

MENTAL WELFARE COMMISSION FOR SCOTLAND
MEETING OF THE BOARD
TUESDAY 25 OCTOBER 2022
(via teams & at Thistle House) at 11.00am

Present:

Sandy Riddell (Chair)
Safaa Baxter
Mary Twaddle
Cindy Mackie
Gordon Johnston
Alison White
Nichola Brown

In attendance:

Julie Paterson, Chief Executive
Arun Chopra, Executive Director (Medical)
Suzanne McGuinness, Executive Director (Social Work)
Claire Lamza, Executive Director (Nursing)
Julie O'Neill, Business Change and Improvement Manager
Elizabeth Halliday (Finance Manager (Item 6.7 only))

Secretary: Katrina Thomson

1. Welcome and Apologies

Apologies were received from David Hall.

2. Board Declarations and Register of Interests

No declarations or register of interests were given.

3. Chair Update and Announcements

The Chair informed the Board that he had received a letter from the Minister thanking him for the Annual Report. He said the Minister was very positive in his comments, and that he also mentioned the SMHLR and how important the Commission's leadership role will be going forward.

The Chair said that there has rightly been a lot of interest in the SMHLR, and referred to the HSC article in which John Scott remarked very positively about the MWC. The Chair acknowledged that no recommendations have been accepted by the Scottish Government yet and it will take some time to consider the full report however he said that the Commission must be proactive with the Scottish Government in what they can and cannot achieve; the question of resources is central.

The Chair informed the Board that he and Nichola Brown have been reappointed until 2027. He said that the recruitment for a replacement for Safaa Baxter is under way with interviews planned for 17 January 2023 and that JP will take the lead on any enquiries received.

The Deputy Director of our Sponsor Department, Susan Ferguson wishes to meet with the Board and it is hoped this will take place on Tuesday 13 December, when the Engagement and Participation and the Children's and Young Peoples reports will be presented. It is hoped she will be able to stay for the all staff Q&A Session planned for after the Board meeting where staff can ask any questions they wish.

The Chair said he will be on annual leave for the next two weeks.

4. CE Update

Referring to the SMHLR, JP said that a small sub group has been set up to reflect and respond; the aim will be to include all Commission staff as was done at the consultation phase.

JP said that an event will be planned for May/June 2023 to reflect on our work from the previous year, profile the contents of our annual report and this will obviously also reflect the SMHLR.

JP told the Board we received good feedback on the Strategic Plan from a range of sources. Thanks to JO for pulling this together.

She also informed the Board that the Commission had received confirmation of our budget in a letter dated 29 September 2022. DIDR/MHH has been funded until the end of March 2023 only at this stage.

The AWI monitoring report is on today's agenda for information and will be published on Thursday.

5. (a) Minutes of Board meeting held on 22 August 2022 (Paper)

The minutes were approved.

(b) Action Points (Paper)

All Action Points have been completed.

6. Items for discussion and/or approval

6.1 Young person monitoring report (KPI) (Verbal update) (Suzanne McGuinness)

SM said that this report requires to be produced by 31 October 2022 as noted in the business plan. She explained that every year the Commission monitors and publishes information on the number of children and young people aged from 12 to 17 who are admitted to non-specialist wards – usually adult wards – for treatment of their mental health difficulties.

Although the numbers are not as high this year as they were some years ago, this year's report shows that from 1 April 2021 to 31 March 2022, there were 90 admissions involving 80 young people aged between 12 and 17 to non-

specialist wards. This is an increase on the number of young people admitted during the previous year, with a reduction in number of repeat admissions from the previous year.

It was acknowledged that it may be difficult to get a sense of trends given the pandemic and the potential for distortion of data.

Discussion then progressed to transitions and challenges and also the issue of inconsistent approaches to 16 – 18 year olds e.g. if they are not in school they are sometimes not accepted as children but if they are still in school they are treated as children in terms of mental health services

SM stated that the report will once again identify the lack of specialist advocacy for children and young people. It was noted JO is currently pulling information together on advocacy resource as reported by all HSCPs. A report will come to the Board in due course detailing reported advocacy provision in Scotland.

The Board noted the verbal update.

6.2 Business plan progress report (Julie Paterson/Julie O'Neill)

6.2(i) Business Plan Workplan

The Chair very much welcomed the format and detail provided in the progress report. JP said the format had been completed by JO. JO highlighted delays as noted in the SBAR namely the delayed report on recorded matters and the extended deadline for the prison closure report and sought approval for these delays.

The Board approved the recommendations and the progress identified in the Business Plan workplan.

6.2(ii) Stakeholder Survey Action Plan

The Chair referred to the developing work of the Advisory Committee and acknowledged there was a good turn out at the last meeting. SM said they are moving away from simply providing updates to a more two way engaged approach. MT said they are still trying to get the numbers up but had to go for a hybrid meeting last time. An ad hoc hybrid meeting will be arranged for November to discuss the children and young people. NB said the quality of the last meeting was very good with a lot of good points.

SM said the Action Plan will be brought to the December Board meeting.

The Chair said that the Advisory Committee need to be aware that we are listening to them and that the SMHLR legislation needs to be strengthened. MT

said there is lived experience membership on the Advisory Committee which mitigates the criticism received previously on the membership mainly being organisations.

SM said there is a need to highlight lived experience more, capture this and take this on board.

The Board approved the Stakeholder Survey Action.

6.2(iii) Equalities and Outcomes Action Plan

Thanks were given to the Executive Leads and to HR for completing many of the tasks as it was felt important for us to get our house in order. In response to a question on the range of young people to be involved in Outcome 1, SM said the E&P team are reaching out to young carer groups but is work in progress. The use of Tik Tok, facebook may be considered as more CYP friendly. SM confirmed that the E&D training will be mandatory for all Exec leads.

With regards action of monitoring in relation to Board members, JP confirmed for the Chair that she wrote to all Board members responded with key points made which have been passed to HR.

6.2(iv) Corporate Parenting Action Plan

SM said that attached action plan has been updated and advised there is still work to be done on ensuring this action plan is more SMART.

The Chair asked if the Board should have training on Corporate Parenting and suggested that if so then a Q&A session could be used for this purpose. The Chair and JP agreed to look at the next few dates for Q&A and decide on a date for this training. In relation to a joint visit with the Care Inspectorate to secure units, SM said that we are currently looking at a pilot project but there are no plans at this stage.

6.3 CPT closure report (Claire Lamza)

CL said this report has been discussed at ELT. There is a crossover with this report and the Prisons report as there are similar concerns raised. Although there are difficulties CL assured the Board that progress is being made with more cohesion. There will be ongoing monitoring of rule 41, the use of seclusion and segregation for any prisoners with acute mental health symptoms. CL said thought will need to be given to where responsibility sits ie. NPM, SG to have more impact.

The Chair acknowledged this report as being very helpful as he said the concerns in the original report had been ongoing for years and agreed that we

need to push on where it will sit. The Chair said that although this is a Closure Report he would like to receive feedback at sometime in the future.

JP said this CPT report links to the Prisons report and that CL and SM will continue to work together and will provide a progress report in May next year.

The Board approved the contents of the Closure Report.

6.4 Racial Inequality closure report (Arun Chopra)

AC said this had been a large report with 30 recommendations. He said there had been a significant shift in detail through leveraging 10 years of data and added that there has been variation in responses from the health boards with one health board not having responded but having promised to do so. He also said that the SMHLR have been provided with a copy of the report.

The Board acknowledged the work involved in doing the report and approved the Closure Report.

6.5 Tenancies, advice note and accessible read (Suzanne McGuinness)

SM informed the Board that this was a requested guide and will be welcomed by many organisations. The report was completed with SCLD support and they have been extremely helpful with the format for the easy read version.

It was suggested that further information could be provided on independent advice by way of using signposting to such areas as CAB.

SM wished to thank Yvonne Bennet for her work in producing this guidance.

The Board approved the tenancies accessible read and advice note.

6.6 MOU with SG (verbal update Julie Paterson)

JP said that the revised framework has been consulted on nationally. Paloma Alvarez provided expert advice and informed the Commission's response. The MOU with the SG will progress once this framework is agreed. JP noted that when MOU discussions start, the Commission will expect there to be bespoke additions to the framework to address the unique position of the Commission as has been the case previously.

6.7 Budget update (Elizabeth Halliday)

EH said this report was in two parts. EH confirmed that the Commission received what was asked for excluding the DIDR/MHH project funds. She said Appendix 1 shows the June baseline and what we have now which shows a significant underspend. Referring to the Pay Award, EH said that the Scottish Government have moved to a 5% rise to all staff with a minimum underpin of

£1800. The Board were asked to consider if the Commission should match this offer or consider giving a one off cost of living payment that would be subject to tax and NI.

The Chair referred to the length of time it has taken to wait on the confirmation of the budget but said it was a positive result. Referring to the pay award he said that there should be a proper pay award made rather than a one off payment. GJ agreed with this but acknowledged it would have an impact on future years as it is part of the core budget.

It was confirmed that the Commission follows the SG and not the NHS when providing pay awards to staff.

The Board recommended that the Commission matches the 5% pay award with a minimum underpin of £1800. It is hoped to pay this with November salaries.

6.8 AP&R minutes July 2022 (Gordon Johnston)

GJ said the minutes were mainly in reference to the Annual Accounts.

The Board noted the contents of the minutes.

6.9 Board Meeting Dates 2023/24 (Sandy Riddell/Julie Paterson)

The Board agreed the meeting dates for 2023/24. It was agreed to cancel the Q&A session for November and the next Q&A meetings will take place on Friday 27 January at 2.00pm and Friday 31 March at 2.00pm.

Action: JP to confirm speaker for Q&A meeting on 27 January 2023.

6.10 Note of Board Development Session held on 22 August 2022

The Board noted the contents of the paper provided.

7. For Information

7.1 MHA monitoring report (KPI) (Arun Chopra)

AC referred to the MHA Monitoring report to be published 3 November 2023. He said the deprivation data has been data managed to provide a higher level of confidence than previously. Asked if deprivation could be linked to education, AC said we cannot provide that information.

The Board noted the contents of the report.

7.2 AWI monitoring report (KPI) (Suzanne McGuinness)

SM said the report shows an increase in guardianship order applications; 52% above that for 2021. The prevalent diagnostic categories remain learning disability and dementia.

The report will be published on Thursday of this week and low to medium media interest is anticipated.

The Board noted the contents of the report.

7.3 Staff Away day feedback (Suzanne McGuinness)

SM reported that the staff away day had been very positive bringing new and current staff together. Feedback was given by those in attendance and an action plan will be developed accordingly. The next staff away day will discuss Roles and Responsibilities [subsequently arranged for Friday 16th December 2022 but then cancelled due to uncertainty of rail strikes, now planned for January 2023].

The Chair acknowledged that it was quite strange meeting some people for the first time having worked virtually and was long overdue. He said it will be good to follow this day with the next one.

Action: SM to prepare Action plan and bring back to the Board

7.4 NCS Consultation response (Suzanne McGuinness)

SM said that she has been invited to the Parliamentary Committee to speak to our response.

The Board noted the contents of the consultation response.

7.5 National mental health Strategy Consultation Response (Julie Paterson/Julie O'Neill)

The Board noted the contents of the paper.

8. Board Agenda Planning - See Appendix 1 attached

The Chair suggested that thought be given to having the Corporate Parent training at the Q&A meeting arranged for 31 March.

Action: JP to action.

9. Any Other Business

No matters for discussion.

10. Date for next Board meeting Tuesday 13 December 2022