

DATE OF MEETING	Tuesday 17 th June 2025 13:30-15:45
VENUE	Microsoft Teams

PRESENT	Penny Jones, Chair
	Paul Deneen, Vice Chair
	Dafydd Vaughn, Independent Member
IN ATTENDANCE	Phillip Robson, ABHUB Vice Chair
	Leanne Watkins, Chief Operating Officer
	Jennifer Winslade, Director of Nursing
APOLOGIES	Rani Dash, Director of Corporate Governance
	Tracey Partridge-Wilson, Deputy Director of Nursing
	Louise Turner, Divisional Director of Mental Health and Learning Disabilities
	Rebecca Goode, Head of Operational Transformation
	Kolade Gamel, Service Group Manager
	Kavitha Pasunuru, Divisional Director
	Helen Doodoo, General Manager, Mental Health and Learning Disabilities
	Naomi Murtagh, Board Business Manager
	Fern Woodhead, Governance Support Officer
	Tracy Daszkiewicz, Director of Public Health
	James Calvert, Medical Director
OBSERVING	Gavin Thomas, Governance Support Officer

MHLD/1706/01	Welcome and Introductions
	The Chair welcomed everyone to the meeting.
	Apologies for Absence
	Apologies for absence were noted.
Declarations of Interest	
	There were no Declarations of Interest raised relating to items on the agenda.

<p>MHLD/1706/02</p>	<p>Draft Minutes of 9th April 2025 Meeting</p> <p>The minutes of the Mental Health and Learning Disabilities Committee held on 9th April 2025 were agreed as a true and accurate record of the meeting.</p> <p>The Committee APPROVED the minutes.</p>
<p>MHLD/1706/03</p>	<p>Committee Action Log</p> <p>The Committee received the action log and was content with progress made in relation to completed actions and against any outstanding actions.</p> <p>The Committee NOTED the action log.</p>
<p>MHLD/1706/04</p>	<p>Committee Forward Workplan 2025/26</p> <p>Rani Dash (RD), Director of Corporate Governance, provided the Committee with an overview of the Committee forward workplan for 2025/26, advising the workplan covers the areas of responsibility delegated to the Committee and outlines the initial focus for the year ahead.</p> <p>The Committee was advised that the workplan would come to each Committee meeting for oversight.</p> <p>The Committee APPROVED the Committee work plan and NOTED that it would be brought forward to each future Committee meeting for oversight.</p>
<p>MHLD/1706/05</p>	<p>ABUHB Mental Health Act Compliance Report</p> <p>Louise Turner (LT), Divisional Director of Mental Health and Learning Disabilities, provided the Committee with an overview of the Mental Health Act Compliance report for quarter 4 January–March 2025.</p> <p>LT highlighted that general activity and detentions under the Act were higher but within normal variation. There was a higher usage of Section 4, and efforts were being made to reduce this by working with consultants and section 12 doctors. Phillip Robson (PR), ABUHB Vice Chair, suggested that there was a need for the Committee to monitor closely the use of section 4 as an increase may indicate pressures on the Division. Leanne Watkins (LW), Chief Operating</p>



Officer, confirmed that the Health Board had been under pressure, as had the rest of Wales.

LT noted that the usage of Section 136 had been slightly higher than average but was not a cause for concern. The Committee was informed of efforts ongoing to promote the use of core services, including 111 press 2.

The Committee was advised that hospital managers meetings were now being held with 10 new hospital managers recruited, which had resulted in significant progress in reducing the backlog of cases and improving the capacity. Paul Deneen (PD), Independent Member, commended the Mental Health Act team for their efforts in recruiting hospital managers and reducing the backlog.

Paul Deneen (PD), Independent Member, highlighted ongoing issues with receiving copies of executed Section 135 warrants. Louise Turner, Divisional Director, agreed to further discussions with the police and courts to address this.

The Committee **NOTED** the information provided on the use of the Mental Health Act, noting the ongoing efforts to manage compliance, address system pressures, and improve processes in collaboration with partners.

MHLD/1706/06

HIW Mental Health Act Annual Report – ABUHB Response

Louise Turner (LT), Divisional Director of Mental Health and Learning Disabilities, presented the report, advising that it provided insight into the challenges faced by Mental Health and Learning Disability services, including community-based care. Alongside these challenges, the report also highlighted numerous positive developments. LT commended the continued dedication and resilience of the workforce, who remain committed to delivering high-quality care and treatment in a continually evolving environment.

The Committee was advised that throughout 2023/24 HIW had conducted 26 onsite inspections across a range of healthcare settings, including both NHS and independent



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hospitals and an overview was provided of the action plan based on the HIW recommendations for improvements.

Leanne Watkins (LW), Chief Operating Officer, advised the Committee that there were still improvements required in the division with the Health Board continuing to work towards meeting the standards of quality. Assurance was provided that the division was undertaking internal self assessments to ensure the Health Board was improving on quality and would continue to monitor the action plan.

Phillip Robson (PR), ABUHB Vice Chair, highlighted the importance of addressing least restrictive practice areas within the division and requested for a report on the topic along with a process update at a future meeting.

Action: Chief Operating Officer/Committee Secretariat

The Committee **NOTED** the self-assessment, associated RAG rating, the recommendations and actions that would be integrated within the Divisional Improvement Plan and the governance and assurance mechanisms in place to monitor progress against the agreed recommendations and actions.

Right Care Right Person

Kolade Gamel (KG), Service Group Manager, provided the Committee with an update of the implementation of the Right Care, Right Person (RCRP) approach within the Health Board.

The RCRP model had been developed by Humberside Police, with the aim to ensure that individuals experiencing health or social care crises receive the most appropriate response from the right professional. The approach had been adopted nationally across Wales, with the Health Board working closely with Gwent Police and local authorities to implement the model locally.

The implementation consisted of the following four phases:-

- Phase 1: Triage and call handling – successfully implemented with strong engagement from police partners;



- Phase 2: Development of a joint Missing Persons Policy – signed off by both ABUHB and Gwent Police;
- Phase 3: Conveyance and transport of individuals – identified as the most complex phase and would be deferred for later implementation due to operational and financial challenges;
- Phase 4: Section 135 and 136 procedures – completed and operational.

The Committee noted that there were regular multi-agency meetings involving police, local authorities, and third-sector organisations, where the forum had enabled shared learning and problem-solving around the operational issues. In addition, the Health Board had received positive feedback from third-sector partners, particularly regarding the clarity of roles and responsibilities and the ability to advocate for patients more effectively.

KG highlighted that during implementation there had been challenges due to not receiving additional funding which had created pressure on the Health Board in supporting the approach. In particular for phase 3 where further planning was required to ensure 24/7 coverage, currently the Health Board were deploying transport alongside the police to have to ensure patients are brought to safety.

Penny Jones (PJ), Chair, requested that a future report be brought to the Committee, to include update on the progress of phase 3 and anonymised case studies.

Action: Chief Operating Officer/Committee Secretariat

The Committee **NOTED** the update on right care right person.

MHLD/1706/08

Mental Health Services related Performance and Outcomes

The Committee was provided with an update on the performance and outcomes of Adult Mental Health Services, including Child and Adolescent Mental Health Services (CAMHS).

Adult Mental Health Services:



Louise Turner (LT), Divisional Director of Mental Health and Learning Disabilities, informed the Committee that the division had made significant progress in delivering its 2024/25 priorities. These priorities included quality improvement initiatives and advancements in digital innovation. LT reported that the division had achieved the 90% target for both Part 1A (assessment in primary care) and Part 1B (intervention within 28 days), marking a notable improvement in service accessibility and timeliness.

The Committee was advised that work was still ongoing to improve compliance with Care and Treatment Planning and to reduce waiting times for psychological therapies. A review of delivery models and workforce planning was underway to support sustainable service delivery and digital transformation.

Kolade Gamel (KG), Service Group Manager, advised the Committee that psychological therapies were tailored to individual needs and may include clinical psychology, occupational therapy, or peer support. The single point of access aimed to streamline early intervention and reduce reliance on secondary care.

The Committee requested a short report on the impact of Robotic Process Automation (RPA) with more detail on implantation to come to the next Committee meeting.

Action: Chief Operating Officer/ Divisional Director of Mental Health and Learning Disabilities/Committee Secretariat

CAMHS:

Kavitha Pasunuru (KP), Divisional Director, advised the Committee that CAMHS had achieved full compliance with Part 1A and 1B targets and was the only Health Board in Wales to meet the neurodevelopmental target.

The Committee noted that a new neurodiversity early support hub had been launched to provide support with or without a formal diagnosis and a task and finish group was reviewing the under-5s pathways to improve efficiency and reduce waiting times.



MHLD/1706/09

KP informed the Committee that the Health Board was experiencing increased pressure related to children's diagnostic referrals. In response, cases were being prioritised individually, with close collaboration taking place with schools. KP emphasised the importance of distinguishing between children who require formal diagnostic assessments and those who would benefit from support without a diagnosis. The approach is being guided by the Portsmouth model.

The Committee **NOTED** the update on Mental Health services and CAMHS.

111 Press 2 Performance and Outcomes

Kolade Gamel (KG), Service Group Manager, provided the Committee with an update on the 111 press 2 performance and outcomes, advising that the service was a single point of access for Mental Health support. The service had been recognised as a significant success within the Health Board and continued to demonstrate strong performance metrics.

The Committee was advised that 96% of calls received by the service were resolved at the initial contact, with only 4% escalating to a practitioner, indicating the effectiveness of triage and early intervention. Of the 4% of cases escalated to a practitioner, over 50% were seen within four hours, with the remainder seen within the 72-hour target window. While Gwent received a high volume of calls due to its size, comparative data with other Health Boards was not available.

The Committee was advised that the majority of abandoned calls occurred within the first two minutes of phoning, and that it was often due to callers deciding not to proceed after hearing the options, rather than due to access issues.

KG advised the Committee that the team were working toward establishing a 24/7 integrated care offer, with aspirations to achieve it by the end of the year.

The Committee **NOTED** the performance of the 111 press 2 service.



Tracey Partridge-Wilson (TPW), Deputy Director of Nursing, provided the Committee with an update of Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DOLS), to provide assurance on the implementation of MCA in clinical practice and outline the governance structure in supporting compliance and training.

The Committee noted that the MCA and DOLS were legal processes established in 2005, with an expectation of transitioning to Liberty Protection Safeguards (LPS), which had been delayed.

TPW advised the Committee of the positive work that been completed, highlighting that the Health Board had an MCA specialist team providing expert advice, with an MCA training programme which was seeing a good uptake. An active governance mechanism was in place that included an MCA regional forum, safeguarding group and reporting to national bodies.

The Committee noted the following risks:-

- DOLS backlog in hospital settings risk - patients being deprived of their liberty without legal authorisation.
- Human rights and safeguarding risk – incomplete documented capacity assessments which left patients vulnerable.
- Financial risk – the consortium funding model placed disproportionate cost pressures on the Health Board with specialist assessments remaining expensive.
- Governance risk- accountability remained fragmented with operational responsibility had been spread across the Health Board divisions that was creating insufficiencies and delays.
- Workforce risk – capacity had reduced due to not having enough trained signatories and hospital based assessments were critically under delivered.

The Committee was assured that a more detailed report on DOLS would be going to the Executive Committee to continue to escalate the risks.

Jennifer Winslade (JW), Director of Nursing, advised the Committee that the delays in DOLS assessments with hospitals were due to the speciality being in the community



	<p>and the financial risk required an assessment and review with the Executive team. Phillip Robson (PR), ABUHB Vice Chair, suggested involving the Regional Partnership Board (RPB) to address the multi-agency nature of the issue and explore potential resource injections.</p> <p>Louise Turner (LT), Divisional Director of Mental Health and Learning Disabilities, advised the Committee that the Mental Health bill was currently being review by the UK parliament and would affect Wales. LT assured the Committee that once released an update would come to the Committee for oversight.</p> <p>Action: Chief Operating Officer/ Divisional Director of Mental Health and Learning Disabilities/Committee Secretariat</p> <p>The Committee acknowledged the areas of good practice and NOTED the significant delays in DoLS assessments, particularly in hospital settings, and the associated legal and human rights risks and the intent to present an SBAR to the Executive Committee on the current DoLS arrangements and options for improvement.</p>
MHLD/1706/11	<p>Power of Discharge Sub-Committee</p> <p>The Committee NOTED for information and noted the next meeting would be in July 2025.</p>
MHLD 1706/12	<p>Mental Health & Learning Disabilities Final Internal Audit Report</p> <p>The Committee NOTED for information.</p>
MHLD/1706/13	<p>Items to be Brought to the Attention of the Board and Other Committees</p> <p>There were no key risks or issues for reporting or escalation to the Board or other Committees.</p>
MHLD/1706/14	<p>Any Other Urgent Business</p> <p>There was no urgent business.</p>
MHLD/1706/15	<p>Date of the Next Meeting: 9th September 2025</p>



