lynes	Deputy Director of Nursing
Phil Meakin	Associate Director of Governance
Teresa Owen	Executive Director of Public Health
Philippa Peake-Jones	Head of Corporate Affairs (Minutes)
Peter Roots	Clinical Director / CAMHS Consultant Psychiatrist
Alberto Saimoiraghi	Consultant Psychiatrist/Medical Director
Helena Thomas	HEIW

<b>Agenda item</b>	<b>Action</b>
<p><b>MHA22/46 Welcome and apologies</b></p> <p><b>MHA22/46.1</b> The Chair welcomed everyone to the meeting.</p> <p><b>MHA22/46.2</b> Apologies were received from Chris Stockport, Executive Director of Transformation and Planning, Angela Wood, Executive Director of Nursing and Midwifery, Iain Wilkie, Interim Director of Mental Health.</p> <p><b>MHA22/46.3</b> The Consultant Psychiatrist/Medical Director advised that he needed to leave the meeting between 10:00 – 10:45.</p>	
<p><b>MHA22/47 Declarations of Interest</b></p> <p><b>MHA22/47.1</b> No declarations of interest were received.</p>	
<p><b>MHA22/48 Minutes of the last meeting held on 29.7.22 to be approved.</b></p> <p><b>MHA22/48.1</b> The minutes were approved as an accurate record of the meeting held on 29 July 2022.</p>	
<b>MHA22/49 Action Log</b>	

<p><b>MHAC22/49.1</b> The summary action log was reviewed and updated accordingly.</p>	
<p><b>MHA22/50 Patient Story</b></p> <p><b>MHA22/50.1</b> The Committee received a carer story highlighting the difficulties she experienced while caring for her husband with dementia, the deterioration of his condition and interactions with the Mental Health Team.</p> <p><b>MHA22/50.2</b> The Committee noted that to ensure the voice of an un-paid carer was heard, the Patient and Carer Experience Team continue to capture carer stories to share with services for learning.</p> <p><b>MHA22/50.3</b> NEWCIS and Carers Outreach are now based in the PALS Hubs across sites weekly, working very closely with PALS to promote their services to both patients and carers.</p> <p><b>MHA22/50.4</b> BCUHB are currently in discussions with Carers Trust about looking to pilot the Triangle of Care model within the Health Board. A model that is currently being followed by English NHS Trusts but not in Wales so the Health Board would be the first to roll this model of good practise out. The Triangle of Care model is an approach to involve carers in at the earliest stages possible in the patients care. We would look to pilot this within the mental health service initially.</p> <p><b>MHA22/50.5</b> Independent Members raised concerns at the case presented to them questioning where the carers assessment had been but noting what was now in place to ensure this did not happen again.</p> <p><b>MHA22/50.6</b> The Deputy Director of Quality advised that the Triangle of Care model being trailed in the Health Board would be the first time this had been seen in Wales.</p> <p><b>MHA22/50.7</b> An Independent Member queried if those from the third sector carers services sitting within the discharge teams were being utilised. The point of practical help for carers was highlighted rather than leaflets.</p> <p><b>MHA22/50.8</b> IT was agreed that an example of carers using the Mental Health Services should be brought back under the Patient and Carers Experience Report to the March QSE.</p> <p><b>MHA22/50.9</b> It was agreed that the CAMHS update should paper be put in the right place within the agenda pack.</p>	<p>MJ</p> <p>PPJ</p>
<p><b>MHA22/51 Approval of All Wales Approved Clinicians and Section 12 (2) Doctors – Executive Medical Director</b></p> <p><b>MHA22/51</b> The Committee noted for assurance purposes that appropriate governance arrangements, processes and activities were in place to underpin the</p>	

approval and re-approval of Approved Clinicians and Section 12(2) Doctors in Wales.	
<p><b>MHA22/53 Deprivation of Liberty Safeguards quarterly report</b></p> <p><b>MHA22/53.1</b> The Director of Safeguarding presented the quarterly report noting that Welsh Government money was being used, that there was an improvement on the back log of Deprivation of Liberty applications and that on a national footprint the Health Board was the most improved. Detail was shared about the inaccuracies and errors in documentation and how this was being acted upon immediately.</p> <p><b>MHA22/53.2</b> A discussion took place around a Court of Protection Deprivation of Liberty case noting that a plan is in place to review governance at the forthcoming Local Partnership Forum.</p> <p><b>MHA22/53.3</b> Attendees discussed the training programme from Welsh Government noting that the final code of practice was yet to be agreed.</p> <p><b>MHA22/53.4</b> A discussion took place around the delays in dealing with the Deprivation of Liberty's, staffing, funding implications including the IMNCA grant.</p> <p><b>MHA22/53.5</b> It was resolved that the Committee:</p> <ol style="list-style-type: none"> <li>1. Accepted the Deprivation of Liberty Safeguards Quarterly Report and the identified activity for the period of Q2 2022-23.</li> <li>2. Received the Deprivation of Liberty Safeguards Action Plan and progress.</li> <li>3. Accepted the position in preparation for the implementation of Liberty Protection Safeguards (LPS).</li> </ol>	
<p><b>MHA22/54 Associate Hospital Managers Update Report</b></p> <p><b>MHA22/54.1</b> The Mental Health Act Manager presented the report. It was noted that since July, patients have been asked how they want their hearings to be held, there had been 28. The theme identified within the report was the lack of attendance from the Local Mental Health Teams, which had been raised in the Power of Discharge Chairs Report. The Committee noted that for the next meeting an audit of the patient feedback forms would be included to identify if patients who had attended were happy with the process of the meeting. The Hearing kpi's ad improved with 82% of the meetings being held. It was noted that iPad's had been distributed and that it was essential that everyone who needed a laptop should be able to have access to one.</p> <p><b>MHA22/54.1</b> It was resolved that the Committee noted the report.</p>	
<p><b>MHA22/55 Mental Health Act Performance Reports</b></p> <p><b>MHA22/55.1</b> The Mental Health Act Manager presented the report, highlighting that the report covered a four-month period due to a change in meeting dates.</p>	S

<p>The Committee noted that there had been two lapses in Section 2's which were detailed in the report, doctors had been included in weekly emails to clarify what sections were due to expire that week, as clinicians were previously excluded. The expired 136 was highlighted and the explanation as to why noted.</p> <p><b>MHA22/55.2</b> The Mental Health Act Manager identified that there had been a decrease in errors and that the benchmarking report highlighted this, the committee noted that the benchmarking report highlighted that the Health Boards Standards were higher.</p> <p><b>MHA22/55.3</b> With regards to 136 suites, it was noted that there had been a number of young people held and that a number of detentions were long. These were being investigated and dated. Further clarification was highlighted around a couple of very complex cases with a task and finish group being set up to understand the detail and a better pathway. The Interim Director of Nursing and Criminal Justice Liaison Service Manager advised that they would like to be involved in the review. Following discussion, it was agreed that the aim was to ensure that there is the best provision for young people.</p> <p><b>MHA22/55.4</b> It was resolved that following discussion the Committee noted the report.</p>	
<p><b>MHA22/56 Mental Health Legislation Risk Register</b></p> <p><b>MHAC22/56.1</b> The Associate Director of Governance presented the risk register. It was agreed that the level of reporting was not required at the Mental Health Act Committee, only the actual risk as QSE had oversight. The Committee reviewed the risks in appendix 1 and agreed the scoring. The risks relating to ligatures were to be discussed at the December 2022 meeting.</p> <p><b>MHAC22/56.1</b> It was resolved that the Committee noted the report.</p>	
<p><b>MHA22/57 Quarterly Mental Health Act rolling Audit Report</b></p> <p><b>MHA22/57.1</b> The Mental Health Act Manager presented the quarterly Audit Report noting that there had been some improvement and a few declines, improvements being in the areas of patient's rights being recorded and in their language of choice and that information being visible in their notes. Cefni was seeing a frequent decline had further measures and further input had been given by the Mental Health Act Manager, which upon re-audit, showed vast improvements along with a new Ward Manager. Further detailed feedback was reported on other sites.</p> <p><b>MHA22/57.2</b> The Executive Director of Public Health advised that she was grateful to the team for the additional work that had been put in with the West and that she would liaise with colleagues to give an update on care and treatment plans at the next meeting.</p> <p><b>MHA22/5.1</b> It was resolved that the Committee noted the report.</p>	TO
<p><b>MHA22/58 Consideration of any HIW/Inspection reports/Audit reports</b></p>	

<p><b>MHA22/58.1</b> The Mental Health Act Manager presented the report noting that updates and monitoring of actions have been included. It was agreed that the report should continue to be received at the Committee until the actions are closed down. The Interim Director of Nursing advised that he would be meeting with the Deputy Director of Quality that afternoon to pick up the outstanding actions to ensure that the learning is in place and replicated across the whole of the Health Board.</p> <p><b>MHA22/5.2</b> It was resolved that the Committee noted the report.</p>	
<p><b>MHA22/59 Report on the Use of Restraints</b></p> <p><b>MHA22/59.1</b> The Interim Director of Nursing presented the report on restraints highlighting that all restraints were reported and broken down, he advised what was lacking was analysis and regular over view. It was noted that the Health Board needed to take a review on how this should be undertaken and look into safe wards as this was the best tool that could be utilised against restraints. The Chair advised that the Corporate Health and Safety team had been involved in restraint work and should be linked in.</p> <p><b>MHA22/59.2</b> The Interim Director of Nursing advised that he would like to pull together a small group with some Terms of Reference to take the matter forward, it was agreed that for Mental Health the group should report into the MHAC but for the wider work it should report into the QSE Committee.</p> <p><b>MHA22/59.3</b> It was resolved that the Committee:</p> <ul style="list-style-type: none"> <li>• Noted the activity on restraint across Mental Health wards since February 2022 to September 2022.</li> <li>• Recommended the establishment of a MHL D Restraint Reduction Group with the wider report on restraints returning to the QSE Committee</li> </ul>	PL
<p><b>MHA22/60 Policies</b></p> <p><b>MHA22/60.1 Admission to Hospital Policy under Part II of the Mental Health Act 1983</b></p> <p>The Chair advised that she felt further work was required with regards to the policy to enable clarity on what circumstances the policy is applied. It was agreed that further work would be done and cleared by Chairs Action if possible.</p> <p><b>MHA22/60.2 Section 17 Leave Policy</b></p> <p>The Committee reviewed the policy, concern was raised that different settings had different Section 17 Leave Policies and that it would make sense to join them up and have one. It was agreed that internal governance processes would be reviewed to ensure that they are correct and return this policy to the next Mental Health Act Committee.</p>	

<p><b>MHA22/60.2 It was resolved</b> that the Policies were not approved but that the Admission to Hospital Policy may be able to be signed off by Chairs Actin and the Section 17 Leave Policy should return to the Committee in February 2023.</p>	
<p><b>MH22/61 Court of Protection Report</b></p> <p><b>MH22/61.1</b> The Committee received the report nothing that there was nothing to highlight by way of escalation. The paper described the changes that have been made including the formation of a new legal team.</p> <p><b>MH22/61.2</b> The Committee noted that there were no individual cases to be escalated and all existing ones were being managed and that there were no budgetary implications albeit a significant amount of money is being spent on these matters.</p> <p><b>MH22/61.3</b> The risk on the Risk Register is about last minute requests and further work is being undertaken to strengthen this. It was noted the details of these matters could not be shared in an open meeting, and where appropriate or necessary should return in private.</p> <p><b>MH22/61.4</b> It was noted that there was a learning event taking place Chaired by the Interim Deputy Medical Director which depending upon the outcome could report into either MHAC or QSE.</p> <p><b>MH22/61.5 It was resolved</b> that the Committee noted the report.</p>	
<p><b>MH22/62 Chair's Assurance Reports</b></p> <p><b>MH22/62.1</b> The Chairs Assurance Reports were received from the Power or Discharge Group noting that the Terms of Reference had been updated and highlighting expressions of interest.</p> <p><b>MH22/62.2 It was resolved</b> that the Committee approved the Terms of Reference.</p>	
<p><b>MH22/63 Issues Discussed in Previous Private Session</b></p> <p><b>MH22/63.1</b> It was noted that there was no private session held at the last meeting.</p>	
<p><b>MH22/64 Date of next meeting</b></p> <p><b>MH22/64.1</b> It was noted that the next meeting of the next Mental Health Act Committee would take place on 10 February 2023</p>	