

Mental Health Act Committee (MHAC)

DRAFT Minutes of the Meeting Held on 8.12.20 via Webex

Present:

Lucy Reid Health Board Vice Chair (Chair)

Jackie Hughes Independent Member (Co-opted member)

In Attendance:

Dr Alberto Salmoiraghi Consultant Psychiatrist/Medical Director, Mental Health & Learning

Disabilities (MHLD)

Alison Cowell Assistant Area Director Central Area – Child & Adolescent Health

Services (CAMHS)

Frank Brown Associate Hospital Manager

Heulwen Hughes All Wales Approval Manager for Approved Clinicians & Section 12(2)

Doctors

lain Wilkie Interim Director, MHLD

Jody Evans Secretariat

Liz Jones Assistant Director, Corporate Governance

Lynda King All Wales Project Support Manager

Marilyn Wells

Mark Jones

Matthew Joyes

Regional Child and Adolescent Mental Health Services Clinical Lead

Interim Senior Head of Service Adult Social Care, Wrexham Council

Acting Associate Director of Quality Assurance & Assistant Director Of

Patient Safety & Experience

Michael Openshaw

Michelle Denwood

Mike Smith

Unison Health & Safety Officer

Associate Director of Safeguarding

Interim Director of Nursing, MHLD

Rachel Turner Royal College of Nursing, Accredited Steward

Simon Evans-Evans Interim Director of Governance

Susan Hamilton Consultant in Child & Adolescent Psychiatry

Teresa Owen Executive Director, Public Health & Acting Deputy Chief Executive

Wendy Lappin Mental Health Act Manager, Administration

AGENDA ITEM DISCUSSED	ACTION BY
MHAC20/19 Welcome, opening remarks and apologies	
MHAC20/19.1 The Chair welcomed everyone to the meeting and confirmed that apologies had been received from Cheryl Carlisle, Independent Member, Eifion Jones, Independent Member, Hilary Owen, Head of Governance & Compliance, Chris Pearson - Safeguarding Specialist Practitioner/Deprivation of Liberty Safeguarding Manager, Dr Chris Stockport, Executive Director Primary & Community Care, Ben Thomas, Consultant Nephrologist, and Debra Hickman, Acting Executive Director of Nursing & Midwifery.	

MHAC20/19.2 The Committee welcomed Jackie Hughes - co-opted Independent	
Member to the Committee, in the absence of Eifion Hughes - Independent Member. The Chair thanked everyone for making themselves available at the	
rescheduled meeting.	
MHAC20/19.3 The Chair welcomed two additional attendees to the Committee namely Dr Susan Hamilton - Consultant In Child & Adolescent Psychiatry and Marilyn Wells - Regional Child and Adolescent Mental Health Services Clinical Lead.	
MHAC20/19.3 The Chair informed members that subject to a wider governance review being undertaken, it was envisaged that the Power of Discharge (POD) Sub-Committee and Mental Health Act Committee would form a combined Committee. The Chair informed members that their input and suggestions relating to the Terms of Reference, would be welcomed.	ALL
MHAC20/20 Declarations of Interest	
MHAC20/20.1 None noted.	
MHAC20/21 Previous minutes of the meeting held on 19.10.20	
MHAC20/21.1 The minutes were confirmed as an accurate record of the previous meeting.	
MHAC20/22 Matters arising and Review of Summary Action Log	
MHAC20/22.1 The Summary Action Log was reviewed and updated accordingly.	
MHAC20/23 Draft minutes of the Power of Discharge Sub-Committee meeting held on 19.10.20 and verbal update from the earlier meeting	
MHAC20/23.1 The Mental Health Act Manager presented a verbal account of relevant feedback from the Sub-Committee meeting, held earlier that day.	
MHAC20/24 Action Plan item/update - Regarding under 15's detentions and of emergency assessments being undertaken by adult psychiatrists. Action plan item:MHAC20/9.4	
MHAC20/24.1 The Assistant Area Director - Central Area, Childrens Services provided the update to the Committee. The update included annual data and attendance detail, in relation to sections by age profile. The report overview also included progress on the development of the action plan in place with MHLD, along with the successful position of the Welsh Government (WG) crisis bid. The Assistant Area Director confirmed that a meeting had taken place to discuss the forward plan of actions required, along with the identification of the key elements, in order to continue to develop the crisis pathway management.	

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MHAC20/24.2 The Chair then invited questions. The surge in activity as a direct impact of Covid restrictions was highlighted. The Assistant Area Director confirmed that the backup plan was initiated and the team was working closely with WG and Welsh Health Specialised Services, with regards to the national bed capacity challenges. It was noted that the community and inpatient child and adolsecent teams are working closely together to provide care in the community to young people requiring admissions, in order to manage the risks while waiting for bed capacity.	
MHAC20/24.3 The Committee recognised the key importance and impact of the contributions from the Local Authority, along with staff shortages with regards to Child Psychiatrists. It was confirmed that the Consultant Psychiatrist/Medical Director MHLD was meeting with the CAMHS Leads, to develop the Workforce Strategy and to continue to establish good governance between Children's Services and Adult Mental Health.	
MHAC20/24.4 The Committee noted the robust plan and the update regarding the children and young people's crisis pathway, number of section 136 attendances, and the plans to improve services.	
MHAC20/25 Action Plan item/update - Approved Clinicians & Section 12(2) Doctors (Action plan items MHAC19.08 and MHAC20/14.2)	
MHAC20/25.1 The Consultant Psychiatrist/Medical Director MHLD presented the status update to the Committee. The detail included information in relation to Health Boards in Wales and doctor provisions, along with the number of approved Section 12(2) medics being available to facilitate assessments under the Mental Health Act, along with the current practices and mitigations.	
MHAC20/25.2 The Chair thanked the Consultant Psychiatrist/Medical Director for the update and referred to the original action points, as stated within the historical MHAC Action Plan. It was agreed that the action had still not been answered in its entirety to date. The Chair expressed disappointment that this issue remains unresolved despite repeated requests for it to be addressed and that she was concerned about the apparent lack of progress and ownership between the relevant departments.	
MHAC20/25.3 It was acknowledged and agreed by the Committee that the issues were not solely the responsibility of one area and that the action was a Health Board wide issue. The Lead Executive stated that the action requirements would therefore be taken via the Executive Team, in order to work through the recommendations and issues previously raised and fed back collectively.	то
MHAC20/26 Approval for All Wales Approved Clinicians and Section 12(2) Doctors)	
MHAC20/26.1 The All Wales Approval Manager for Approved Clinicians and Section 12(2) Doctors presented the report and asked the Committee to note the governance arrangements, processes and activities in place that underpin the	

approval and re-approval of Approved Clinicians and Section 12(2) Doctors in Wales. MHAC20/26.2 The Committee received the report and questions were raised with regards to training and development. It was confirmed that the All Wales Approval Manager had continued to advertise when and where the training takes place. It was raised by the Chair that mixed messages had been received in relation to the НН communication surrounding training and availability. The All Wales Approvals Manager agreed to address the miscommunication issue accordingly. MHAC20/26.3 A discussion took place in relation to GP applicants and on applications to date. It was also agreed that GP recruitment was not the sole resolution. The All Wales Manager informed the Committee of the support offered to applicants and the Committee thanked the All Wales Manager for the update. MHAC20/26.4 The Committee noted the report for information. MHAC20/27 Deprivation of Liberty Safeguards (DoLS) Update Report MHAC20/27.1 The Associate Director of Safeguarding presented the update report to the Committee. Particular clarification was provided in relation to accountability and the managing authorities within the key domains in the report. The Quarter one and two report report focused upon the DoLS activity across the organisation, which evidenced at 8% of the DoLS activity being within the MHLD Division. Assurance and evidence was provided to highlight the activities that was in place to support clinical practice and mitigate against unlawful detention of service users. A discussion also took place regarding the findings of the documentation audit, which reviewed the MHLD DoLS applications, and it was noted that the full circle approach highlighted the actions in place, to provide assurance and to support improved practice. MHAC20/27.2 It was also stated that the Quality, Safety and Experience Committee, (along with the four safeguarding forums), also receive regular DoLS updates. The Chair suggested that the reporting arrangements should be reviewed to ensure there is not any duplication and that responsibilities are clear. The Interim SEE Director of Governance agreed to review and take forwards. MHAC20/27.3 The Executive Lead and Committee Chair thanked the Associate Director for the clarification presented to the Committee. MHAC20/27.4 The Committee received and accepted the report MHAC20/28 Mental Health Act Performance Report MHAC20/28.1 The Mental Health Act (MHA) Manager presented the report and referred to the earlier presentation, at the POD Sub-Committee meeting that day. The MHA Manager explained that the data included compliance with the Mental Health Act requirements within the division for the period from July to October

2020, due to a change in the reporting schedule, to ensure that the most up to date

information was provided to both the Sub-Committee and MHAC. It was recognised within the report that there had been an overall reduction of reported errors within the reporting period.	
MHAC20/28.2 It was agreed to include within future reports a caveat to cover any statistical variances.	
MHAC20/28.3 The Committee noted the report for the four month period.	
MHAC20/29 Healthcare Inspectorate Wales (HIW) Monitoring Report	
MHAC20/29.1 The MHA Manager provided an update against the action plans in the HIW report, and clarified that the findings were detailed within the appendices covering the twelve month period. A discussion took place and the Interim Divisional Director for MHLD confirmed that changes had been made at the Heddfan Unit, via the specific action plan and that sustained improvements would be implemented going forward.	
MHAC20/29.2 The Committee noted the report.	
MHAC20/30 Hospital Manager's Update Report	
MHAC20/30.1 The MHA Manager provided a verbal summary update, based on feedback from the earlier PoD Sub-Committee meeting regarding the activities of the Associate Hospital Managers during the quarter July to October 2020. The verbal update included details in relation to hearings, scrutiny, training, recruitment, forums and Key Performance Indicators.	
MHAC20/30.2 The Committee noted the verbal update.	
MHAC20/31 Any other business	
MHAC20/31.1 An Associate Hospital Manager stated that the AHMs had held a virtual meeting where several felt that their remuneration was overdue for an increase. It was confirmed that the Mental Health Act Manager and the Interim Director, Mental Health & Learning Disabilities were reviewing this issue.	
MHAC20/32 Issues of significance to inform the Chair's assurance report	
MHAC20/32.1 To be agreed by the Chair.	
MHAC20/18 Date of next meeting	
12 th March 2021 (It was noted that the North Wales Regional Partnership Board meeting was to take place on the same date in March, therefore the Chair and Lead Executive would discuss availability in due course).	TO/LR
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