



Mental Health Act Committee

**Draft Minutes of the Mental Health Act Committee held at 10:00am
Friday 28th June 2019
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
 Alison Cowell Assistant Area Director – Children’s Services
 Andy Roach Director MH&LD
 Chris Pearson Safeguarding Specialist Practitioner/DoLSs & MCA [VC]
 Delia Fellows Associate Hospital Manager
 Frank Brown Associate Hospital Manager
 Heulwen Hughes Approval Manager for Approved Clinicians [VC]
 Hilary Owen Head of Governance
 Jacky Parry Associate Hospital Manager
 Rachael Turner Ward Manager, Hydref Ward
 Sandra Ingham Business Support Manager
 Shirley Cox Associate Hospital Manager
 Shirley Davies Associate Hospital Manager
 Wendy Lappin Mental Health Act Manager

Agenda Item	Action
<p>MHAC19.34 – Apologies</p> <p>MHAC19.34.1 – Apologies were received from Gill Harris, Lesley Singleton, Deborah Carter, Mark Jones, Satya Schofield, Joan Doyle, Christine Robinson, Caniad.</p>	
<p>MHAC19.35 – Declarations of Interest</p> <p>MHAC19.35.1 – There were no declarations of interest made at the meeting.</p>	

<p>MHAC19.36 – Minutes of last meeting and summary action log</p> <p>MHAC19.36.1 – Minutes of the meeting held on 29th March 2019 were agreed as an accurate record.</p> <p>MHAC19.36.2 – All actions were recorded therein.</p>	
<p>MHAC19.37 – Minutes of Power of Discharge Sub Committee</p> <p>MHAC19.37.1 – Minutes of the meeting held on 29th March were noted.</p> <p>Resolved: That the minutes of the Sub Committee held on 29th March 2019 were received.</p>	
<p>MHAC19.38 – Mental Health Act / Mental Health Measure Performance Report</p> <p>MHAC19.38.1 – A report providing activity details throughout the Division was distributed with the papers.</p> <p>MHAC19.38.2 – WL provided details on each of the elements within the report. All section 5.4s are monitored and checked to confirm appropriate. In the West there was an increase in the number of 5.2s, this was thought to be due to availability of doctors.</p> <p>MHAC19.38.3 – There was an increased number of 5.4s in the East and we need to be clear on what this is telling us. It was noted there is only one doctor on-call so it is important to understand what time of day the increase occurred and whether this related to the same patient. Whilst the numbers are relatively small it is important to understand why there was an increase and assurance was also required on whether this related to CAMHS patients.</p> <p>MHAC19.38.4 – The number of 136s continued to rise. Discussions had been held with other Health Boards on their process when suites were full. WL gave a collective summary upon the options that they use and agreed to provide a further verbal update to the September meeting. Similar issues noted across Wales and it was agreed closer working with the police is required to try to reduce the number of referrals. It was noted that the work done through Street Triage did reduce the number of referrals.</p>	<p>WL</p>

<p>Action: AR to write to Chief Constable to look at memorandum of understanding and discuss the issues being raised. Discuss standing up the Task and Finish Group.</p> <p>MHAC19.38.5 - Discussions around the paper produced by Emrys Elias, needs to be flagged with new Chief Constable. There is a need for further training, monitoring around what is a 136, and inappropriate referrals should be flagged.</p> <p>Action: Chair to raise with Police Commissioner.</p> <p>MHAC19.38.6 - MH Measure compliance provided for information – it was noted there are still issues meeting targets. Deep Dive session held around the MH Measure, analysis around capacity and demand particularly in the West. Discussions held with Welsh Government and authorisation given for the recruitment of 6 wte in the West. Part 2 has seen an improvement with the Division showing as compliant last month. Discussions with the Delivery Unit will continue.</p> <p>MHAC19.38.7 – Discussions held around the large number of referrals through signposting and consideration being given for MH staff working with GPs.</p> <p>Resolved: That the report be noted.</p>	<p>AR</p> <p>MJ</p>
<p>MHAC19.39 – Child and Adolescent Mental Health Services [CAMHS] Update</p> <p>MHAC19.39.1 – Update report was distributed with the papers which detailed the increased demand in CAMHS referrals and a reduction in capacity which was having a significant impact on the sustainable delivery of the Mental Health Measure Targets.</p> <p>MHAC19.39.2 – It was noted that more work was being done around prevention and early intervention with schools and GP surgeries. The first 7 days are the most important and this is what we need to focus on.</p> <p>MHAC19.39.3 – Concern was raised around the staffing shortages in the central area and the impact this was having on meeting the Mental Health Measure targets. The recent staffing day was very successful and it was hoped this would alleviate some of the pressures by September. There were issues in the West around language and gender which are being addressed. Discussions were held about the importance of providing the family and young person with choice.</p> <p>MHAC19.39.4 – In terms of the Mental Health Measure targets, Part 1 was 80% for assessments and 66% for therapeutic</p>	

<p>interventions. Part 2 was 88% - work is ongoing to ensure the target is met and maintained in the coming months. Work is being done to ensure young people understand their care plan and what treatment is being proposed.</p> <p>MHAC19.39.5 – The number of S136 assessments have significantly reduced in 2018/19 compared to this time last year. There was one S136 undertaken during April 2019.</p> <p>MHAC19.39.6 – Paper providing details of the outcome of the Delivery Unit visit in December was distributed with the papers. The final report was not yet available but preliminary feedback was very positive. An action plan will be produced once final feedback has been received. It was agreed that one overall action plan will be produced following the recent inspections.</p> <p>Resolved: That the report be noted</p>	
<p>MHAC19.40 – Update on the approval functions for Approved Clinicians and Section 12[2] Doctors in Wales</p> <p>MHAC19.40.1 – Detailed report on the arrangements and service developments for the approval of Approved Clinicians and section 12[2] Doctors in Wales. It was noted that due to the timing of the Committee meeting, the report will contain information from the previous month.</p> <p>MHAC19.40.2 – It was noted that BCUHB held the responsibility for the initial approval, re-approval, suspension and termination of approved clinicians and section 12[2] doctors. There are currently 400 approved clinicians across Wales with 79 registered in North Wales. This is a serious situation and discussions are taking place to try and improve this.</p> <p>MHAC19.40.3 – Main areas of concern include the fee, which has not increased since first implemented, payments for carrying out an assessment and travel expenses. The Chair agreed to raise this as a matter of urgency in her Assurance Report to the Board.</p> <p>Resolved: That the report be noted.</p>	<p>MJ</p>
<p>MHAC19.41 – Independent Mental Health Advocacy Performance Report</p> <p>MHAC19.41.1 – Report distributed with the papers providing an update on the IMHA performance reported to Welsh Government for the period January – March 2019 and emerging themes identified by service users.</p>	

<p>MHAC19.41.2 - Part 4 of the Mental Health measure specifies patients should have access to advocacy support, it was noted that training needs to be carried out raising awareness and to ensure staff are aware of the services available.</p> <p>MHAC19.41.3 - Assurance to be provided at next meeting confirming that issues raised by service users are being addressed.</p> <p>Resolved: That the report be noted.</p>	<p>LS</p>
<p>MHAC19.42 – Deprivation of Liberty Safeguards</p> <p>MHAC19.42.1 – Detailed report distributed with the papers. The DoLS supervisory body are accountable to report all data relating to deprivation because patients are detained in hospital under statutory legislation. The report also provides a wider perspective on the recruitment and training of Best Interest Assessors [BIA], supervisory body functions and responsibilities, the provision of training, advice and support delivered to BCUHB staff.</p> <p>MHAC19.42.2 – It was noted there were concerns with the timing of applications, in some cases it can take up to 6 months for an application to be made where someone is admitted in to hospital, in some cases the patient is ready for discharge. During quarter 4 there were 199 applications received</p> <p>MHAC19.42.3 – Training has continued with a significant amount being carried out in the West. It was noted that urgent work was required with Community Hospitals to ensure they are aware of the importance of referrals.</p> <p>MHAC19.42.4 – A further 31 staff have undertaken the training for authorised signatories bringing the total to 96.</p> <p>MHAC19.42.5 - Issues remain with front line staff arranging referrals in a timely manner. There were still concerns on the quality of completed forms. There have been a total of 6 referrals for Court of Protection, during this process the applications are scrutinised by lawyers and court and concerns are being picked up around delays. This was something that needed to be raised as a priority, and AR agreed to discuss with DC, and the Chair agreed for it to be raised at QSG and QSE.</p> <p>MHAC19.42.6 – Suggestion that capacity forms are created with a pathway to follow, DoLS leads / champions to be assigned on each ward. It was noted there are laminated instructions on each ward advising staff of the process.</p>	<p>AR/DC/QSG/QSE</p>

<p>MHAC19.42.7 – Discussions with procurement about producing an App for level 1 & 2 training, it was hoped there would be a clear outline on how to access the training on-line at the next meeting in September.</p> <p>Resolved: That the report be noted.</p>	
<p>MHAC19.43 – HIW Monitoring Report [for information]</p> <p>MHAC19.43.1 – Report was distributed to provide members with the details of inspections conducted by Healthcare Inspectorate Wales and to highlight findings in relation to the Mental Health Act and the Mental Health Wales Measure.</p> <p>MHAC19.43.2 – It was noted that there has been a lot of work undertaken and a full training programme produced at different levels for all care coordinators, this has recently been commended by the coroner.</p> <p>MHAC19.43.3 – Joint Thematic Review of all Wales Community Mental Health Teams – it was noted that this report will be scrutinised by Adult Mental Health Group recently established and a clear action plan will be produced to address each of the themes highlighted.</p> <p>Resolved: That the report be noted.</p>	
<p>MHAC19.44 – Issues of Significance to inform Chair’s Report to Board</p> <p>The Chair agreed to raise any issues of significance with the Board.</p>	
<p>MHAC19.45 – Date of Next Meeting</p> <p>Friday 27th September 2019 – Boardroom, Carlton Court</p>	