

Escalation and Assurance Report (AAA+D)

Report from the: Mental Health Legislation Committee

Date of meeting: 27.07.23

Report to the: Board of Directors

Key escalation and discussion points from the meeting

Alert	Action (to be taken)	By Whom	Target Date
<p>1. The Committee (“C”) did not consider any matter arising from the meeting to require a formal alert.</p>			
<p>Advise:</p>			
<p>2. Associate Hospital Managers reported some (albeit limited) concerns relating to the quality of some reports for Associate Hospital Manager meetings/hearings.</p> <p>3. There has been a rise in race-related abuse, from service users towards staff. The Trust is working with staff teams to support them and with the police. C will look into this issue further at a future meeting.</p> <p>4. C benefitted from an exceptionally insightful session from Ms Eacret, the manager of Heather ward, about how physical interventions are, in practice, carried out and managed on wards. C recommends that the full board gets an opportunity to benefit from it. C will continue to explore how resources can be best used to improve the safe and effective execution of such interventions, where they are necessary (including the adoption of new/more equipment such as smaller leg bags and safety pods). A further training need was identified (re “positive behavioural support”).</p> <p>5. C thanked Carole Panteli for her exceptional contribution to C as both chair and member.</p>			
<p>Assure:</p>			
<p>6. Ethnicity data is now available for Associate Hospital Managers, enabling the Committee to understand another aspect of diversity within that group of important decision-makers.</p> <p>7. Key metrics on the dashboard remain strong and in line with or above targets.</p> <p>8. The number of blanket restrictions and restraints had fallen.</p> <p>9. An independent review of extended/ongoing use of blanket restrictions on Heather ward has taken place, in response to C’s specific challenges. A written report, and any associated action plan, shall be considered at C’s next meeting.</p>			

10. The Trust had identified and analysed **key themes** arising from the 5 mental health act monitoring review visits during 2022-2023.
11. The **Mental Capacity Act audit** continued to show improvements. There is evidence of better practice being embedded over time. Another audit is planned for Nov 2023.
12. The Trust's **in-house lawyer** shall be invited to be formal member of C.

Decisions / Recommendations:

13. C approved:

- (a) The minutes from the previous meeting.
- (b) The Associate Hospital Managers report.

Risks discussed:

- See above.

New risks identified:

- N/A

Report completed by:

Simon Lewis
Committee Chair and Non-Executive Director
16.08.23