

Escalation and Assurance Report

Report from: Mental Health Legislation Committee (“MHLC”)

Date the meeting: 21.07.22

Key discussion points and matters to be escalated from the discussion at the meeting:

Alert:

- The Committee (“C”) agreed that no issue required urgent escalation.

Advise:

- C asked the team to consider (for the next meeting) whether additional information could be presented in relation to the **ethnicity** of service users subjected to restrictive practices (in the way that their sex is currently).
- C was presented with – and scrutinised – the outcome and learnings from an interesting (anonymous) management-led survey (going beyond the scope of the annual national staff survey) into “**what does it really feel like to work on these wards**”. The evidence indicated that: (a) staff welcomed this; (b) local management and leadership really matters to staff and can (when it is engaged, open and effective) make a big difference (including to their overall job satisfaction); (c) while there are some areas of outstanding practice, there are clearly some issues which require action (with further engagement being progressed). C would welcome an update, in 6 months, in relation to the same.
- C heard and tested evidence in the context of a useful report, from management, regarding the “searching of patients and their property”. Among other things, C noted evidence of a rise, on inpatient wards, of AWOL, the possession/use of **illicit substances**, and **self-harm**. Although the headline figures re incidents of violence and aggression had dropped, C heard that that could well be significantly **under-reported**. C would like a further report, in 12 months. It also asked for more granular information in some areas: e.g. in relation to reported sexual abuse/behaviour (which appeared, to C, to be too wide a category to enable C to properly understand the level of seriousness of such incidents).
- It may be worth noting that attendance at this meeting, from a few regular attendees, was a little down – that is not a particular concern at this point, however, and C was quorate and effective in terms of the range/quality of input.

Assure

- C was grateful for the continuing input from its **involvement partners**: one was able to attend in person and made a significant contribution to the meeting; another made some excellent points and challenges in writing.

- C continued (and shall continue) its innovative and progressive work, using the **“Care Trust Way”** change management methodology, with a specialist “coach”, to seek ways to further improve its effectiveness. Ideas were discussed and developed, including for example in relation to further encouraging “the voice” of service users (perhaps through the engagement of an “advocate”).
- C was presented with – and reflected upon – some interesting (further and ongoing) work and thoughts from the excellent **“Positive & Proactive Group”**. Its findings and views were helpful to C and, among other things, provided further assurance in relation to the wider body of evidence it has to draw on.
- C obtained assurance re progress in relation to **“Hospital Managers”** (and was grateful for the continued engagement and contribution of this important group of people), most obviously in terms of a successful recruitment round and some additional support provided by the Trust. C shall continue to review whether this group has sufficient support.
- C scrutinised – as ever – the data and evidence regarding the use of **restrictive practices** within the Trust. It was satisfied that the now relatively long-term trend of relatively low and declining use of such practices had been maintained during the most recent period, on the evidence before it.
- C obtained assurance that (carefully considered and constructive) **feedback** had been provided to the government, on behalf of the Trust, regarding the consultation re changes to the Mental Capacity Act with regard to the creation of Liberty Protection Safeguards (formally DoLS).
- Various other matters – including some more administrative matters – were progressed or dealt with, appropriately, within the meeting.

Risks discussed:

- Board assurance framework and strategic organisational risk register noted/discussed.

Report completed by: Simon Lewis, NED, Chair of MHLC

Date: 31.07.22