

Mental Health Commission Meeting¹
Minutes of Meeting held on 16 and 17 January 2019
Held at Kilsahee Hotel, Naas, Co Kildare

| Commission Members | Initials |
|---------------------------|-----------------|
| John Saunders | JS |
| Patrick Lynch | PL |
| Michael Drumm | MD |
| Niamh Cahill | NC |
| Xavier Flanagan | XL |
| Rowena Mulcahy | RM |
| Nicola Byrne | NB |
| Margo Wrigley | MW ² |
| Ned Kelly | NK |
| Colette Nolan | MW ³ |

| Apologies | Initials |
|------------------|-----------------|
| Aaron Galbraith | AG |
| Jim Lucey | JL |

| Executive in Attendance | Initials |
|---|-----------------|
| John Farrelly, CE | JF |
| Susan Finnerty, Inspector | SF |
| Rosemary Smyth, Director Standards and Quality Assurance | RS |
| Orla Keane, Secretary to the Commission, Head of Legal Services / Division Lead for MHT | OK |
| Aine Flynn, Director DSS | AF |
| Michael Maxwell, Finance Manager | MM |

| Agenda Item No | Day 1 – 2 to 6.15 pm |
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| The Chair welcomed everyone to the meeting and gave a brief overview of the Agenda. He invited all of the members to actively participate in the discussion as it was important to hear all views. | |
| 1. | <p>Presentation of Draft Business Plan and Draft Budget</p> <p>The CE introduced this session noting – New Vision in Place as of 1.1.19 It is the role of the Executive to implement this Vision It will demand the highest level of commitment</p> |

¹ DJE =Department of Justice, DOH = Department of Health. IDSG for the DSS = Inter Departmental Steering Group for the DSS

² Attended Part of Day 1 only

³ Attended Day 2 only

We will focus on the core objectives as outlined, If additional issues require to be addressed for whatever reason, plan will have to be reviewed

Have to be open, inclusive and transparent

We must be agile and able to recognise societal changes

Enhanced Corporate Spine to provide all relevant supports to the four core functions and to the organisation generally

We shall redesign how we report on risk in order to ensure we are more effective in addressing issues

The following summary was provided by way of the Teams -

Corporate Services – CE –

1. Bring the management of Communications in House with three staff (AP, HEO and EO)
2. Communicate Publically on our 4 core functions
3. Review structures generally and specifically – examples provided
4. Review HR and best working practices for the organisation
5. Work on the IT infrastructure – issues relating to CIS and DSS /Bearing Point briefly addressed.

Mental Health Tribunals – OK

1. 2019 – Recruitment of the Panel Members – brief update provided
2. Additional Reviews further to the emergency in 2018 – approx. 10% of all cases in her first week and that figure is rising. A few queries raised. Monthly reports will be provided to the DOH. Half yearly review to be done on costs. Initial costs estimate for these reviews has to be increased. DOH were notified in September and December on this ie more MHTs being held which is ultimately for the patients' benefit.
3. Legal Aid Scheme – review from 2018 ongoing and to be progress in 2019 in so far as is possible
4. Audits on various matters introduced in 2018 and the remit of audits to be extended in 2019 to the approved centres
5. Statutory Forms – review commenced in 2018, halted by emergency legislation, recommenced and awaiting external comments at present.

Legal - OK

1. Review of the 2001 Act (to include a review of how the additional reviews are operating)
2. Working towards finalisation of amendments to the 2015 Act
3. Ongoing litigation – IF case and the first District Prosecution of an approved centres

Inspectorate – SF

SF went through the draft Business Plan and addressed a number of objectives for 2019 to include –

1. Inspecting all 64 approved centres
2. Visiting the remainder of the 118 community residences as part of the three year programme
3. Publication of three themed reports in January, February and March 2019 (physical health, rehabilitation and recovery and 24 hr community residences)
4. Collate data for the themed report for 2019 (Overview of prescribing of medication and psychiatry of later life)
5. Review Judgement Support Framework and other matter with SQA
6. Working with new Communications Team on getting out message in relation to services that have done well and those that need to improve

SQA – RS – some but not all of the work done was outlined as follows -

1. Review of the Rules and the Codes of Practice – this will be a major project involving external consultation
2. Review of the Judgement Support Framework and the Quality Framework – as all documents at 1 & 2 were reviewed at different times previously
3. Update publications for Service Users
4. Internal review of processes

5. Review framework for inspection of community residences
6. Prepare Risk profiles for each approved centre
7. Review of registration applications – renewals and new applications

DSS – AF

AF noted that a lot of time was spent at the November / December meetings in relation to the revised plan for the DSS. As the DSS will not be operational until Q4 2020, the Business Plan refers to the Project and does that in a high level way, as the detail is in the PID for the Project, which is currently being revised. AF highlighted the following issues –

1. “On boarding” of new staff way of a 100 day plan which will then be used by the Senior DSS staff to on board the staff for each of their teams
2. ICT – this is the current major focus. Bearing Point completed ley work. DJE have appointed a consultant to deal with this, who is supportive of a number of steps taken by the DSS in 2018.
3. Communications – this is key role and will need a lot of planning and will need to be addressed nationally.
4. Legislation – will be impacted by Brexit – will need to review how this will impact on the progress of other key work such as the Codes which are to go out for public consultation this year.

Further to questions from the Members, it was agreed that the current and further governance arrangements for the DSS needed to be agreed with the DOH and the DJE in the next few months.

The Members had a number of observations and comments. It was agreed that the Secretary would collate a list of the comments and the draft Business Plan would be amended to reflect same.

The Members noted that while the draft Business Plan could not be formally agreed until the letter of allocation is received from the DOH, that it was agreed that the Executive should proceed with its work for 2019 as outlined.

The Members noted that the same applied in relation to the draft Budget. A few further issues were raised and the following was noted –

1. The outturn for 2018 could not be provided as same had not be finalise given the late receipt of certain invoices.
2. The Finance Manager (and CE) had met collectively and separately with the Division Leads in relation to their budgets and scrutinised same.
3. There are a number of variances from the draft budget sent to the DOH in September due to a change in allocation for certain projects
4. OK noted that the estimate for the MHTs was higher than expected and that a detailed note had been issued to the Members in relation to this.

The CE noted that the Finance Manager would be looking at various issues over the next 6 to 12 months to identify where savings could be made.

It was agreed that the draft could reviewed in more detail at the next meeting or the following meeting depending on when the letter of allocation is received.

2. Leadership presentation to Support High Performance

The company - Compete with Compassion - then presented to the Members and the Executive on Culture and on what a “Championship Winning Culture” is, this included a workshop.

The session will focused on -

- Establishing a sustainable high performance culture across the organisation
- Leadership & Management Team Support
- Developing a team of committed individuals who are intent on making a difference in the mental health sector

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| Agenda Item No | Day 2 – 9 am to 12.00 noon |
| 1 | <p>Governance matters / Private Session / Self-Assessment</p> <p>The CE presented to the Members on the issue of Governance. As part of the presentation, the CE proposed that the Legislation Committee and Quality Improvement Committee would be integrated into a new Committee of the Board, called a Regulatory Committee. It was agreed that until such times as the Regulatory Committee was established (draft TOR presented & agreed and membership confirmed) that the work of the other Committees would continue.</p> <p>The Members then met in Private to discuss various issues to include a review of the Composite Self-Assessment Forms for 2018. The following is list of issues to be addressed in 2019 as follows –</p> <ol style="list-style-type: none"> 1. There are 13 Members all of whom must be heard and who will have different views. 2. The 13 Members may not be agreement on all issues and in those cases the Members will have to agree a collective decision which is best for the organisation. 3. The Members agreed that the strategic planning process had been a positive and engaging one with a very satisfactory outcome. 4. Members also affirmed their satisfaction with the leadership change process to date. 5. In relation to the composite self- assessment for 2019, the members would like some of the information to be presented in chart / graph form and that each Member is assigned a number so that it will be clear if all or some of the comments are coming from one or more member. 6. A formal external self-assessment shall be arranged for Q1 2020. 7. Executive to present draft to the Members on the following in Q1 – <ul style="list-style-type: none"> 7.1 Reserved Functions 7.2 Code of Conduct 7.3 Code of Governance – revised 7.4 Delegations Framework 8. Draft TOR for the new Regulatory Committee to presented in March / April meeting depending on other Agenda items 9. Sub groups of the Regulatory Committee may be established for example a Working Group to review the Heads of Bill for the amendment to the Mental Health Act 2001 or specific Quality initiatives. |
| 2 | <p>Presentations by the CE</p> <p>Risk Based Regulation: The CE presented to the Members based on the slides posted. It was noted that the MHC is a risk based regulatory is so far as the legislation requires. Various versions of risk based regulation were presented and discussed. The key point being made is that the MHC needs to be very clear on its approach. Various issues were raised and it was noted that these matter could be explored further when the draft TOR for the Regulatory Committee is presented.</p> <p>Communication Strategy: The CE presented to the Members based on the slides posted. The key issue related to the strategy to be developed by the new in house Communications team (who will be in post shortly), which would then be presented to the Board.</p> |
| | Day 2 - 12.40 to 2.45 pm |
| 1 | Declarations of Interests - Signed and Returned to the Secretary. |

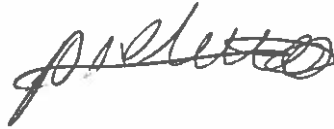
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| | ON reminded the Members re the Ethics return for 31.1.9. |
| 2 | The Minutes of the Meeting on 13.12.18 were agreed subject to certain minor amendments. PL proposed approval of the Minutes and MD seconded same Decision 1 of 2019 |
| 3 | <p>Chair's Business</p> <ol style="list-style-type: none"> 1. Board Attendance – The Chair confirmed that the Code expects 100% attendance. He noted that he has spoken with or will speak directly with those Members who had issues with attendance in 2018. 2. Commission Membership – The Chair noted that despite requests we have not yet received confirmation of the final member. 3. Housekeeping Matter for Board Members – The Chair discussed general issues relating to the following – Confidentiality, Conflicts and the Code of Conduct – by way of an overall reminder to Members. OK noted that dedicated email addresses would be set up for the Chair and the Chairs of the Committees to assist with communication. 4. Update on Launch of Strategic Plan – The CE noted that it is hoped this will take place at the Commission meeting in February and that we are just waiting to hear back from Minister Daly. |
| 4 | <p>Executive Reports</p> <p><u>CE's Report</u> The CE noted that a combined Action Log had been presented to the members in relation to the 2018 Meetings and those issues that have yet to be addressed, which are few, are marked in red. The CE also referred to the Update on the 2018 Business Plan. In reply to questions, it was noted that anything not addressed in 2018 Plan has been included in the 2019 Plan. The CE referred to the various new members of staff who had joined and will be joining over the next two months to include the COO. In reply to queries from Members, it was agreed that an organisational chart would be produced for the next meeting. Risk process is going to be reviewed by SMT and addressed at next ARC. Recommencement of Staff Meetings to ensure good communication internally as well as externally.</p> <p><u>Head of Legal</u> OK noted that she had provided the Members with a summary document in relation to the key types of litigation that the MHC are involved and noted that if further information is required to contact her. She then turned to the prosecution relating to the DOP, Kilkenny and provided the members with a summary of the position to date. OK said they would be kept updated by way of email of all relevant matters.</p> <p><u>Mental Health Tribunals (MHT) (Read only)</u></p> <p><u>Inspector of Mental Health Services (Inspector) (Read only)</u></p> <p><u>Report of the Director of Standards and Quality Assurance (S&QA) (Read Only)</u></p> <p><u>Director of the Decision Support Service</u> AF noted that she had provided a lot of detail at the two previous meetings. AF noted that the Costs Oversight Group, under the new governance structure, have had their first meeting and the Oversight & Assurance group will be meeting in February. AF noted that work was ongoing in relation to the revised Project Plan and same should be completed shortly. AF also noted that the main focus is the work on the ICT. She noted that the expert from DJE had been supportive of the work done and the proposal from the MHC in 2018.</p> |

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| | <p>AF noted that work relating to the Codes and the recruitment of the Panel members has been pushed back due to the funding issues and issues relating to legislation which have not been resolved (and may not be resolved for some time if legislation relation to Brexit is to take precedence, which we have advised will take precedence). AF noted that the revised timeline for the DSS is operational in Q4 2020. This was raised previously and has been stated to the DOH and DJE. AF added that all timelines are contingent on a number of factors to include a number of external matters, outside of our control but on which we have been corresponding with the relevant parties. The members requested and AF/ the CE confirmed that there would be clarity on the expenditure for the DSS in the monthly accounts.</p> <p>There was a <u>Joint Presentation by RS and SF in relation to the Individual Care Plans (ICPs)</u> further to queries raised by the Members on this issue at previous meeting on compliance with same by Approved Centres. The key issues addressed were – Legislative and policy requirements, Professional Standards, National Mental Health Services Collaborative (NMHSC), Compliance with ICP’s, Service user involvement/expectations and Research.</p> <p>In summary it was noted that - Acute units have lower compliance levels; Some evidence that intervention/guidance by MHC has helped improve compliance; and Legal definition of ICP not conducive with a service user led model of care or recovery oriented services (Patient centred care / Shared decision making / Patient empowerment).</p> <p>In terms of MHC – 2019 Development Work, the following was noted - Continue inspection, compliance monitoring and enforcement, Revision of regulatory framework / documents, Development of care planning guidance for service users, consider public campaign to educate people to have a legal right to ICP, seek involvement in National Patient Experience Survey, promote quality initiatives/training in services and consider the publication a themed report 2015- 2018 on ICPs.</p> <p>The Members thanked RS/SF for the excellent presentation and noted that they looked forward to further updates in relation to the work to be done during 2019.</p> |
| 8 | <p>Risk Management – It was noted that there was no reportable issues since the previous meeting.</p> |
| 9 | <p>Committees</p> <p>Audit and Risk Committee (ARC) - There was no scheduled meeting of the Committee since the last Commission meeting.</p> <p>Legislation Committee – There was no scheduled meeting of the Committee since the last Commission meeting.</p> <p>Quality Improvement Group – The scheduled meeting had to be deferred but will be held before the next Commission meeting.</p> |
| | <p>Next Meeting on 21 February 2019.</p> |

| ACTION LOG | | | |
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| No | Action | Person Responsible | Status |
| 1 | Update draft Business Plan with comments from the Members | CE | Done |
| 2 | Revise draft Budget and include figures relating to the outturn for 2018 | CE / Finance Manager | Done |
| 2 | Address DSS governance issues with the DOH and DJE | CE / AF | In progress |
| 3 | Draft TOR for Regulatory Committee to be presented to the Members | CE | March Meeting |
| 4 | Address the following Governance Matters - Reserved Functions Code of Conduct Code of Governance – revised Delegations Framework | CE / OK | In progress |
| 5 | Organisational Chart to be produced | CE/ HR Department | Done |
| 6 | Detail of major expenditure for DSS and elsewhere to be flagged in monthly accounts | CE / Finance Manager | Ongoing |

Dated: 21 February 2019

Signed:



By the Chair