



**Mental Health Act Committee**

**Minutes of the Mental Health Act Committee held at 10:00am  
Friday 27<sup>th</sup> September 2019, in the Boardroom, Carlton Court**

**Present**

Marian Wyn Jones [Chair] Vice Chair, BCUHB  
 Cheryl Carlisle Independent Member  
 Lyn Meadows Independent Member

**In Attendance**

Alberto Salmoiraghi Medical Director, MH&LD [VC]  
 Alison Cowell Assistant Area Director – Children’s Services  
 Andy Roach Director MH&LD  
 Chris Pearson Safeguarding Specialist Practitioner/DoLS & MCA [VC]  
 Frank Brown Associate Hospital Manager  
 Heulwen Hughes Approval Manager for Approved Clinicians [VC]  
 Hilary Owen Head of Governance  
 Rachael Turner Ward Manager, Hydref Ward  
 Lynda King All Wales Project Support Manager [VC]  
 Wendy Lappin Mental Health Act Manager  
 Steve Forsyth Director of Nursing & Operations MH&LD  
 Jody Evans Corporate Governance Officer - Secretariat

Agenda Item	Action
<p><b>MHAC19.46 – Welcome and Apologies</b></p> <p><b>MHAC19.46.1</b> The Chairman gave a warm welcome and explained that the meeting would be the last of her Tenure Term as Chair. MWJ thanked members and attendees of the Committee for the ongoing support and work which had been undertaken within her term of office.</p> <p><b>MHAC19.46.2</b> – Apologies received from Joan Doyle, Lesley Singleton and Christine Robinson.</p>	
<p><b>MHAC19.47 – Declarations of Interest</b></p> <p><b>MHAC19.47.1</b> – There were no declarations of interest made at the meeting.</p>	

<p><b>MHAC19.48 – CANIAD – Patient Story</b></p> <p><b>MHAC19.48.1</b> AR presented the group with the verbal overview of the Patient Story <i>on behalf of LS</i>. The Committee fully acknowledged and appreciated the sensitivity of the experience that had been summarised by the patient. Following the presentation of the story a detailed discussion took place in relation to 136 admissions and the need for sharing the obvious lessons learnt. MWJ had also expressed thanks to CANIAD and the patient for sharing of the story.</p> <p><b>MHAC19.48.2</b> Following discussion, AR agreed to the Task and Finish Group being re-established to explore issues concerning 136's. It was noted that the group be utilised as the platform to re-engage, (whilst highlighting the requirement of the more focused approach on how the sections can actually effect those involved). The requirement to work in hand with the police had also been expressed. WL also agreed to raise the points noted with the Section 136-Monitoring Group.</p> <p><b>MHAC19.48.3</b> It had been agreed that the Patient Story's would continue to be a regular item upon the MHAC Agenda. It was confirmed that the Cycle of business would be updated accordingly.</p> <p><b>MHAC19.48.4</b> MWJ confirmed that a meeting was scheduled with the Police Commissioner to feedback the points raised.</p> <p><b>RESOLVED</b> The Patient Story had been noted.</p>	<p>AR / WL</p> <p>JE</p>
<p><b>MHAC19.49 – Minutes of last meeting and summary action log</b></p> <p><b>MHAC19.49.1</b> – The Minutes of the meeting held on 28<sup>th</sup> June 2019 agreed as an accurate record.</p> <p><b>MHAC19.49.2</b> – All actions were recorded therein.</p> <p><b>Resolved:</b> That the minutes of the Committee held on 28<sup>th</sup> June 2019 were received.</p>	
<p><b>MHAC19.50 – Minutes of Power of Discharge Sub Committee</b></p> <p><b>MHAC19.50.1</b> – The Minutes of the meeting held on 28<sup>th</sup> June were noted.</p> <p><b>Resolved:</b> That the minutes of the Sub Committee held on 28<sup>th</sup> June 2019 were received.</p>	
<p><b>MHAC19.51 – Membership and Terms of Reference</b></p> <p><b>MHAC19.51.1</b> – The Committee formally noted the resignation of Satya Schofield – Associate Hospital Manager upon the Committee. The</p>	

<p>Committee gave formal thanks and appreciation to SS's time served upon the Committee.</p> <p><b>MHAC19.51.1</b> – JE agreed to re-issue expressions of interest communication via email to replace the Associate Hospital Manager upon the Committee.</p> <p><b>Resolved:</b> That the update in relation to the membership be noted.</p>	<p>JE</p>
<p><b>MHAC19.52 – Child and Adolescent Mental Health Services [d] Update</b></p> <p><b>MHAC19.52.1</b> – AC presented the Committee with the update in relation to CAMHS waits for assessment and therapy, compliance with the Mental Health Measure and the Mental Health Act.</p> <p><b>MHAC19.52.2</b> The peak demands forecasted for the month of October had been noted as challenging, the central demands were also recognised in terms of capacity. Developments in post had been explained and it was confirmed that there would be a tight and robust program of work in place. It was noted that cross cover had been gained to ensure targets were met within the challenging periods. The positivity of GP cluster leads within North Denbighshire had also been reported as being hugely effective. AC explained that she had met with the leads, in order to build capacity on a long-term basis, and confirmed that the strategy would in-turn have a positive impact.</p> <p><b>MHAC19.52.3</b> It had been recognised that there had been a peak within the July data; relating to 136 MHA admissions to designated age appropriate beds. AC agreed to further analyse the data.</p> <p><b>MHAC19.52.2</b> AC summarised that funding had now been allocated from the Welsh Government to enhance Early Intervention services.</p> <p><b>MHAC19.52.3</b> AC also clarified that project teams had been set up following allocation of Transformation funding and that recruitment of four Project Manager posts were almost complete. Each Area were reviewing their Service Model requirements for those children on the Edge of Care.</p> <p><b>MHAC19.52.3</b> The committee had been assured of the positive feedback received; in relation to the report received from the Delivery Unit, (following visits across the teams in March and April), and that an action plan had been produced to review and address the recommendations. (Agenda Item).</p> <p><b>MHAC19.52.4</b> The Committee acknowledged the new assessment centre funding and gave unanimous support to the wider team. It was further</p>	<p>AC</p>

<p>clarified that the team aim to secure a further six new short-term assessment beds.</p> <p><b>MHAC19.52.5</b> MWJ commented upon the ABH site and the forward planning of ENWAS. AC confirmed that the site had now fully recruited and reconfigured, and clarified that the 12 beds were fully open.</p> <p><b>MHAC19.52.6</b> It was further noted that the business case for PICU had been finalised and it was confirmed that the consultation would be responded to.</p> <p><b>Resolved:</b> That the report be noted.</p>	
<p><b>MHAC19.53 – Deprivation of Liberty Safeguards (DoLS) Update Report</b></p> <p><b>MHAC19.53.1</b> CP presented the committee with the update in relation to; the Deprivation of Liberty Safeguards (DoLS) Update Report. It was reported that in relation to the total number of BCUHB DoLS applications; there had been a consistent upward trend within the first quarter of 2019/21. The increase in relation to high level of applications from all areas across the Health Board were noted, and it was acknowledged that the challenges continue. It had been explained that the team were close to the end of quarter two, and therefore the reporting period was slightly behind.</p> <p><b>MHAC19.53.2</b> At the previous committee, concerns were raised regarding the quality of applications. Various actions had been undertaken, and it had been confirmed that the DoLS Manager met with the Assistant Director of Nursing, Mental Health and Learning Disability Division in taking this forwards.</p> <p><b>MHAC19.53.3</b> In relation to the Supervisory Body and Signatories, it was reported that there had been 10 recent training sessions. A further concern had been noted regarding the delayed response to requests to complete the task of agreeing a standard authorisation with some signatories not responding to emails. It was confirmed that the Handbook for level 1 candidates and managers had now been trailed and was now in the stage of translation. Within the report it was also noted that the governance of training now sits firmly with the relevant manager, rather than oversight by the DoLS team. CP confirmed that support had been dealt with, whilst incorporating good governance and reporting routes to deliver the required changes. HO clarified that within the recent HIW Cefni feedback, that there were no issues highlighted with regards to DOLS applications being made.</p> <p><b>MHAC19.53.4</b> The committee acknowledged the current report, which had been positive.</p> <p><b>Resolved:</b> That the report be noted.</p>	

<p><b>MHAC19.54 Hospital Manager’s Update Report – oral summary based on the feedback from earlier Power of Discharge Sub-Committee Meeting.</b></p> <p>MHAC19.41.1 – WL gave the oral summary of the feedback regarding the report to the Committee.</p> <p><b>Resolved:</b> That the report be noted.</p>	
<p><b>MHAC19.55 Mental Health Act Committee Performance Report – June 2019</b></p> <p><b>MHAC19.55.1</b> WL presented the performance report and Appendices to the committee. The report provided an update in relation to the Mental Health Act and Mental Health Measures Activity within the Division. It was noted that the report also provided assurance of the compliance against key sections of the legislative requirements of the Mental Health Act 1983, as amended 2007. The report also included an Appendix; which detailed the exceptions being reported under the Mental Health Measure.</p> <p><b>MHAC19.55.2</b> Recruitment rates were also discussed.</p> <p><b>MHAC19.55.3</b> Advisory reporting of errors. It was confirmed that AR and WL had planned to complete the analysis of data from the month of June. Action plan to be developed.</p> <p><b>MHAC19.55.4</b> Timing of reporting to the Committee had been raised and discussed. It was agreed that the timing of the committee should be reviewed, in order to correlate with reporting periods. JE agreed to feedback to the Acting Board Secretary.</p> <p><b>MHAC19.55.5</b> It was agreed that an action plan in relation to forensic and rehabilitation processes of transfer would be brought to next meeting.</p> <p><b>MHAC19.55.6</b> Various discussions around the report had been noted and the group agreed to note the reporting update.</p> <p><b>Resolved:</b> That the report be noted.</p>	<p>WL/AR</p> <p>JE</p> <p>WL/AR</p>
<p><b>MHAC19.56 – Update on the approval functions of Approved Clinicians &amp; section 12(2) Doctors in Wales from 8<sup>th</sup> June 2019 to 6<sup>th</sup> September 2019</b></p> <p><b>MHAC19.56.1</b> – HH and LK presented the report update on the arrangements and service developments for the approval and re-approval of Approved Clinicians and section 12 92 Doctors in Wales.</p>	

<p><b>MHAC19.56.2</b> The Committee noted that; (due to the timing of the committee meeting,) the figures contained information from the previous quarter.</p> <p><b>MHAC19.56.3</b> It was reported that the team had met with members of the BCU Informatics Team; regarding the new web based MHA Register for Wales, and updated regarding this had been received.</p> <p><b>MHAC19.56.4</b> It was confirmed that future induction and refresher training would take place from 19<sup>th</sup> to 21<sup>st</sup> November 2019. It had also been stated that the training dates for three of the 2020 courses were secured. It was confirmed that at the September training event; there were local GP's in attendance, it was noted that the team hopes to see future increases in attendance within the forthcoming months.</p> <p><b>MHAC19.56.6</b> In relation to the addition and removals to the all wales register of approved clinicians and section 12 (2) Drs figures, the overall comparison of other health boards had been noted, and it was clarified that in comparison BCU were performing well.</p> <p><b>MHAC19.56.6</b> Section 12 (2) Doctors data was noted and it was raised that the team had acknowledged issues in relation to future voids in posts.</p> <p><b>Resolved:</b> That the report be noted.</p>	
<p><b>MHAC19.57 - Healthcare Inspectorate Wales (HIW) Monitoring Report</b></p> <p><b>MHAC19.57.1</b> The report had been previously distributed to provide members with the details of inspections within the last twelve months, as conducted by Healthcare Inspectorate Wales and to highlight findings specifically in relation to the Mental Health Act and the Mental Health Wales Measure.</p> <p><b>MHAC19.57.2</b> – It was noted that work continues in relation to the action plans put in place with regards to the visits made. It was reported that policy production had been ongoing, and it was noted that that the inspections would continue to be reported upon and information updated on a three monthly basis.</p> <p><b>MHAC19.57.2</b> HO referred to the recent Cefni inspection by HIW. HO, AR and MWJ conveyed thanks to all staff involved on the well received visit. The theme of continuous improvement had been noted, along with the significant improvements across the Division. AR gave special thanks to all Mental Health Act Managers and the quality of documentation, which had been scrutinised. Thanks and congratulations had also been expressed to WL via AR, and overall the Division of MH&amp;LD.</p> <p><b>Resolved:</b> That the report and update be noted.</p>	

<p><b>MHAC 19.58 - Child Adolescent Mental Health Services - Response to Delivery Unit Report on primary care mental health services (Part 1 of the Measure)</b></p> <p><b>MHAC19.58.1</b> CS provided the committee with the briefing in relation to the review of Primacy Care, (Community Child and Adolescent Mental Health Services), including the response to the recommendations. Overall CS stated that the response had been broadly positive, with no immediate issues and welcomed the useful opportunity to challenge and debate.</p> <p><b>MHAC19.58.2</b> A discussion ensued regarding further work requirements in relation to re-engagement and recording of issues concerning single point of access. AC also summarised the patient pathway and acknowledgments of expertise of our practitioners within BCUHB.</p> <p><b>MHAC19.58.3</b> Recommendation item 3.1 had been referred to in terms of the long-term plan, in relation to Estates. CS confirmed that the team had been taking the item forward with continuous engagement within area teams and estates colleagues.</p> <p><b>MHAC19.58.4</b> GP awareness on appropriate referrals had been raised, CS elaborated on the clarity and the broad awareness with GP's and referrals. CS further confirmed that responses had been communicated via cluster meetings as an extra opportunity to discuss CAMHS. It was confirmed that CS and AS planned to meet to further discuss; as per action log item MHAC19.08.</p> <p><b>MHAC19.58.2</b> The Committee noted and endorsed the actions identified within the action plan in response to the 5 recommendations. CS confirmed that the work had been progressing well.</p> <p><b>Resolved:</b> That the report be noted and endorsed the actions identified.</p>	
<p><b>MHAC 19.59 - BCUHB Policy Position in relation to the Mental Health Act</b></p> <p><b>MHAC 19.59.1</b> WL provided the Committee with the report in relation to the policies in place and those under development, (as specified within the Code of Practice for Wales that are required under the Mental Health Act).</p> <p><b>MHAC 19.59.2</b> WL clarified that data gaps had now been updated within the report. It reported that the flow chart of process would also be included, along with the inclusions of policies relevant to particular areas.</p> <p><b>MHAC 19.59.3</b> In relation to the Policy on Transition from CAMHS to Adult Services, HO confirmed that the policy had been ratified and would now be subject to audit. It was further noted that a Task and Finish Group</p>	

<p>would be formed, in order to promote the policy. It was stated that the policy had been noted to be detailed upon the expectations and how to manage those in transition. The progress and policy was noted.</p> <p><b>MHAC 19.59.4</b> A question had been raised concerning the handling of policies that become out of date. WL confirmed that the Policy Implementation Group would continue to monitor the policies and would ensure that any out of date policies be allocated in order of risk, in order to lead and progress development, or review as necessary.</p> <p><b>MHAC 19.59.5</b> WL confirmed that all policies within the report are available within the Health Boards Intranet Pages and the Committee noted and thanked WL for the comprehensive report.</p> <p><b>Resolved:</b> That the report be noted.</p>	
<p><b>MHAC19.60 – Issues of Significance to inform Chair’s Report to Board</b></p> <p>The Chair agreed to raise any issues of significance with the Board.</p>	
<p><b>MHAC19.61 The Chair Agreed to take “Any other business” at this point.</b></p> <p><b>MHAC19.61.1 – MWJ:</b> End of Tenure as Chair to the MHAC. The group acknowledged the end of term of MWJ. AR expressed sincere thanks on behalf of the Committee and Division of MH&amp;LD for the hard work and dedication of MWJ within her tenure time period. AR then gave personal thanks to the critical support that MWJ had demonstrated to himself and the team. MWJ responded with mutual thanks and acknowledgement of the privilege of working with the Division. It was acknowledged that the position of Chair would now be open for future expressions of interest.</p>	
<p><b>MHAC19.62 – Date of Next Meeting</b></p> <p><b>MHAC19.62.1</b> Friday 20<sup>th</sup> December 2019 – Boardroom, Carlton Court.</p>	