

Mental Health Commission
Minutes of Meeting held on 4 October 2017
10.30 – 14:00
Held in Waterloo Exchange, Waterloo Road, Dublin

Present:

Commission Members	Arrive	Depart	Initials
John Saunders	10.15	12.00	JS
Catherine O'Rorke	10.30	1.50	CoR
Nicola Byrne	1.00	1.50	NB
Michael Drum	1.00	1.50	MD
James Lucey	10.30	1.50	JL
Patrick Lynch	10.30	1.50	PL
Xavier Flanagan	11.30	1.50	XF
Margot Wrigley	10.40	1.50	MW
Colette Nolan	11.10	1.50	CN
Ned Kelly	10.30	1.50	NK

Apologies:	
Aaron Galbraith	AG

Executive in Attendance:	
Patricia Gilheaney - Chief Executive	PG
Orla Keane - Secretary to the Commission	OK
Susan Finnerty - for Item 4 Executive Reports	SF

Note - The Commission Members met in private without the Executive from 10.30 to 11.00.

1. JS opened the meeting and requested Members to complete the Declaration of Interest document for this meeting.
2. Minutes of Commission meeting held on 5 September 2017

Decision 19 of 20 2017

COR proposed approval of the Minutes and MD seconded same.

3. Chairman's Business

3.1 Meeting with the new Minister of State, Mr John Daly T.D on 18 September –

JS, PG and JL attended. JS confirmed that all of the issues proposed at the last meeting were discussed. In relation to the issue of resources, it was noted that the Minister stated that this was an operational matter for his Department not for him. He said his role is to consider legislative and policy issues. It was agreed that ongoing correspondence with the DOH would be required in relation to this issue. In relation to the new Mental Health Committee to be chaired by Hugh Kane, JS said they asked about the remit of the Group and indicated that the MHC would be very interested in taking part in it. One of the officials from the Department said that the desktop review was completed and the Group are now looking at implementation in relation to Vision for Change. There was some discussion on the matter and the Minister indicated some support for the MHC's participation in this Group. PG to follow-up with Departmental officials. JS also noted that the Minister indicated that he would attend one of the Commission meetings once all of the Members had been appointed.

3.2. Vacancies on the Commission

JS said he was delighted to confirm that Ned Kelly (who previously sat on the Commission) and Rowena Mulcahy (solicitor / former Taxing Master) had been appointed. He said that he is still waiting to hear back in relation to the final appointment. PG noted that following receipt of the letter confirming the recent appointments, she has already followed up with the DOH as to when the last appointment will be made and was advised that a draft letter is with the Minister

3.3 Roscommon Report

JS noted that this was published shortly after the last meeting. PG confirmed that they were following up with the Service in relation to a number of issues and this would form part of the either the Inspector or S&QA report to them in due course.

3.4 Strategy - Communications – Report and Presentation by Mark Brennock (*)

3.5 Revised National Standards for the Conduct of Patient Safety Incidents

JS brought a letter from Minister Harris to the attention of the Commission in relation to the above.

3.6 Photographs of Commission Members

It was noted that these would be taken at 10.30 before the next meeting. They are required for the website and Annual Report. JS requested that everyone be on time for the next meeting

3.6 Dates for 2018 Meetings

JS has everyone to review their diaries for 2018 before the next meeting as he will fix the 2018 dates at that meeting.

(* Mark Brennock joined the meeting. He went through his draft Proposal which had been circulated to all of the Commission Members in advance of the Meeting. In summary he asked the Commission Members 1. What do they want to say, and 2 how do they want to say it? JS noted that the papers and the presentation were welcomed. There was a detailed discussion on the issue with contributions from all Members. It was noted by a number of people that the public do not know who the MHC is and what they do - we need to rectify this. It was also queried as to how best to increase the MHC's profile – address issues of poor practices and how the MHC seeks to address same, look at issues of clinical practice, focus on addressing specific issues such as reducing seclusion, look at the issue of recovery, focus on the service users and their stories. It was noted that the recent poster presentation by the MHC was very good.

It was agreed that the MHC need to do something to improve their presence and profile - with the end goal of improving services and supports for Service Users. This needs to be done in an interesting / innovative way. It was proposed that the issue should be discussed in more detail at the forthcoming all day meeting of the Commission Members at which a plan would be agreed for the next couple of years.

JS noted that he had to leave the meeting early. He said the Members would have to agree the appointment of a Chair to continue the meeting. MD suggested that one of the Members from the previous Commission might be appropriate. COR agreed to act as Chair. MD proposed COR and PL seconded it.

4. Executive Reports

Prior to JS leaving PG said that she wanted to introduce the new Director to all of the Commission Members. AF joined the meeting. PG noted that the MHC was delighted that AF had joined us and was taking on this very important role. AF spoke briefly about her keen interest in the area of Human Rights and how she was looking forward to this challenging role.

Director of Corporate Services

PG/ OK noted that Ray Mooney had retired and that his functions had been divided up between three members of the SMT. Each of the three had included the matters they are dealing with in their reports. PG noted that Rosemary Smyth (RS) had prepared a separate note on HR / Resources which she proceeded to review with the Commission Members. As part of this PG noted that that the current RFT for Recruitment would be completed shortly and then we could commence recruitment of the posts that had been sanctioned.

Head of Legal Services – Legal advice / litigation privilege

OK referred to her report and addressed a few specific issues –

1.GDPR – OK noted the new obligations were going to be in place as of 24 May 2018. She noted that we have engaged our legal advisors to assist us. A roadmap has been prepared but there is a significant amount of work to be done. PL noted that a Data Protection officer would have to be appointed and would be independent in that the data controller / processor cannot instruct the DPO as to how to carry his / her tasks. OK confirmed this was correct and we had half a sanction for this post, which is one of the posts we propose to recruit. MD noted that there will be significant challenges. OK agreed and said some changes in the 2001

Act may have to be sought. PG said that the ACESA meeting on 29 November was going to discuss GDPR and she would report back from same.

2. LR-PC – OK noted that the Law Society had not heard back from the LR. Their next meeting is 18 October. OK said advised that we wait and see what if any reply is received by the Law Society from the LR. This was agreed.

3. TCP – OK noted that corrective action had been taken to mitigate the risk of reoccurrence. The Data Protection Commissioner was notified and within 48 hours confirmation was received that all appropriate action had been taken and they closed their file.

4. MHT – Panel Members Payments – This issue is ongoing but being addressed.

5. Contracts – OK noted that a full list of suppliers / contracts with the Key information has been sought in order that we can review the service being provided / cost / expiry.

6. Tenders – OK gave a general update on same but noted the specific work that had been done on the RFT for Internal Audit as requested at the last meeting.

7. Additional Item – OK noted that research of the HRB had been brought to our attention indicating that certain patients may have been involuntarily detained even though their main diagnosis was not mental disorder. There was some discussion on this and why the MHC could not address this based on the data we hold. It was noted that we are in contact with the HSE and are seeking a detailed report from them on the matter, which may take some time given that the HRB's data would have been anonymised. It was agreed that OK will update the Members at the next meeting.

Director of Standards & Quality Assurance

PG noted that she would be giving this presentation as a poster was presented. PL confirmed that he had met them there and complimented the poster.

PG went through the report and focused on 1. Child Admissions to 31 August 2017, 2. Ongoing Monitoring and the improvements made / issues of concern, and 3. Current work. It was noted that work was required on the Rules and Codes of practice - quality improvement initiatives generally - but that this had not been possible due the necessity to prioritise statutory regulatory activities and to a host of other work undertaken by the Team in 2017 (which had been allocated to them as no resource elsewhere).

PL said this is another item to add to the Risk Register and it should be raised at the ARC, who can then bring all of these concerns to the Commission who will then have to make a decision as to how to address the issues for the future. It was noted that this all ties in with the earlier discussion on resources and the meetings with the DOH/ Minister. PG said there a number of initiative they would like to / should be involved in but cannot due to the lack of resources. PL requested that the Executive prepare a report for the next Commission meeting on the matters that they have not been able to address (2016/ 2017) due to lack of resources. PG/ OK agreed that same would be done

Inspector of Mental Health Services

SF then presented her Report. She noted that the Team were on schedule – they have carried out inspections on 53 of the 64 approved centres. Out of the 53 they have completed 32 reports. In addition, they have inspected 41 other mental health services (24 hour community residences) and would be doing a few more. SF noted the specific work that had been done over the last two months.

SF noted that the Inspectorate will not be able to do all of these additional inspections next year due to the reductions in staff numbers. She gave a general summary of where they were in relation to their Business Plan and the challenges for 2018.

SF noted specific issues that they had with two services – St John’s Sligo and Teach Aisling, Castlebar. She noted the issues that had been raised, what the MHC had done, what the ACs had done and what the ACs still require to do.

SF also noted the areas of compliance from the 2017 reports and where issues had improved and where they had not. SF noted an overall improvement.

Director of Decision Support Service

PG noted that she would give a general overview as per her Report given that the Director was only in post for two days. AF will give the report at the next meeting.

PG noted that the DSS has, apart from the Director, only one member of staff on an agency basis. The DOH and DJ+E are issuing an expression of interest for the PM. The DOH is seeking to recruit a HEO / AO. PG noted that we have sanction for an additional CO but the DSS may not have the funds in 2017 to cover same. Separately, she noted that the DSS is waiting to hear from both Departments in relation to the overall budget for 2018 and thereafter the sanction for the various posts.

Executive Report of Chief Executive

PG noted the following –

1. PG noted that the Meeting with the Minister had been dealt with and referred members to her report for further details.
2. PG referred to continuing issues with the FTS system, and as per OK’s report, these issues are being reviewed and proposed changes are being investigated.
3. CIS Project (*) It was agreed that this would be left as the last item on the Agenda.
4. PG noted that the MHC is given a number of speaking opportunities but that again due to core work commitments it was not always possible to take these up. She noted that this issue links in with the Communications issue referred to above as availability to accept the opportunities presented would aid understanding of the role and function of the MHC.
5. PG presented the Management Accounts for August 2017 for approval. PL noted some suggestions regarding the format of reports that had been raised at the last ARC meeting. PG confirmed that we had met Crowleys and they are preparing a new form of report for the ARC which provides more detail. PL queried if this information could be provided to the Commission members. PG confirmed that it could. PG referred to some of the variances in the current Accounts and provided explanations for same. It was noted that the explanations for the variances could be included by way of footnotes.

Decision 20 of 2017

MW proposed approval of the August Accounts and NK seconded it.

(*) CIS Project

PG gave a summary of the issues as of the last meeting and what had happened in the interim – meetings with Capita x 2, documentation provided by Capita and meetings of the

Executive x 3. In relation to the issue of termination, she noted that there was no specific clause that the MHC could rely on. She said that the MHC had been advised that this was not unusual with IT contracts as IT Suppliers want to tie in the client for a minimum period. She said the Executive having considered all of the work done to date decided that it would be better to proceed with the Project.

In reply to the discussion with then took place, PG noted that the Executive are aware of the challenges but on balance having considered all issues believe this is the right thing to do. It was noted that there will be additional costs if we proceed and additional costs if we do not but with no product at the end of it. Of key importance is the need for a system in order that we can move away from the current over reliance on individuals. Furthermore, the MHC requires a system to support the services it provides, increase efficiency and free staff up to do other work which requires to be done and is not being done.

PG noted that the additional costs are available from our current budget and we expect to have the resources next year to cover the balance of costs.

In relation to the additional resources, it has been agreed to obtain a PM via agency albeit that we are over the current limit for agency but there is no other obvious way of obtaining this resource which does not lead to other difficulties. The Members agreed this was the best approach. This PM may also be able to fulfil the UAT role but if not this can be provided by the Supplier.

In the absence of in-house expertise and in an effort to ensure that the PM we get is the right person we are going to ask Deloitte to provide us with a resource to review the CVs and to take part in the interviews. This is an additional cost but given the size / importance of the Project it was thought prudent.

OK also noted that while the Supplier was anxious to proceed straightaway, the SMT had agreed that until our new PM was in place, the two PMs had met and the new plan was in place, work would not be recommenced. OK noted that we were adopting a "belt and braces" approach.

The Members said that they would support the Project continuing on the basis outlined above and that there would be full oversight of the Project / Supplier in the future.

5. Risk Management

OK informed the Members that the S&QA team were progressing matters – she outlined all of the documents that had been drafted. She referred to the new format for the Risk Register. She noted that the Executive were due to meet later in the week to review and update same. Following which the draft documents and newly formatted Risk Register will go to the ARC for their review and sign off. The ARC will then report to the Commission on the key risk issues.

PL noted that the new format looked well and noted all of the work that been done. He added that the ARC would identify Key Risk issues each year which they would look at and seek to addressed.

6. AOB

OK referred to the Bank Mandate. PG said that this required to done and explained the reason for same – Director of Corporate Services (DoCS) retirement. To ensure business continuity two members of staff have administrator rights, the CE and DoCS. It is proposed

that RS is allocated administrator rights pending the appointment of a replacement Director of Corporate Services. In terms of SMT payment approvals a replacement for the DoCs is also required and it is proposed that this is allocated to OK on an interim basis.

Decision 21 of 2107

NK proposed approval of new Bank Mandate and XF seconded same.

Signed: 

**John Saunders
Chairman**

Date: 9/11/17