

AGENDA ITEM

3.14

MENTAL HEALTH ACT MONITORING COMMITTEE**REVIEW OF CONCLUSIONS OF SECTION 136 AUDIT AND CRISIS CONTINGENCY PLANNING**

Date of meeting	05/05/2021
FOI Status	Open/Public
If closed please indicate reason	Choose an item.
Prepared by	Phil Lewis, Head of Nursing, Mental Health Services
Presented by	Phil Lewis, Head of Nursing, Mental Health Services.
Approving Executive Sponsor	Executive Director of Primary, Community & Mental Health.
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome

ACRONYMS

CTMUHB	Cwm Taf Morgannwg University Health Board
S136	Section 136
CSG	Clinical Support Group



1.0 SITUATION/BACKGROUND

- 1.1 The purpose of this report is to provide the Committee with a summarised update on the conclusions drawn from the audit of section 136 assessments and in particular good crisis contingency planning.
- 1.2 Following presentation of the audit findings at the December 2020 meeting there were a series of recommendations proposed. These are as follows
- The audit and its conclusions were to be shared at the pan mental health Analysis, Improvement and Learning Lessons Group and cascaded through the CSG teams
 - The audit would be further developed for regular use and use a sample of service users across the service rather than narrowed to those who present for section 136 assessment.
 - The issue of co-produced crisis contingency planning would be encapsulated within the CTP training
 - A template for a crisis contingency plan would be developed and utilized to support training of staff in development of co-produced contingency plans. This would be shared with teams
- 1.3 During discussion following the presentation further recommendations were proposed.

2.0 SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT).

- 2.1 Further discussion was undertaken outside the meeting to develop the learning from the themes in addition to the recommendations above.
- 2.2 It was agreed that a system for monitoring and reviewing the incidents of secondary care patients presenting in out of hours crisis should be implemented capturing both data and trends as well as providing a platform to review cases on an individual basis.
- 2.3 An action plan has been developed to support the delivery of the learning and is attached in **Appendix 1** of this report.
- 2.4 This action plan will be reported back to the committee on an annual basis to up-date the committee on progress.

2.5 The Head of Nursing will oversee the action plan with support from lead nurses and CSG managers.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD

3.1 The committee endorses the action plan to support the development of patient centered co-produced crisis care and contingency planning.

3.2 The committee receives annual updates on progress.

4. IMPACT ASSESSMENT

<p>Quality/Safety/Patient Experience implications</p>	<p>Yes (Please see detail below)</p> <hr/> <p>Timely access to specialist treatment ultimately leads to an improvement in function, an improvement in patient experience, an improvement in quality of life and reduces the risk of complications such as cellulitis and septicaemia.</p>
<p>Related Health and Care standard(s)</p>	<p>If more than one Healthcare Standard applies please list below:</p> <ul style="list-style-type: none"> Safe Care Effective Care Timely Care Individual Care Staff and Resources Staying Healthy Dignified Care
<p>Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</p>	<p>No (Include further detail below)</p> <p>If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.</p>



	If no, please provide reasons why an EIA was not considered to be required in the box below.
	Not required.
Legal implications / impact	No known legal implications
Resource (Capital/Revenue £/Workforce) implications / Impact	Not applicable.
	Not applicable.
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

5. RECOMMENDATION -

5.1 The Committee is asked to:

- **NOTE** the report and **SUPPORT** the recommendations in section 3 of this paper.



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ACTION PLAN FOR IMPROVEMENT

Reference (Claim / Incident / Complaint)	Audit Outcomes for Mental Health Act Committee
Directorate	Mental Health Services
Lead Officer for Action Plan (name & title)	Phil Lewis, Head of Mental Health Nursing
Date action plan commenced	20.04.21
Synopsis of Concern	Following an audit of section 136 assessments and of particular interest those patients who are under secondary care mental health services, recommendations were made to improve crisis contingency planning for those on receipt of secondary care services.

Recommendation	Risk rating	Action needed	Progress & Evidence	Monitoring Arrangements <small>(State HB group where progress is reported)</small>	By who	Deadline date for completion <small>(Use traffic light system to indicate status)</small> & insert date of completion
The section 136 audit and its conclusions were to be shared at the pan mental health Analysis, Improvements and Learning Lessons Group and cascaded through the CSG Quality Safety and Patient Experience Groups		Head of Nursing to agenda and present audit at the meeting. HoN and Lead Nurses to take recommendations to CSG QSPE meetings	Minutes and notes of meetings Presented at Pan Mental Health AILLG on 12/03/2021 Presented at M&C QSPE Group 24/03/2021	Mental Health Act Monitoring Committee	Head of Nursing and lead nurses for mental health	30/04/2021



			Presented at Bridgend QSPE Group ?????			
			Presented at RTE QSPE Group 21/04/2021			
An audit process will be utilised to review and assure good quality crisis contingency plans across mental health services		Audit tool to be developed Audit to be registered by mental health audit committee Audit will be undertaken 6 monthly with feedback through the CTP monitoring committee as well as the pan mental health AILLG	Copy of up-dated audit Registration of audit Completed audit details and presentation	CTP Monitoring Group	CTP Lead	31/05/2021
A clear understanding of what good co-produced crisis contingency planning should be is shared across teams		A template crisis contingency plan to be designed This template will be added to the training	Copy of Template	CTP Monitoring Group	CTP Lead	31/05/2021



		package for CTP				
The presentation of a person in receipt of secondary care in out of hours crisis should be reported and monitored across the three CSG's to provide evidence of improving crisis contingency planning		<p>A mechanism to provide this data to be agreed</p> <p>A benchmark across the three CSG's to be agreed</p> <p>A review process of incidents and subsequent learning will be agreed</p>	Suite of documents to support the process of identification and review of secondary care patients presenting in out of hours crisis to be developed	Pan Mental Health AILLG	Head of Nursing and Lead Nurses for Mental Health	31/07/2021

Status of action:

GREEN	Complete
AMBER	In progress
RED	Missed deadline for completion - escalate



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