



Power of Discharge (PoD) Sub Committee

Minutes of the Meeting Held on 08.12.20 via Webex

Present:

Lucy Reid	Vice Chair (Chair)
Eifion Jones	Independent Member (IM) (<i>part meeting</i>)
Jackie Hughes	Independent Member (<i>co-opted member</i>)

Frank Brown	Associate Hospital Manager (AHM)
Diane Arbabi	Associate Hospital Manager
Shirley Davies	Associate Hospital Manager
Jackie Parry	Associate Hospital Manager
Helena Thomas	Associate Hospital Manager
Satya Schofield	Associate Hospital Manager
John Williams	Associate Hospital Manager

In Attendance:

Mike Smith	Interim Director of Nursing, Mental Health & Learning Disabilities (MHLD)
Iain Wilkie	Interim Director, MHLD
Jody Evans	Secretariat, Corporate Governance Officer
Liz Jones	Assistant Director, Corporate Office
Simon Evans-Evans	Interim Director of Governance
Teresa Owen	Executive Director, Public Health & Acting Deputy Chief Executive
Wendy Lappin	Mental Health Act Manager, MHLD

AGENDA ITEM DISCUSSED	ACTION BY
<p>POD20/9 Welcome and apologies</p> <p>POD20/9.1 The Chair welcomed everyone to the meeting and explained the virtual meeting etiquette standards to those present.</p> <p>POD20/9.2 The Chair confirmed that apologies had been received from Cheryl Carlisle - Independent Member, Hilary Owen - Head of Governance and Compliance, Hugh Jones - Associate Hospital Manager (AHM), Matthew Joyes - Acting Associate Director of Quality Assurance & Assistant Director of Patient Safety & Experience.</p> <p>POD20/9.3 The Chair welcomed Jackie Hughes as the Independent (co-opted) Member to the Sub-Committee, attending in place of Cheryl Carlisle – Independent Member.</p> <p>POD20/9.4 The newly appointed Interim Director of Governance also introduced himself to the Sub-Committee and an overview of the Interim Director responsibilities was noted by the attendees.</p>	

<p>POD20/10 Update on Sub-Committee Membership</p> <p>POD20/10.1 The Chair informed members that the Health Board were looking at the governance arrangements for the Committees and one consideration is that this Sub-Committee and the Mental Health Act Committee (MHAC) could form a combined Committee, subject to a wider governance review being undertaken. The Chair informed members and attendees that their input and suggestions regarding revised terms of reference would be welcomed. It was agreed for LR, WL and JE to meet to discuss and review the current membership.</p> <p>POD20/10.2 Expressions of interest received - Vacancies on the POD and MHAC The Chair confirmed that there had been 3 expressions of interest received regarding the Associate Hospital Manager (AHM) vacancies on the Sub-Committee. It was also noted that there had been one expression of interest received regarding the AHM position on the MHAC. It was agreed that in light of the terms of reference and wider governance review, there would not be any immediate appointments made until the review had concluded.</p>	<p>ALL LR/WL/JE</p>
<p>POD20/11 Previous minutes of the meeting held on 19th October 2020 and matters arising</p> <p>POD20/11.1 The minutes were confirmed as an accurate record, apart from the need to record the attendance at the last meeting of Diane Arbabi – AHM and Simon Evans-Evans - Interim Director of Governance.</p>	<p>JE</p>
<p>POD20/12 Items circulated to members since the previous meeting:</p> <p>POD20/20.12.1 The summary action log was reviewed and updated accordingly.</p>	
<p>POD20/13 Associate Hospital Managers Update</p> <p>POD20/13.1 The Mental Health Act Manager provided an update on the activities of the AHMs during the quarter July to October 2020. The reporting period detailed four months of activity, given the request to bring the most up to date information to the committee wherever possible. The update report included details in relation to hearings, scrutiny, training, recruitment, forums and key performance indicators (KPIs) - as referred to within Appendix 1.</p> <p>POD20/13.2 The Mental Health Act Manager explained that all hearings had continued to be held remotely via Skype, due to the Covid 19 pandemic. It was noted that hearings would be held via Microsoft Teams in the future, due to the changeover to Microsoft Office 360. Training was received by the AHMs during November. It was also noted that technical challenges with video conferencing had been experienced at the outset of the pandemic, but overall it was agreed that the system had worked well. It was also noted that holding hearings remotely had enabled managers from across the Health Board to support the work, as many may not have been able to travel such distances in the pre-Covid period. It was further stated that telephone hearings were being resisted, in favour of the video sessions, due to concerns raised. WL confirmed that feedback questionnaires would be distributed in order to improve the service going forwards.</p>	

<p>POD20/13.3 The breakdown of activity was presented to the Sub-Committee. It was confirmed that since the previous reporting period, fifteen hearings were held during the months of July – October 2020. It was confirmed that there were no discharges and that twelve were section renewals and three had been appeals.</p> <p>POD20/13.4 It was noted that the KPI target set for the hearings was at 73% which demonstrated an improvement from the previous report. The structure of the hearings and limited IT equipment had meant that only one hearing could take place at any one time. It was confirmed that during December there would be additional equipment secured along with the move to Microsoft Teams.</p> <p>POD20/13.5 It was confirmed that on-site scrutiny visits by AHMs was suspended and sessions would be reinstated once it was safe for the AHMs to physically attend in the Health Board units. It was confirmed that all other HB scrutiny had continued, as per policy for all detentions.</p> <p>POD20/13.6 The Mental Health Act Manager clarified the number of current vacancies of AHMs to date, following the sad passing of Mrs Susan Roberts and three recent resignations from Shirley Cox, Delia Fellowes and Ann Owens. It was expressed that the Managers concerned were all very experienced and their input would be greatly missed. It was confirmed that shadowing was taking place and interviews had been arranged for the month of January 2021, in order to recruit to the vacant positions.</p> <p>POD20/13.7 The Chair then invited questions from Independent Members and none were received. The Chair therefore expressed her sincere thanks to the team for their ongoing commitment, recognising the flexibility and adaptability of the virtual systems in place. The Sub-Committee noted the report and update. It was agreed for future meetings to be conducted via Microsoft Teams, in light of the AHMs now utilising the system. JE to arrange via calendar invitations accordingly.</p>	<p>JE</p>
<p>6. FOR INFORMATION</p>	
<p>POD20/14 Mental Health Act Committee Performance Report</p> <p>POD20/14.1 The Mental Health Act Manager presented the performance report for information, assurance and discussion and explained that it included an update regarding compliance with the Mental Health Act requirements within the division during the four month period from July to October 2020. It was confirmed that additional appendices had been included which detailed the four month reporting period, due to the change in the reporting schedule to ensure that the most up to date information was provided to both the Sub-Committee and MHAC.</p> <p>POD20/14.2 The Mental Health Act Manager confirmed that during the reporting period there had been five lapsed sections and two fundamentally defective. It was confirmed that all had been Datix reported and investigations had taken place. It was confirmed that the narrative relating to each section had been fully provided. It was noted that benchmark data was not received from Cardiff and Vale at the time of reporting in relation to reportable errors rates. It was confirmed that there had been further reductions regarding the number of errors that the BCUHB had reported and it was confirmed that the figure was 28% for the quarter. It was also confirmed that the Central area had identified as having the highest number of errors compared to the</p>	

<p>East and West areas for the period. It was explained that the Central area had seen the rise in reportable errors due to it being the admissions area. It was also confirmed that the number of section 136s being reported had reduced, with an initial rise within July. Reporting statistics in relation to under 18s had seen two children repeatedly detained under the section 136 status in the month of November. An overview of the numbers of patients being detained in independent hospitals in and out of Wales was also included in the report; and it was further confirmed that they are monitored by the Continuing Healthcare team.</p>	
<p>POD20/14.3 A discussion took place with regards to the Criminal Justice Liaison Service (CJLS) due to the report highlighting that there had been consultations which resulted in detentions. It was confirmed that the number of section fours had been reviewed and issues around obtaining two doctors were raised along with the themes regarding the sourcing of a second doctor. The rarity of the incidents was discussed and no concerns had been raised. Following a further discussion and query raised by an AHM, it was agreed to review data where possible and include within future reports with regards to the use of Approved Mental Health Professionals on an exception basis only. Comparisons of area data were also noted and pathways were commented upon, which had affected activity throughout the pandemic. The sudden variances in data in relation to demographics were discussed and it was agreed to supply the future reporting template with the caveat to cover the variances raised in relation to the statistics, situation and demographics.</p>	WL
<p>POD20/14.4 Members also asked a range of questions regarding the information relating to Section 136 data. A question was asked regarding non-detainees and the risks associated with possible self-harm, following non-detentions. A discussion took place and it was agreed that an opportunity to review and potentially conduct a clinical audit relating to joint working with the CJLS would be beneficial in the future. It was agreed to follow up once the CJLS service had matured over time.</p>	WL
<p>POD20/14.5 The Sub-Committee noted the report for information.</p>	
<p>POD20/15 Issues of Significance to inform the Chair's Report to the Mental Health Act Committee - Nothing to report at present.</p>	
<p>POD20/16 Any other business</p>	
<p>POD20/16.1 An AHM raised 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, MHLD were reviewing this issue.</p>	
<p>POD20/17 Date of next meeting</p>	
<p>POD10/17.1 12th March 2021. (It was noted that the North Wales Regional Partnership Board meeting is to take place on the same date in March, therefore the Chair and Lead Executive would discuss their availability in due course).</p>	