

**Swansea Bay University Health Board**  
**Hospital Managers Power of Discharge Committee**  
**Notes of Meeting held on Tuesday 23<sup>rd</sup> February 2021**

**Present:**

Jackie Davies (JD)– Chair  
Maggie Berry (MB) – Vice Chair (Independent Member)  
Janet Williams (JW) – Head of Operations  
Penny Cram (PC) – Interim MHA Manager  
David Barton (DB) – Associate Hospital Manager  
Kathryn Crabbe (KC) – Associate Hospital Manager  
Christine Castle (CC) – Associate Hospital Manager  
John Copley (JC) – Associate Hospital Manager  
Margaret Pritchard (MP) – Associate Hospital Manager  
Sue Abbott (SA) – Associate Hospital Manager  
Kenneth Morgan (KM) – Associate Hospital Manager  
Rosemary Morgan (RM) – Associate Hospital Manager

1.	<p><b>Preliminary Matters</b></p> <p>I. <b>Apologies for Absence</b> No apologies were received</p> <p>II. <b>Declaration of on interests</b> No declarations of interest were made</p>	
2.	<p><b>Matters for Consideration</b></p> <p><b>JD &amp; JW</b> noted the groups thanks following the resignation of Associate Member David Cooper. Letters sent from Committee and from <b>JD</b>.</p> <p><b>Accuracy and matters arising from minutes of meeting held 18/09/2020</b></p> <p><b>JD</b> asked whether any Quality Checks had taken place.  <b>JW</b> confirmed that no physical checks had taken place. Vaccinations have been offered to the team in order to prepare for checks to begin on the wards again. Plans have been delayed due to Covid outbreaks in Cefn Coed, preventing external parties attending the wards. Getting ready plans continue.  <b>CC</b> asked whether Quality Checks could be carried out electronically.</p>	

<p><b>JW</b> said that checks of electronic notes and systems were happening however, no checks are currently happening where there are patients notes that are not electronic.</p> <p><b>JW &amp; PC</b> to discuss opportunities for quality checking remotely</p> <p><b>KM</b> asked about how progress on the paper being prepared by Pam Wenger would be communicated to the Committee. (Remuneration for Hospital Managers)</p> <p><b>JD</b> explained that the paper is being prepared for the Legislative Committee and an update provided later in this meeting</p> <p><b>MB</b> (referring back to quality checks) stated that she is carrying out governance visits at GP surgeries with Primary Care in the coming weeks, which may provide useful examples of processes for virtual checks.</p> <p><b>JD</b> asked <b>JW</b> about the Future Ways of Working and the current plans to provide iPads for use by members. <b>JW</b> repeated the pre-Covid background to the situation, and asked for comments:</p> <p><b>KM</b> asked whether the iPads would be for the exclusive use within the Swansea Bay Health Board</p> <p><b>KC</b> said that if there is a return to face to face meetings an iPad would be needed for the secure electronic transfer of reports, etc</p> <p><b>MB</b> highlighted the Data Protection and Information Governance protocols for the use of remote devices, which allow use for other means.</p> <p><b>CC</b> highlighted the importance of security of patient notes, and a secure portal would be the best option</p> <p><b>JD</b> and <b>JW</b> agreed that the use of Admin Control on the iPads seems to be the best option</p> <p><b>JC</b> agreed with <b>CC</b> that discussions have been lengthy and action needs to be taken. Also asked about insurance for devices. <b>JW</b> said that new users of iPads are provided with training on all aspects of use, including Information Governance, and personal use protocols. Insurance is also provided. Usage is monitored by the Health Board IT Department.</p> <p><b>JD</b> suggested that iPads are ordered for all members – and asked whether iPads with larger screens may be available</p> <p><b>KM</b> asked that minutes from the last meeting were re-circulated</p> <p><b>JD</b> suggested that minutes are not embedded in the meeting invite</p> <p><b>JW</b> asked that we do both embedding and sending separately</p> <p><b>SA</b> asked about a reference to Section 6 of the MHA – link did not work – to be re-sent</p> <p><b>JD</b> declared the minutes as accurate</p> <p><b>Report on the use of the MHA</b></p> <p><b>PC</b> presented the report on the use of the Mental Health Act between 1<sup>st</sup> October 2020 – 31<sup>st</sup> December 2020</p> <p><b>KC</b> raised a query regarding discharged and conditionally discharged patients following MHRT – and whether the patients had recently had a managers hearing and the reasons for their not being discharged.</p> <p><b>KC</b> asked about the proposals in the Governments White Paper regarding abolishment of the role of nearest relative. This is following events at a recent hearing where it was disclosed that the patient did</p>	
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<p>not want their NR informed, however, practitioners went ahead and informed the NR.</p> <p>KM asked if the Health Board was submitting a report to the consultation on the reform of the MHA</p> <p><b>JD</b> reported that in the recent Legislative Committee it was discussed circulate consultation questions</p> <p><b>JC</b> stated that Cwm Taff have circulated comprehensive questionnaires, to which he is coordinating a managerial response</p> <p><b>JD</b> asked <b>JC</b> if he would prepare a similar response for SBUHB managers</p> <p><b>KM</b> asked why managers activity was no longer included in the MHA activity report</p> <p><b>JC</b> said that they were to be consulted on their views regarding <b>KM's</b> comment above – this has not yet happened</p> <p><b>JW</b> reported that this information was withdrawn because of Information Governance reasons – PC to re-issue an email to all managers asking for their views on this</p> <p><b>SA</b> raised concerns regarding GDPR – in terms of personal emails being shared on emails</p> <p><b>Terms and Conditions for Hospital Managers</b></p> <p><b>JD</b> reported from the November 2020 Legislative Committee that the Health Board has undertaken a review of its non-substantive positions in terms of bringing hospital managers posts into line with others., such as independent board members. The Legislative Committee made 3 recommendations:</p> <ol style="list-style-type: none"> <li>1. Members agreed that payments made to associate hospital managers should be increased to £45 per hearing for panel members, and £50 per hearing for Chairing, effective from 1<sup>st</sup> January 2021.</li> <li>2. Tenure of Associate Hospital managers needs to be brought in line with Independent Board Members – to be no longer than 2 terms of 4 years, subject to satisfactory appraisals. <b>JD</b> commented that a number of managers have already been in post for 8 years or longer and this will be discussed at annual appraisals which are happening in the coming weeks.</li> <li>3. 1-year period of handover to allow for recruiting and training of new managers</li> </ol> <p><b>JC</b> asked if tenure of service begins now, or it is based upon past service, to which <b>JD</b> responded that her understanding is that it is based upon time already served.</p> <p><b>MP</b> asked if this is a new arrangement which was confirmed by <b>JD</b>, who added that a period of 1 year would allow for recruitment and training and mentoring of new managers.</p> <p><b>SA</b> asked if managers could return after a significant period of time, and also asked about recruiting at a time when the role is under review in the Governments reform of the MHA</p> <p><b>CC</b> raised concerns regarding the quality and timeliness of training for managers if tenure is to succeed</p> <p><b>JD</b> acknowledged that bespoke training is needed for managers</p> <p><b>KM</b> asked if this is an all Wales arrangement</p> <p>There followed a general discussion regarding transition periods and training of new managers</p>	
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3.	<p><b>Matters arising from Hospital Managers Hearing</b></p> <p><b>PC</b> explained that the purpose of this section is to provide a response to issues that managers raise following hearings.</p> <p><b>I. Information Governance</b>  Following observations from managers that non-involved parties were present in rooms where hearings were taking place, participants were having non related conversations off-line with non-involved parties, and patient information could clearly be viewed in the background in one instance.  <b>PC</b> reported that all participants are now reminded of their duties in terms of confidentiality when hearing invites are sent out.</p> <p><b>II. Decision forms</b>  Following concerns from managers that our current decision form does not allow for a comprehensive summary of the hearing, and a recommendation that we review it in line with the forms being used by Cardiff and Vale Health Board  <b>JC</b> commented that a 'digital' form would allow managers to expand upon their reporting, and raise any concerns from hearings to be followed up – a better opportunity to report on the overall hearing  <b>KC</b> commented that the digital decision report allows for more time, after the hearing to reflect , and should face to face meetings return, a request that the Chair is afforded the opportunity to prepare a detailed decision report away from the hearing, as opposed to immediately afterwards whilst still at the hearing venue.  This approach was supported by the group.</p> <p><b>III. Patient Experience Questionnaire</b>  Following the decision by other Health Boards in Wales to survey patients since the move to holding hearings remotely since the Covid pandemic.  <b>KM</b> raised concerns regarding support for patients to complete the questionnaire  <b>CC</b> supported the idea however, advised caution in terms of ensuring that action is taken following survey findings, and that this is fed back to patients  <b>MP</b> asked that survey questions be relevant to the objectives, and with regard to the patient experience  <b>KC</b> commented on the style of the C&amp;V questionnaire in terms of language and format and this needs to be appropriate for the audience/patient  <b>JD</b> commented that if the aim of a survey is to establish whether patients prefer face to face, or remote hearings, and what their reasons are for their choice – the goal should be to give patients a choice of what type of hearing they wish to have.  <b>MB</b> stated that the Stakeholder Reference Group could critique the patient survey forms, with assistance from the communications team  <b>CC</b> stated that SBUHB are working with Hafal and Public Health Wales on patient experience surveys - perhaps this could dovetail</p> <p>PC agreed to do this</p> <p>RM left the meeting</p>	

4.	<b>Training &amp; CPD</b>  A reminder to the group of the potential face to face managers training in May, in Mid Wales <b>JW</b> asked whether this would happen virtually <b>JC</b> raised concerns regarding virtual training for such a large group	
5.	<b>AOB</b>  <b>JD</b> confirmed with <b>JC</b> that he would garner views of hospital managers and prepare a report for submission to the Health Board. <b>KM</b> raised the matter of delays with and non-payment of expenses <b>JW</b> gave an explanation of the reasons for the failure to make payment <b>KM</b> asked for confirmation of the correct system for submitting expenses <b>JD</b> suggested that the process will be simplified with the iPads <b>JC</b> asked whether SBUHB could use the SEL system for this process as it is used for managers in Cardiff & Vale and Cwm Taff <b>JW</b> to look into this <b>KC</b> asked if the MHA Team would accept submission of electronic expenses. <b>PC</b> agreed that this was acceptable <b>JD</b> officially confirmed Maggie Berry as Vice Chair <b>MP</b> wanted to minute the managers thanks to the Mental Health Act Team for their assistance, support and professionalism in such difficult times	
6.	<b>Meeting dates for 2021/22</b>  Several requests to vary the days of meetings for the coming year  <b>PC</b> to send out new dates for agreement	

### Action Table

Agenda Item	Action	By whom	progress
2	<b>JW &amp; PC</b> to discuss opportunities for quality checks to be done remotely	<b>JW / PC</b>	
2	iPads to be ordered for all managers - consider larger screen models	<b>JW</b>	
2	Confirm links to legal updates given in last meeting	<b>PC</b>	
2	Provide supporting information where the MHRT has discharged a patient following a managers hearing	<b>PC</b>	
2	Circulate White Paper Consultation questions	<b>PC</b>	<b>Completed</b>
2	Include data on individual hospital managers activity in MHA Activity Report	<b>PC</b>	<b>By next meeting</b>

<b>2</b>	Ensure that hospital managers personal email addresses are not shared, in line with GDPR	<b>PC</b>	<b>Completed</b>
<b>3</b>	Produce enhanced digital decision report form, to include all matters arising during hearings	<b>MHAT PC</b>	
<b>3</b>	Liaise with Stakeholder Reference Group, Hafal and Public Health Wales in order to discuss opportunities for patient questionnaire/survey	<b>PC</b>	
<b>4</b>	Establish date and arrangements for next All Wales training event	<b>PC</b>	
<b>5</b>	Arrange Teams meeting to scope views of hospital managers on the Reform of the MHA White Paper	<b>JC/PC</b>	<b>Completed</b>
<b>5</b>	Clarify position with Hospital managers expenses to be claimed via SEL system	<b>JW</b>	
<b>5</b>	Convey thanks to MHA Team for supporting and assisting managers during the Covid pandemic and making the transition to remote hearings	<b>PC</b>	<b>Completed</b>