

Escalation and Assurance Report (AAA+D)

Report from the: Mental Health Legislation Committee

Date of meeting: 24.11.22

Report to the: Board of Directors

Agenda Item

11

Key escalation and discussion points from the meeting

Alert Action (to be taken) By Whom Target Date

1. The Committee ("C") did not think any matters required a formal "alert".

Advise:

- 2. Other comparable trusts have had similar issues re **timeliness of reports/documents** re tribunal and "hospital manager" hearings. Our service levels are more ambitious than some. Consideration to be given to the most appropriate service levels.
- 3. An **involvement partner** shared some concerns from other service users about their own personal experiences as service users. Interim COO agreed to follow up, with a view to understanding more, taking any appropriate action, and reporting back to C.
- 4. A judge (of a tribunal hearing) requested an alternative **room for a hearing**, on the basis that the allocated room was considered unsuitable.
- 5. C was updated that, following the specific escalation/alert raised by C in its previous report, there had been some positive discussions, and a proposal for **additional resource** was in the process of being submitted.

Assure:

- The dashboard data was considered/scrutinised.
- 7. C received a useful update (on matters such as "low holds", use of force generally, and some work regarding sexual safety) which helped C to "triangulate" data from the **Positive and Proactive Forum**, which continues to do some excellent work.
- 8. C discussed, and obtained reasonable assurance in relation to, an update re recent **CQC monitoring visits** and the action plan in response to CQC feedback.
- 9. C considered an interim report re the **Mental Capacity Act** (focused on the inpatient audit and improvements).
- 10.C discussed the half-year report re the Mental Health Act activity. C asked for some further information, within future iterations, re benchmarking, if available.
- 11. The meeting was observed by at least one member of staff for developmental purposes. C remains keen to be open and transparent in its work, and to encourage and support career progression.

Decisions / Recommendations:

- 12. Approved report re Hospital Managers.
- 13. Approved half-year report re Mental Health Act activity (subject to a matter relating to "gender descriptors" being reviewed).
- 14. Approved outline plan re Audit Items.



Risks discussed:

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

New risks identified:

• Nothing material at board level

Report completed by:

Simon Lewis Committee Chair and Non-Executive Director 23.12.22