



BOARD COMMITTEE SUMMARY SHEET

NAME OF COMMITTEE: Mental Health Act Scrutiny Committee

DATE OF COMMITTEE MEETING: 19 March 2014

KEY POINTS TO DRAW TO THE BOARD'S ATTENTION

Review of Mental Health Act (MHA) Commissioner (Care Quality Commission) Visits

Visits by the MHA Commissioner have taken place at Willow Ward (WW), Mulberry Ward (MW) and Chestnut Ward (CW), all of Charlton Lane Hospital, Cheltenham over the past 4 months.

Visits include meeting with detained patients and checking associated Mental Health Act paperwork and records.

The following documents were reviewed by the Committee:

- a) The MHA Commissioners reports regarding each ward and the Trusts' response to the issues raised by the Commissioner
- b) A letter to the Trust from the Operations Manager (MHA) highlighting some specific concerns regarding patient care on Mulberry and Chestnut Wards. This letter required a response within 7 days and this was also seen by the Committee.

The Commissioner's reports demonstrated many examples of good practice including amongst others:

- "we found decisions taken under the Act by nursing staff were taken with a view to minimising patients distress and maximising their safety and wellbeing" (Willow ward report)
- "A comprehensive general healthcare assessment on admission was conducted according to notes. ... GP visits every daycontract with physical health liaison nurses which enable patients physical healthcare needs to be met, reducing the need for admission to a general hospital treatment." (Mulberry ward report)
- "The informal patients we spoke with were very complimentary about the care they had received. They both also told us that the ward had a warm, friendly atmosphere and was very clean and tidy but not too clinical (Chestnut ward report)

The MHA Commissioner requested further information on a number of specific issues which have been provided and Action Plans from each of the visits. The themes from the actions plans are as follows:

- Review of the seclusion and extended segregation policies
- Reminder of the rights of patients, both formal and informal
- Capacity to consent and its documentation
- Access to advocacy services
- Recording and supervising of Section 17 leave
- Planning for discharge

Operation Manager MHA letter of concern

Further assurance was sought by the CQC MHA Commissioners on the care of patients on Mulberry Ward and Chestnut Ward in relation to their human rights. The Commissioners visited

on Friday 21st March and met with Matron Manager and Matron of Charlton Lane Hospital. Assurance was provided however the Commissioners have asked that the Trust to review again the seclusion and extended segregation policy, advice to staff on use of seclusion and extended segregation, and consideration of interface issues between seclusion, extended segregation and PBM and PMVA policies

The Committee is to review progress on the required actions at its next meeting.

Due to unforeseen circumstances the Committee was not quorate for the remainder of the meeting. The following issues were discussed and are reported for information only.

Key Performance Indicators (KPI)

KPIs provide:

- Key information to the Committee to enable the Committee to monitor compliance with the Mental Health Act (MHA) and Code of Practice for October to December 2013 and the 5 previous guarters.
- Information on the long term section 17 leave and supervised community treatment.
- The performance in the report is in line with that noted in previous reports. No new trends or issues of concern were identified.

Reports of CQC Commissioner Section 136 Suite Usage

In January 2014, the CQC launched an online survey of health-based places of safety which all NHS Mental Health Trusts were expected to complete. In line with the survey guidance two sets of responses were submitted – one for Gloucestershire and one for Herefordshire. The Trusts responses have been shared with Clinical Commissioning Group Commissioners for both counties.

The key points include:

- Within Gloucestershire provision is sufficient as there is a commissioned, health-based place of safety, the Maxwell Centre.
- Within Herefordshire, there is not a commissioned health assessment service included within the provision of services. However, an identified dedicated room is available within the Stonebow Unit. It is not staffed by healthcare workers. People detained on Section 135/136 are brought by police who remain until such time as the Mental Health Act assessment is completed.

The result of the national CQC report is awaited and further discussions with commissioners will then be necessary to develop appropriate services and ensure compliance with the Mental Health Act Code of Practice.

Amendment to Mental Health Act Managers Policy

The current policy is that all Mental Health Act Managers (MHAM) are eligible to chair panels once they have sat on at least three and have agreed with the Chair of the Mental Health Act Managers Forum that they are ready to do so.

A paper was received by the Committee to propose amendments on the process for becoming a Chair of panel and after discussion the following points were agreed for a draft proposal to be considered at the next meeting of the Mental Health Act Scrutiny Committee. Proposed changes include:

• MHAMs to be considered for chairing of panels after a minimum of 6 panels attended or one year as a MHAM, whichever is the shortest.

- Lay MHAM wishing to be eligible to chair reviews to take part in a training session on chairing skills.
- Non-executive directors will be eligible to chair a review if neither of the other panel's members is eligible to chair it.
- Mental Health Act Managers already in post for a year or more at the time of implementation of this policy need to proactively opt in by notifying MHA Administration that they wish to be eligible for chairing. They will also be required to take part in a training session on chairing skills unless they have participated in such training in the last 12 months.

Report of Issues Arising at the Mental Health Act Managers Forum

Charlotte Hitchings, Chair of the Mental Health Act Managers Forum reported on the meeting of the forum of 5th February 2014. Points raised by the forum include:

- An enquiry regarding the benchmarking of Trust performance regarding compliance with the Code of Practice of the Mental Health Act compared to other mental health trusts. It was noted that the Annual Report of the Mental Health Act Commissioner with national trends will be reported to the next Mental Health Act Scrutiny Committee.
- Members of the forum expressed concern regarding the non-attendance of patients at some Mental Health act Reviews. The Committee discussed this concern and whilst recognising the benefits of attendance, noted that this is patient choice. It was agreed that the MHA administrators and clinical team will continue to offer advice regarding attendance to patients, and where a decision is made not to attend, will provide whenever possible a note of explanation regarding the decision.
- The use of a standardised template by Responsible Clinicians was discussed. It was recognised that the practice of a standardised template has proved beneficial for the social care reports. In the case of Responsible Clinician reports it was noted that it is not a formal requirement of the Responsible Clinicians to use a standardised template.. It was agreed to seek further information from the Mental Health Act Managers of the specific requirements requested, and that during the period of consideration a blank template could be offered to Managers as an "aide memoire". This to be reviewed at a future meeting of the Forum and then the MHASC.

ACTIONS REQUIRED BY THE BOARD

The Board is asked to note the content of this report.

SUMMARY PREPARED BY: Martin Freeman ROLE: Committee Chair

DATE: 21 March 2014