

enabling and empowering people to reach their potential and live fulfilling lives

Summary Report – Trust Board Meeting (Part 1)	Date: 30 January 2013
Report Title: Chair’s report - Mental Health Legislation Committee	
Agenda Item: 15	Enclosures:
Sponsor: Chair of MHLC	Presenter: Susan Thompson, NED
Report Author : Susan Thompson, Chair	
Report discussed previously at:	<i>MHLC</i>

Purpose of the Report and Action required		
To update the Board on the output from the MHLC meetings of 11 October 2012 and 10 January 2013	Approval	
	Discussion	
	Information	x

Executive Summary of Key Issues

Quality:

1. The Committee had received 2012 POMH (Prescribing high dose in combination antipsychotics) national benchmarking data, (May 2012), identifying a worsening picture. Action included a quality improvement pilot on Hazel, PICU which was reporting early success. Pilot to be re-audited and report to March MHLC.

Identified as a Medicines Management systems issue it was to be included as a risk.

2. S.136 audit identified AWP compliance but pressure in the system. A more systematic approach to management across AWP could help improvements. Referred to TWMG for action and report back in March 2013.

3. MHA Managers Responsibilities: Procedures agreed and Lead associate managers to be appointed to support the Chair/ MHA Admin functions. Training programme to be devised.

Process

4. The Committee has still to receive written reports from each SBU’s on their response to the CQC MHA annual report of 30 May (requested in July 2012). Action: SBU CDs to provide brief written report to March 2013 Committee;

5. The Committee has struggled to secure a meaningful dashboard to monitor compliance, some reports are deferred;

Attendance

6. Poor senior management attendance at Committee meetings

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Which Strategic Objective does this paper address	
Y	Y
Excellent service user access and experience	Y
Excellent partnership working with other organisations	Y
Effective engagement and improvement in staff satisfaction	Y

Link to Fit for the Future Implementation Plan	
<i>Specify objective number</i>	N/A

Corporate Impact Assessment	
Quality and Safety implications	Yes
Corporate Risk Register	<i>Yes-medicines management</i>
FGEB (Trust ALE replacement)	
IG Toolkit	
Equality Impact Analysis	<i>Diversity/BME population of patients</i>

Recommendations to other committees
<ul style="list-style-type: none"> • <i>TWMG to review s.136 audit and respond with a plan;</i> • <i>Q&S to consider broader medicines management/quality and safety issues from PoMH findings</i>

Recommendation/Decision
The Board is recommended to note the report

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1. Introduction

- 1.1. The Mental Health Legislation Committee monitors compliance with Mental Health Legislation and Safeguarding.
- 1.2. Meetings are bi-monthly.
- 1.3. The Committee is supported by the Public Protection and Safeguarding Management Group.

2. Report

2.1. Medicines Management

- 2.1.1. The Committee previously scrutinised 2012 POMHS national benchmarking data, (May 2012), which identified a worsening picture for AWP in relation to PRN and high dose anti-psychotic prescribing practices. This resulted in urgent referral of the issue to the relevant clinical groups to understand cause and effect. Led by the Deputy Medical Director, Harvey Rees, a quality improvement pilot has begun on Hazel, PICU, with some early evidence of success reported to the Jan 13 meeting. Pilot to be re-audited and report to March MHLC.
- 2.1.2. Identified as a Medicines Management systems issue to be included as a risk.

2.2. s.136 MHA report

- 2.2.1. Audit against Code of Practice and RCPsych guidelines identified good compliance with safety and quality. However, AWP lacked a system wide response to delivery of s.136 MHA service. Pressure was identified particularly in the OOH and wait >6 hours for MHA assessment. The audit revealed AWP staff were largely meeting their obligations but that a system wide approach could offer improved performance. Engagement with partner organisations was essential to drive up standards. Action: refer to TWMG for review and report back to March 2013 Committee with plans for improvement.

2.3. Diversity report

- 2.3.1. Received report on progress of Diversity Steering group and monitoring across SBUs suggested increase in BME patient population (linked to national trends). SBUs in the process of determining equality priorities for 2013. Requested they consider BME issues.
- 2.3.2. It was agreed BME data and Trust response to diversity issues should be referenced in the Quality accounts. Action Ann Tweedle.
- 2.3.3. For Chair to raise with Q&S Committee and how it would receive/scrutinise BME data

2.4. MHA Report, CQC

- 2.4.1. The SBUs written responses to the annual report (reported on 30 May 2012) remained outstanding, although the Committee had received verbal reports from

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SSBU and AOWA (in patient) SBU that the CQC report had been considered by SBU Governance Committees and action taken.

2.4.2. Reports requested for March 2013 meeting.

2.5. MHA Managers and Administration

2.5.1. The Committee approved procedures for supporting the associate managers, including the appointment of associate leads to support MHA associate programme and MHA admin team.

2.5.2. The MHA admin team has had an away day and agreed actions to develop the team and support which are being considered by management.

2.6. Social Care lead

2.6.1. Phil Wilshire had been appointed as social care lead at AWP and was invited to the next meeting to give his first impressions and to report on his plans

2.7. Safeguarding

2.7.1. the Committee was due to receive a report on Safeguarding but this was postponed until March 2013 due to absence of a key contributor on carer leave from the organisation. (Highlighted the need for prioritising resource to ensure Committee could deliver its workplan.)

2.8. Attendance/Resource for Committee

2.8.1. Poor executive and senior management attendance at meetings generally (with notable exceptions being SSBU and AOWA (in Patients)) despite work plan being "everyone's business". This Committee would be merged with the Q&S Committee from April 2013 and its work included in the workplan for Q&S in 2013/14.

Susan Thompson, Chair

25 January 2013

Report for the Avon & Wiltshire Mental Health Partnership Trust Board – 30 th January		
For the Part 1 Session sponsored by		
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