



## Mental Health Act Committee (MHAC)

### Minutes of the Meeting Held on 19.10.20 via Webex

#### Present:

Mrs Lucy Reid	Health Board Vice Chair (Chair)
Cllr Cheryl Carlisle	Independent Member
Mr Eifion Jones	Independent Member

#### In Attendance:

Mr Frank Brown	Associate Hospital Manager
Mrs Jody Evans	Secretariat, Corporate Governance Officer
Mr Simon Evans-Evans	Interim Director of Governance, Corporate Office
Ms Claire Foreman	North Wales Police (part meeting)
Ms Heulwen Hughes	All Wales Approval Manager for Approved Clinicians & Section 12(2) Doctors, Office of the Medical Director (part meeting)
Mrs Liz Jones	Assistant Director, Corporate Governance
Ms Ruth Joyce	Criminal Justice Liaison Service Manager, Mental Health & Learning Disabilities (MHL) (part meeting)
Mr Matthew Joyes	Acting Associate Director of Quality Assurance & Assistant Director
Mrs Wendy Lappin	Mental Health Act Manager, MHL
Ms Teresa Owen	Executive Lead, MHL
Mr Christopher Pearson	Safeguarding Specialist Practitioner/DoLS Manager, Safeguarding (part meeting)
Mr Steve Riley	Consultant Nurse, Child & Adolescent Mental Health (part meeting)
Mr Mike Smith	Interim Director of Nursing, MHL
Mr Iain Wilkie	Interim Director, MHL
Mr Mark Jones	Interim Senior Head of Service Adult Social Care, Wrexham County Borough Council

AGENDA ITEM DISCUSSED	ACTION BY
<p><b>MHAC20/1 Welcome, opening remarks and apologies</b></p> <p><b>MHAC20/1.1</b> The Chair welcomed everyone to the meeting and confirmed that apologies had been received from: Debra Hickman, Acting Executive Director of Nursing &amp; Midwifery, Alberto Salmoiraghi, MHL Medical Director, Marilyn Wells, Head of Nursing - East Area, Child &amp; Adolescent Mental Health Services (CAMHS) and Alison Cowell, Assistant Area Director Centre, CAMHS.</p> <p><b>MHAC20/1.2</b> The Committee also welcomed the new Executive Lead and Mental Health Team Leads to the Committee; Teresa Owen – Executive Lead, Mike Smith – Nursing Lead, Iain Wilkie - Interim Director, and Matthew Joyes – Governance Lead.</p>	

<p><b>MHAC20/1.3</b> It was reported that there was still an Associate Hospital Manager vacancy on the Mental Health Act Committee, therefore expressions of interest in relation to joining the Committee are to be sought again via the Secretariat.</p> <p><b>MHAC20/1.4</b> The Chair explained that as a consequence of the ongoing Covid-19 situation and following advice provided by the Welsh Government, the Health Board had stood down all Committees with the exception of the Quality, Safety and Experience Committee and the Audit Committee. She confirmed that any governance, leadership, and quality and safety matters relating to mental health fell within the remit of the Quality, Safety and Experience (QSE) Committee. The Chair confirmed that key reports on performance had been circulated to members in June to enable members to remain. The Chair also explained that the decision to postpone the POD Sub-Committee and with the MHAC, which were due to take place on 18th September 2020, had been due to a number of changes in leadership and the need to review some key reports.</p> <p><b>MHAC20/1.5</b> The Chair expressed her disappointment in the quality of various reports received by the Committee. She asked the Assistant Director, Corporate Governance, to ensure that the Office of the Board Secretary would take steps to liaise with authors and MHLDS to improve the quality of papers submitted to the Committee in future.</p>	<p>JE</p> <p>LJ</p>
<p><b>MHAC20/2 Declarations of Interest</b> The Chair, an Independent Member and the Head of Governance for MHLDS declared their positions as Justices of the Peace. The Committee noted the declarations.</p>	
<p><b>MHAC30/3 Previous minutes, matters arising and summary action plan</b> <b>Draft minutes of the meeting held on 20.12.19, matters arising and summary action plan.</b></p> <p>The minutes were confirmed as an accurate record of the previous meeting. The Summary Action Log was reviewed and updated accordingly.</p>	
<p><b>MHAC30/4 Items circulated to members since the previous meeting:</b></p> <p><b>MHAC30/4.1</b> The Committee acknowledged the receipt of the reports previously emailed out to members:</p> <ul style="list-style-type: none"> <li>11.03.2020 - Advisory reporting of errors - Action plan.</li> <li>11.03.2020 - Forensic and rehabilitation processes – Action plan.</li> <li>30.07.2020 - March and June 2020 Performance reports, Associate Hospital Manager (AHM) updates and Healthcare Inspectorate Wales (HIW) Monitoring Report.</li> </ul> <p><b>MHAC30/4.2</b> The Chair expressed thanks to those staff who had produced the reports and confirmed that there are no plans to stand down the Committees during the predicted second wave of the pandemic.</p>	

<p><b>MHAC20/5 Draft minutes of the Power of Discharge Sub-Committee meeting held on 20.12.19 and verbal update from the earlier meeting</b></p> <p>The Mental Health Act Manager gave a summarised verbal account on relevant feedback from the Sub-Committee meeting held earlier that day. The Committee was also informed of a briefing provided by the Interim Director of Nursing, MHL D, in relation to recruitment challenges and how these were being managed.</p>	
<p><b>MHAC20/6 CANIAD – Patient Story</b></p> <p><b>MHAC20/6.1</b> The Interim Director of Nursing, MHL D, presented the Committee with the verbal overview of the patient story on behalf of CANIAD. The Committee acknowledged the sensitivity of the experience that had been described. The Interim Director of Nursing informed the Committee that the patient story had also been presented to the Divisional Quality, Safety and Experience meeting and lessons would be learnt from the issues raised. The theme of young people transitioning through to adult services was discussed. It was noted that the Health Board did not have a joint strategy at present and this was a national issue. It was stated that the Division aims to address the points noted within the next 6 months as a phased response.</p> <p><b>MHAC20/6.2</b> The Head of Governance and Consultant Nurse for CAMHS also provided an update with regard to their ongoing work and on the Welsh Government Transition and Handover guidance for children and young people. It was confirmed that a passport tool was being implemented, along with co-working which is to be embedded into culture and practice. The Committee acknowledged the difficulties for young patients transitioning through to adult services and the need for this transitions to be improved. The Executive Lead referred to a recent discussion with the Community Health Council and stated that there was a need to understand the flow of transitions. It was acknowledged as an area to improve upon. Concerns were noted in relation to carers being impacted by the effects of the Covid-19 pandemic.</p> <p><b>MHAC20/6.3</b> It was agreed for the Clinical Justice Liaison Nurse to liaise with the Consultant Nurse for CAMHS to link in at locality meetings.</p> <p><b>MHAC20/6.4</b> A further discussion took place with regards to the learning from this patient story and it was highlighted that the report template was not suitable for capturing the follow up actions required. It was agreed for the QSE Patient Story template be shared with the Interim Director of Nursing, who would ensure that this format was adopted for future patient stories being presented to the MHAC so that the learning from patient stories is clearly identified and reported. The Executive Lead also stated that stories would be reviewed via the Division and it was confirmed that the Putting Things Right process would be utilised to support learning within the Division.</p> <p><b>MHAC20/6.5</b> The Committee expressed their thanks for the presentation of the patient story. The Members also noted the renewed energy within MHL D.</p> <p><b>MHAC20/6.6</b> The patient story was noted, as was the Chair's view that such stories should be acted upon rather than just received for information.</p>	<p>RJ/SR</p> <p>MJ/MS</p>

<p><b>MHAC20/7 Analysis of S136 update on the Criminal Justice Liaison Service</b></p> <p><b>MHAC20/7.1</b> The Criminal Justice Liaison Service Manager (CJLSM) presented the quarterly report and provided the Committee with an update and background in relation to the service/s activity. It was confirmed that service provision had been affected by Covid-19, which had been reflected within the report. It was clarified that recently updated data showed that activity was increasing. It was noted that work was progressing with clinicians within probation offices, to assess and provide referrals. It was also confirmed that funding had allowed for the expansion of the team and that a new staff member was commencing imminently. The sharing of good news stories was noted in relation to care co-ordination and diversity of data. Strong relationships continue to be made with partner agencies, in order to raise awareness of the service. It was noted that future reports would include feedback from the S135/136 Monitoring Group and the Criminal Justice Liaison Steering group.</p> <p><b>MHAC20/7.2</b> The Governance and Compliance Manager commented on the increase in consultations and the positive impacts of 136s, which had been previously reported upon. It was further recognised that continuous improvement was required along with the resurrection of the two day mental health training, which had been affected by the Covid-19 pandemic. It was confirmed that the training was to re-launch in November 2020.</p> <p><b>MHAC20/7.3</b> The Chair invited questions from Independent Members. An Independent Member welcomed the work underway and noted attendance at the frequent networks.</p> <p><b>MHAC20/7.4</b> An Independent Member requested clarity of communications with the Youth Justice Board and asked if data was harvested from the Courts along with any specialist care homes within the areas. It was clarified that the service did not have specialist liaison with care homes at present. It was confirmed that demand would be reviewed in the future by way of co-working with community care pathway leads, in order to address the requirements.</p> <p><b>MHAC20/7.5</b> The Committee noted the report and thanked the CJLSM for the update.</p>	
<p><b>MHAC20/8 Comfort break</b></p>	
<p><b>MHAC20/9 Use of Section 136 for Young People under the age of 18 years</b></p> <p><b>MHAC20/9.1</b> The Consultant Nurse for CAMHS presented the report. He provided the analysis and update on the work that supports young people presenting in crisis and of those being detained on S136s. Ongoing work and statistical data was presented in relation to crisis care, annual data relating to Section 136 (2010 – 2020), and information on the number of self-harm assessments in acute settings.</p> <p><b>MHAC20/9.2</b> Following the presentation of the report, the Chair raised that the recommendations to the Committee on the cover sheet needed to be clear in future reports from the Division in order to demonstrate good governance.</p>	

<p><b>MHAC20/9.3</b> A discussion took place regarding out of hours arrangements for the on call psychiatric rota, along with incidents relating to additional management risks and appropriateness of support for out of hours assessments.</p> <p><b>MHAC20/9.4</b> Particular concern was raised regarding under 15s detentions and of emergency assessments being undertaken by adult psychiatrists. It was agreed that there was an urgent need to address the concerns. It was confirmed that inappropriate use of age appropriate beds had been raised with Consultants throughout North Wales and that the Assistant Area Director for Central, CAMHS was taking the issue forward. The Executive Lead for Mental Health confirmed that funding bids relating to addressing the challenges were undergoing review. It was agreed that CAMHS, MHLDS and primary care leads should work collectively to pull together an action plan. It was agreed that the Consultant Nurse, CAMHS, would liaise with the appropriate senior individuals in the first instance and report back to the next meeting.</p> <p><b>MHAC20/9.5</b> The Committee noted the report and it was also agreed to escalate the concerns to the Health Board in November via the Chair's Assurance Report.</p>	<p>SR</p>
<p><b>MHAC20/10 Deprivation of Liberty Safeguards (DoLS)</b></p> <p><b>MHAC20/10.1</b> The Safeguarding Specialist/DoLS Manager presented the update report to the Committee, outlining the current position relating to DoLS activity, demand, training and challenges.</p> <p><b>MHAC20/10.2</b> The Chair queried the section of the report regarding its prior scrutiny route. The information presented contained some inaccuracies. It was ascertained that the report had not received prior scrutiny. It was also advised that the Health Board did not have a Quality and Safety Executive. The Chair asked for such information to be correct in future reports. She also expressed disappointment regarding the overall content of the report. She explained that there was a high proportion of cases with no treatment plan, but no assurance provided by the report that action had been taken to address this and thus 'close the loop'. She also stated that she did not understand the figures presented in the report. It was therefore agreed that the Safeguarding Specialist/DoLS Manager would work with the Executive Lead to improve the quality and clarity of future reports.</p> <p><b>MHAC20/10.3</b> Following discussion regarding DoLS applications, it was noted that a bid had been submitted to Welsh Government for part funding to create a bespoke training package. Training during the Pandemic had been offered via online access. The Chair expressed concerns regarding missing capacity assessments and discussion ensued regarding assurances on the current process. It was confirmed that a Standard Operating Procedure for DoLS had been created and that further review of the procedure would be undertaken.</p>	<p>CP/TO</p> <p>TO/CP</p>

<p><b>MHAC20/11 Draft MHAC Committee 2019/20 Annual Report</b></p> <p><b>MHAC20/11.1</b> The Acting Associate Director of Quality Assurance presented the draft report for approval and invited members' comments. The members confirmed that they approved the levels of assurances set within section 6 of the report. An Independent Member referred to the red rated items. It was confirmed that the items would be addressed by the Executive Lead, via the risk based approach. The limited number of clinical audits conducted over the past year was also noted. The Executive Lead stated that there was an opportunity for the Division to re-focus the MHAC's cycle of business for the next 12 months. It was further stated that the Committee needed to be more tied in with overall governance arrangements going forward. The Interim Director of Governance, who was observing the meeting, noted this requirement.</p> <p><b>MHAC20/11.2</b> The Committee approved its Annual Report 2019/20, which also included its terms of reference and cycle of business, as well as the agreed RAG assurance scores. It was confirmed that the report was to be submitted to the Audit Committee.</p>	<p>TO/SE-E</p>
<p><b>MHAC20/12 Associate Hospital Managers Update Report</b></p> <p>The Mental Health Act Manager provided a verbal summary, based on feedback from the earlier PoD Sub-Committee meeting.</p> <p>The Committee noted the verbal update.</p>	
<p><b>MHAC20/13 Mental Health Act Performance Report</b></p> <p><b>MHAC20/13.1</b> The Mental Health Act Manager presented the overview of the performance report to the Committee. It was noted that the report also included data in relation to the S136 Divisional Report for Audit and the S136 CAMHS Report.</p> <p><b>MHAC20/13.2</b> The Chair and members thanked the Mental Health Act Manager for the report, which had been discussed at the earlier POD Sub-Committee Meeting. The Chair commended the quality of the narrative provided. The Committee noted the report for information.</p>	
<p><b>MHAC20/14 Approval for All Wales Approved Clinicians and Section 12(2) Doctors)</b></p> <p><b>MHAC20/14.1</b> The Committee received the report, which outlined data in relation to the additions and removals in respect of the All Wales register of Approved Clinicians, additions and removals in respect of the All Wales register of Section 12(2) Doctors, and the breakdown of Section 12(2) GPs currently approved in Wales as at 5 October 2020.</p> <p><b>MHAC20/14.2</b> The Chair commented that whilst the report was helpful in setting out the situation with regards to numbers in relation to S12 (2) approvals, she was disappointed that the actions that had been agreed in the Committee meeting in December had not been progressed. The Committee had received a report previously regarding concerns about the availability of s12(2) doctors and had</p>	

<p>made suggestions on potential solutions. The Chair asked for an update on a recent meeting that had taken place with the mental health leads and the office of the medical director. It was accepted that there was no simple solution, but the Division was keen to work collaboratively to address the recruitment challenges. Further discussion ensued and significant concerns were raised by the Chair in relation to the recruitment situation, the progress to address this as it had been reported as a key risk for the Committee for over 12 months and the need to recognise that this was not just a GP recruitment issue. It was agreed that a wider piece of work was required, and a further paper and action plan would be presented for the next meeting.</p> <p><b>MHAC20/14.3</b> The Committee noted the report provided.</p>	TO/AS/MS/IW
<p><b>MHAC20/15 Healthcare Inspectorate Wales (HIW) Monitoring Report</b></p> <p><b>MHAC20/15.1</b> The Head of Governance and Compliance presented the report which detailed updates in relation to the inspections conducted by HIW within the last 12 months. The report covered findings relating to the Mental Health Act and the Mental Health Measure, as detailed within appendix one. It was explained that the report highlighted that there had not been any immediate concerns identified by HIW. The inspections covered:</p> <ul style="list-style-type: none"> <li>• Heddfan Unit</li> <li>• Ty Llywelyn</li> <li>• Ty Derbyn</li> <li>• Cefni Hospital</li> </ul> <p><b>MHAC20/15.2</b> The Committee also noted the Ty Llewelyn detailed report as appendix two within the report.</p> <p><b>MHAC20/15.3</b> It was also confirmed that due to the Covid-19 Pandemic, HIW were moving into the tier 3 review model. The Committee was notified of the most recent inspection at Carreg Fawr. It was confirmed that the draft report had been received for factual accuracy, which included two draft actions relating to policy issues.</p> <p><b>MHAC20/15.4</b> The Chair thanked the Head of Governance and Compliance for the update and stated that the detail was helpful. Discussion took place regarding detention papers and recurrent issues with regard to completion of documentation. It was confirmed that future update reports would include how processes were being specifically addressed. The Committee received and noted the report.</p>	HO
<p><b>16. FOR INFORMATION</b></p>	
<p><b>MHAC20/16.1 NAW - Health, Social Care and Sport Committee: Mental health in policing and police custody report</b></p> <p><b>MHAC20/16.1</b> This item was noted for information only as the report had previously been communicated to the MHAC Chair and Executive Lead via email on 08/01/2020. The detail included that the – Senedd’s Health, Social Care and Sport Committee had decided to hold a short enquiry on the partnership between</p>	

<p>police, health and social care. Documents relating to the matter had been attached to the agenda for the information of Committee members.</p> <p><b>MHAC20/16.2</b> It was agreed that the original communication be forwarded to the Interim Director and Lead Nurse for Mental Health.</p>	JE
<p><b>MHAC20/17 Issues of significance to inform the Chair's assurance report</b></p> <p><b>It was agreed to include:</b> CAMHS transitions to Adult Services and Section 136 concerns.</p>	
<p><b>MHAC20/18 Date of next meeting</b></p> <p>Friday 11th December 2020. <b>To be re-arranged due to a clash with the Regional Partnership Board meeting.</b></p>	