

Trust Board Mental Health Act Sub-Committee

Minutes of the Trust Board Mental Health Act Sub-Committee held on 24 September 2018, at 2:00pm, in the Board Room, 1st Floor, Trust HQ, 9 Alie Street, London E1 8DE

Present:	Jenny Kay	Non-Executive Director (Chair)
	Guy Davis	Associate Director of Mental Health Law
	Ted Jordan	Associate Hospital Manager
	Brian Merison	Associate Hospital Manager
	Tony Oteh	Associate Hospital Manager
	Rosalind Shaw	Associate Hospital Manager
	Beverley Woodburn	Associate Hospital Manager
In Attendance:	Cathy Lilley	Associate Director of Corporate Governance
	Elizabeth Holford	Corporate Minutes Taker
Apologies:	Jo Turner	Clinical Specialist in Mental Health Law
	David Markovitch	Mental Health Law Manager
	Sazi Banda	Mental Health Law Manager
	Susanna Ferrar	Associate Hospital Manager
	Diane Beaven	Associate Hospital Manager
	Sonam Bligh	Associate Hospital Manager
	Stephanie Boyle	Associate Hospital Manager
	Susanna Ferrar	Associate Hospital Manager
	Joyce Frizzelle	Associate Hospital Manager
	Joe Ogunremi	Associate Hospital Manager
	Joanne Share-Bernia	Associate Hospital Manager
	Janina Struk	Associate Hospital Manager
Jo Ukemenam	Associate Hospital Manager	

The minutes are produced in the order of the agenda

1. Welcome, Introductions and Apologies

1.1. Jenny Kay welcomed attendees to the meeting. Written apologies received were noted as above.

2. Minutes and Matters Arising (action log)

2.1. The minutes of the previous meeting held on 8 June 2018 were **APPROVED** as an accurate record.

2.2 Action Log:

- The Committee considered the action log and noted the updates

- It was agreed that in future closed actions would be removed from the action log presented at the meeting.

2.3 **Matters Arising:**

The Committee noted the following:

- **QI projects:** QI projects have been halted in favour of different methods. Efficiency and quality are being improved via several routes including the 'Learning from Experience' discussions at each MHA Sub-Committee meeting
- **Hand-written/typed reports:** Flexibility is possible, for example, the Chair or a panel member may type proceedings during the hearing. Guy Davis will liaise with IT to ensure there is laptop connectivity to the Trust network in settings where hearings are held
Action: Guy Davis
- **Protection of rights:** Bedfordshire and Luton have been using forms previously provided by EPUT.

3. **AHM Appointments and Terminations (standing item)**

- 3.1. Guy Davis advised that there had been no appointments or terminations.

It is uncertain whether more AHMs are needed in Bedfordshire and Luton. AHMs have reported a mixed picture as to whether they have sufficient opportunity to attend panels and to practise their skills.

- 3.2. The Committee **RECEIVED** and **NOTED** the verbal update

4. **Hospital Managers Power of Discharge Policy Review**

- 4.1 Guy Davis introduced the policy review.

The Committee noted that:

- The policy must be reviewed every three years
- ELFT's policy is based on national policy, which has not changed.
- Reference in section 6.6. to the power to cancel AHM appointments: this would be in the event that ELFT ceased to provide a service in a particular area. It should be made clear that this would be exceptional and is not related to performance
Action: Guy Davis
- Comments are required from AHMs within two weeks.
Action: All AHMs

- 4.2 The Committee **RECEIVED** and **NOTED** the Discharge Policy review.

5. **Mental Health Law Annual Report**

- 5.1. Guy Davis introduced the report.

The Committee noted that:

- The Mental Health Law Annual Report will be submitted to the Trust

Board

- The contents of various reports have been amalgamated. The report now covers AHM activity, Trust activity, DoLS, ethnicity data, reporting to Committees, training and AHM attendance at Committee meetings
- There has been a marked rise in detentions. This is a national as well as a local trend. More detailed data on multiple detentions, and detentions per month (run-rates), is needed to understand underlying causes

Action: Guy Davis

- There has been a significant increase in discharges:
2015/16: 1 detention, 4 CTOs
2016/17: 1 detention, 1 CTO
2017/18: 12 detentions, 4 CTOs

This is not associated with any increase in beds or other changes in service

- The high rate of discharges raises the question of why clinicians are not discharging sooner.

5.2. The Committee agreed recommended that:

- Figures will be analysed by a clinician. The Chief Medical Officer, Dr Paul Gilluley will attend a future meeting to discuss the findings. Discharged cases will be reviewed. Consideration will be given to whether there are common factors associated with discharges, for example, a particular panel

Action: Guy Davis to liaise with Paul Gilluley

- Run-rate data will be added to the report before it is presented to the Trust Board in November 2018

Action: Guy Davis

- All AHMs should send comments to Guy Davis.

Action: All AHMs

5.3. The Committee **RECEIVED** and **NOTED** the report.

6. Hospital Managers Power of Discharge Jargon Update

6.1. Guy Davis updated the Committee on the findings from an initial survey to obtain AHM views on what hearings should be called.

In discussion the Committee noted that:

- A very large number of suggestions had been made. A shortlist will be compiled and AMHs will be further surveyed for views

Action: Guy Davis

- The name for hearings should give service users a clear idea of what to expect, and must also be in keeping with the Mental Health Act and Code.

6.2. The Committee **RECEIVED** and **NOTED** the update.

7. Update on MHA Review

- 7.1 Guy Davis updated the Committee on AMH involvement in the review of the Mental Health Act, i.e. consultation event re HM power of discharge) and MC amendment Bill

The Committee noted that:

- Consultation events had been held, including in London, but had not met expectations. For example, the material made available at the London event did not make clear the difference between an AHM and a service manager. There was much confusion and anger, as confirmed by Ros Shaw who had attended the disappointing London consultation event
- The role of the AHM is determined by the Code to the Act, not the Act itself
- There needs to be discussion on the value of AHMs and how the value can be maintained. One factor in the review is the cost of different options
- Feedback to date has suggested strengthening the role of tribunals.

- 7.2 In discussion the Committee noted:

- Jenny Kay strongly encouraged all AMHs to respond directly to the consultation
Action: All AHMs
- Guy Davis will circulate a link to the website, and a presentation which highlights themes to consider. The Board had agreed that it would not be appropriate for there to be a single Trust response.
Action: Guy Davis

- 7.3 Guy Davis provided an update on the current state of the review of DoLS:

- The Law Commission had reviewed DoLS 3-4 years ago, followed by a report to Government 18 months ago
- An Amendment Bill was scheduled for its second reading on the day after the summer recess, which would not allow time for proper debate. There will be a sitting in October 2018 with further amendments proposed
- It would make sense to postpone discussion until the review of the MHA is complete
- Ros Shaw is in discussion with a barrister over several matters including whether clinicians or lay people will conduct DoLS reviews. Ros will share findings at the next meeting.
Action: Ros Shaw

- 7.3 The Committee **RECEIVED** and **NOTED** the report.

8. Learning From Experience: AHMs Feedback

8.1 Paper reviews

- AHMs felt that paper reviews may be increasing as reported in the Annual Report
- These numbers are a small proportion of the 2000

admissions/detentions annually

- The John Howard VCentre almost always has hearings rather than paper reviews.

8.2 Receipt of papers / administration matters

- AHMs reported that they still frequently need to contact the office and ask for papers to be sent, rather than receiving them automatically. Some AHMs continue to have problems downloading papers from secure emails. Advice was given at the meeting by other AHMS. AHMs should be informed in advance of whether the review is a paper one or a hearing.
- There is still a feeling that some AHMs do fewer hearings than is consistent with the number of times they put themselves forward. AHMs should be informed if they are not selected. The monitoring system will be resurrected.

Action: Guy Davis

8.3 Discharge of young parents

AHMs commented on the rewarding nature of their work, for example discharging a young mother which enabled her to breast feed.

8.4 Conflict of interest

Guy Davis confirmed that AHMs should make an individual judgement as to whether there is a conflict of interest where the patient is known to, or feels they are known to, a panel member.

8.5 Reasons for discharge

Guy Davis confirmed that it is at the discretion of AHMs on the panel to decide whether the criteria for continuing to detain a patient are met. AHMs should tick yes/no to each criterion.

Action: Guy Davis

8.2 The Sub-Committee **RECEIVED** and **NOTED** the matters raised by AHMs.

9. Any Other Business

9.1 Staffing issues

Guy Davis advised the Committee that:

- Paper reviews will not be located at the John Howard Centre in order that security systems are not needed
- The Mental Health Law department is being centralised at the former E1 Medical Centre in Brick Lane. There is space for 15 staff and a meeting room for paper reviews.

9.2 Contact details

- The office / Mental Health Law team contact details will be updated and distributed

Action: Guy Davis

- AHMs should contact Guy Davis directly if their contact details change.

Action: AHMs

9.3 **'Windrush'**

An A'HM spoke of their experience as part of the Windrush generation. Jenny Kay explained ELFT's duty and the careful way in which it is being implemented.

9.4 **Training**

This will be included on the agenda for the next meeting.

10. **Date of Next Meeting**

Tuesday 4 December 2018 at 10:00 – Boardroom, Trust HQ

The meeting closed at 3:50 pm