



## **Mental Health Act Committee**

**Minutes of the Mental Health Act Committee held at 10:30am  
Friday 20<sup>th</sup> December 2019, in the Boardroom, Carlton Court**

### **Present**

Lyn Meadows	Independent Member – Chair
Lucy Reid	Independent Member and future Chair
Eifion Jones	Independent Member

### **In Attendance**

Alberto Salmoiraghi	Medical Director, MH&LD (VC)
Alison Cowell	Assistant Area Director – Children's Services
Frank Brown	Associate Hospital Manager
Heulwen Hughes	Approval Manager for Approved Clinicians (VC)
Francine Moore	Risk and Governance Lead, MH&LD
Lynda King	All Wales Project Support Manager (VC)
Wendy Lappin	Mental Health Act Manager
Jody Evans	Corporate Governance Officer – Secretariat

VC - VC facility had been made available for the Committee Meeting, due to prior commitments of those whom required usage of the facility.

It had been noted that the Attendance was Quorate.

Agenda Item	Action
<p><b>MHAC19/63 - Apologies, welcome and remarks</b></p> <p><b>MHAC19/63.1</b> The Chair welcomed everyone to the meeting. The Chair introduced Mrs Lucy Reid, as the newly appointed BCUHB Vice Chair and advised members that LR was to be the future Chair of the Mental Health Act Committee from March 2020.</p> <p><b>MHAC19/63.2</b> The Chair also welcomed Frank Brown, Associate Hospital Manager and Eifion Jones, Independent Member as a new member of the Committee.</p> <p><b>MHAC19/63.3</b> Apologies were received from Andy Roach, Mark Jones, Joan Doyle, Gill Harris, Rachel Turner, Deborah Carter and Cheryl Carlisle.</p> <p><b>MHAC19/63.4</b> The Committee noted the resignation of Christine Robinson and expressions of interest were being sought from the PoD Sub-Committee members in due course.</p> <p><b>MHAC19/63.5</b> A discussion ensued relating to the functions of the PoD Sub-Committee and MHA Committee regarding the duplication of some of the items reported. The need to streamline the Committees was agreed in order to optimise attendance, however it was noted that there had been previous discussions about this and the Health Board would need to ensure that both Committees were operating in accordance with their statutory requirements. The Corporate Governance Officer agreed to contact the Acting Board Secretary to clarify detail and actions which would require attention.</p> <p><b>RESOLVED</b>  <b>The Corporate Governance Officer would liaise with the Acting Board Secretary to establish opportunities to streamline the agendas of the Committees.</b></p>	<p>JE</p>
<p><b>MHAC19.64 – Declarations of Interest</b></p> <p><b>MHAC19.64.1</b> – There were no declarations of interest made at the meeting.</p>	

<p><b>MHAC19/65 - Minutes of last meeting and Matters Arising</b></p> <p><b>MHAC19/65.1</b> The minutes of the meeting held on 28<sup>th</sup> June 2019 were <b>approved</b> as an accurate record subject to one typographical amendment.</p> <p><b>MHAC19/65.2</b> The summary action log was reviewed and updated. In relation to action 19.08 Approved Clinicians and Section 12(2) Doctors Report, the Medical Director for MHLDS provided an update on the Task and Finish Group findings in relation to the availability of Section 12(2) doctors. A number of barriers to increasing numbers/recruitment had been identified by the group including defence costs and vacancy rates for consultant psychiatrists and GPs nationally. The report provided a number of helpful recommendations for the Health Board to consider. The Committee discussed the options presented and were supportive of these in principle. Members noted however that the Committee did not have the delegated authority to approve some of the solutions identified, for example the increase in fees.</p> <p><b>Resolved</b></p> <ol style="list-style-type: none"> <li>1. The paper would be presented to the relevant Committee of the Health Board for further consideration in accordance with the delegated authorities.</li> <li>2. The question of indemnity for GPs should be discussed and clarified with Welsh Risk Pool and Welsh Government as the provision of Section 12(2) doctors are core services</li> <li>3. Other options relating to MHA assessments would be explored as a way to manage the geographical challenges faced in North Wales</li> </ol>	<p>LS/AS</p> <p>AS</p> <p>WL</p>
<p><b>MHAC19.66 – Minutes of Power of Discharge Sub Committee</b></p> <p><b>MHAC19.66.1</b> The Minutes of the meeting held on 28 June 2019 were noted.</p> <p><b>MHAC19.66.2</b> The Mental Health Act Manager summarised an oral update from the Chair on relevant feedback from the Sub-Committee meeting held earlier on the 20 December 2019. The Committee were informed of a question raised by the PoD Sub Committee regarding the turnover of Responsible Clinicians. The Medical Director confirmed that the Health Board continued to experience challenges to recruitment and this was being managed. It was agreed that a briefing would be provided to the PoD Sub Committee on this issue.</p> <p><b>Resolved:</b> That the minutes of the Sub Committee were received and a briefing note on recruitment and medical staffing vacancies would be provided by the Medical Director to the next PoD Sub Committee.</p>	<p>AS</p>

<p><b>MHAC19/67 - Approval for All Wales Approved Clinicians and Section 12(2) Doctors)</b></p> <p><b>MHAC19/67.1</b> The Committee noted the arrangements for approval and re-approval of Approved Clinicians and Section 12(2) Doctors in Wales. The All Wales Approval Manager for Approved Clinicians and Section 12(2) Doctors then presented the report.</p> <p><b>MHAC19/67.2</b> The All Wales Approval Manager for Approved Clinicians and Section 12(2) Doctors informed the Committee of the four portfolios submitted. It had been noted that one portfolio had been approved and three portfolios would require further evidence. An influx of applications had been received, including from a nurse. Any applications requiring amendment had been returned.</p> <p><b>MHAC19/67.3</b> It was noted that an induction and refresher training session would take place in February 2020 and that further training had been arranged for the remainder of 2020 in both Cardiff and Wrexham. It was stated that the contract was place until March 2021. A member enquired as to whether there was a charge for attendance for non-employed Section 12(2) doctors. It was reported that there had been communication between the Director of Primary Care and Community Services and the Medical Director for MHL D querying whether independent contractors would be required to pay the cost to attend. It was agreed that this would be clarified outside of the meeting.</p> <p><b>MHAC19/67.4</b> The Approvals team were in the process of arranging the Mental Health Legislation Conference for 2020, to be held in March.</p> <p><b>MHAC19/67.5</b> Appendix 1 had also been referenced within the report concerning additions and removals to the all wales register of approved clinicians as dated from 7<sup>th</sup> September – 29<sup>th</sup> November 2019.</p> <p><b>RESOLVED</b> The report was received and noted and the fees for the Induction and Refresher Training for Section 12(2) doctors would be clarified.</p>	<p>HH</p>
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<p><b>MHAC19/68 - Consideration of any HIW/Inspection reports/Audit reports etc as appropriate to meetings remit.</b></p> <p><b>MHAC19/68.1</b> The Mental Health Act Manager presented the report detailing full updates in relation to the inspections conducted by Healthcare Inspectorate Wales within the last 12 months. The report covered findings in relation to the Mental Health Act and the Mental Health Performance Measure, as detailed within appendix 1. It was explained that the report highlighted that there had not been any immediate concerns. The inspections included the sites of:</p> <ul style="list-style-type: none"> <li>• Ty Derbyn CMHT Review</li> <li>• Cefni Hospital</li> <li>• Ablett Unit</li> <li>• Nant Y Glyn CMHT</li> <li>• Hergest Unit.</li> </ul> <p><b>MHAC19/68.2</b> The Mental Health Act Manager reported that the inspection of Cefni Hospital had been positive. The Ty Derbyn CMHT review report is due to be published in January 2020.</p> <p><b>RESOLVED</b> The Committee received and noted the report.</p>	
<p><b>MHAC19/69 - Hospital Manager's Update Report from Power of Discharge Sub-Committee for info only.</b></p> <p><b>MHAC19/69.1</b> The Mental Health Act Manager provided the update on the activities of the Associate Hospital Managers [AHMs] activity during the last quarter within the Division. The report provided details in relation to the AHM activity within the Division, which included Hearings, Scrutiny Training, Recruitment, Forums and Key Performance Indicators.</p> <p><b>RESOLVED</b> The Committee noted the report for information only.</p>	

<p><b>MHAC19/70 - Performance Report</b></p> <p><b>MHAC19/70.1</b> The Mental Health Act Manager presented the report on performance in relation to the Mental Health Act and Mental Health Performance Measures within the Division. The report detailed compliance against key sections of the legislative requirements of the Mental Health Act 1983, as amended 2007.</p> <p><b>MHAC19/70.2</b> Discussion ensued in relation to rectifiable error reporting as some of these documentation errors can affect the validity of the section. The Mental Health Act Manager advised the Committee that the Division undertakes quality checks against these requirements and action is taken where necessary. She clarified that they type of errors identified include only documenting the patient's first name and surname. It was further noted that inspections had been complimentary of paperwork and completion.</p> <p><b>MHAC19/70.3</b> A member asked if the data reported could include a 12-13 months rolling period in order to provide a trend analysis. The Mental Health Act Manager agreed to liaise with the Performance Directorate. It was also agreed to improve the data in relation to areas of concern and increases for CAMHS and Section 136 data.</p> <p><b>MHAC19/70.4</b> The Committee were informed that the CJLS (Criminal Justice Liaison Service) nurse recruitment had been completed with the staff starting to work within the Police Control Room. A previous report on the analysis of S136 had been produced by David O'Brien. It was agreed to invite the Criminal Justice Liaison Service Manager to the March meeting to present an update on the service.</p> <p><b>MHAC19/70.5</b> Members highlighted that the dates for the data reported were out of sync with other Committee and Board reports. It was agreed that this would be addressed in the future to ensure that the Committee received the most up to date information available. There was some discussion about the reporting of the Mental Health Performance Measures as members noted that the data was also reviewed by the Quality, Safety and Experience Committee. It was agreed that, subject to confirmation against reporting requirements, the Mental Health Measure would not be reported to this Committee in future.</p> <p><b>RESOLVED</b> The report was received and noted and the amendments requested to be actioned for the next Committee meeting.</p>	<p>WL</p> <p>March Agenda</p> <p>WL</p>
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<p><b>MHAC19/71 - Agree CoB for coming year</b></p> <p><b>MHAC19/71.1</b> The Committee considered the Cycle of Business for the coming year and approved the draft version with the inclusion of the Patient Story/Patient Safety Experience item being included within each committee meeting.</p> <p><b>RESOLVED</b> The cycle of business had been approved.</p>	
<p><b>MHAC19/72 - Issues of Significance to inform Chair's Report to Board</b></p> <p><b>MHAC19/72.1</b> The Chair agreed to raise any issues of significance with the Board.</p>	LR
<p><b>MHAC19.74 – Date of Next Meeting</b></p> <p><b>MHAC19/74.1</b> - 27th March 2020.</p>	