

**Incident Investigation Report
Incident Ref: Mr H Homicide Caerphilly
ACTION PLAN**

ANEURIN BEVAN HEALTH BOARD & CAERPHILLY COUNTY BOROUGH COUNCIL

ACTION PLAN

RESPONSE TO THE REPORT BY HEALTH INSPECTORATE WALES

REVIEW IN RESPECT OF:

**MR H AND THE PROVISION OF MENTAL HEALTH SERVICES, FOLLOWING THE HOMICIDE COMMITTED IN
MARCH 2009**

June 2011

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Introduction

Health Inspectorate Wales has undertaken an independent external review of the circumstances in respect of Mr H leading to the homicide committed in March 2009 and the provision of mental health services at that time. The review was commissioned by the Welsh Assembly Government to ensure that any lessons that might be learned are identified and acted upon.

On the evening of 24th March 2009 Mr. H committed a homicide while he was under the care of ABHB Adult Mental Health Services and CCBC Adult Social Services. Mr. H. had been known to services since he was seven years of age. Both Organisations involved in the provision of services to Mr. H. deeply regret this tragic occurrence and extend their sympathies to the family of the victim and to the family of Mr. H.

ABHB and CCBC are committed to the improvement of Mental Health Services and have undertaken an internal review into the delivery of services to Mr. H. The lessons learned, together with the recommendations from HIW will determine the future development of safer and improved mental health services.

The Report by Health Inspectorate Wales has highlighted a number of recommendations and the following action plan identifies how ABHB and CCBC intend to address the findings.

Issue: Integration, Transition and Information-sharing between services: 3.1, 3.2 & 3.3

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		<ul style="list-style-type: none"> ➤ Roles and responsibilities ➤ Actions contained within the transition pathway. <p>All clinical staff from ABHB and Caerphilly County Borough Council will be directed to attend the training which will be provided by the respective training departments. Compliance will be monitored by the respective Team Managers.</p>					
3.3	<p>ABHB and Caerphilly County Borough Council Social Services must put measures in place to ensure that ;</p> <p>Current information sharing arrangements between services exist;</p> <p>Individuals health and social care records are made available in a timely manner on transfer to a different service;</p> <p>On allocation of new cases, care coordinators must thoroughly review all previous health and</p>	<p>ABHB & CCBC will ensure all teams have in place information sharing protocols and guidance that clarifies requirements and timescales on the sharing and transfer of information.</p> <p>Training will be provided on:</p> <ul style="list-style-type: none"> ➤ Responsibilities of Care Coordinators ➤ Importance of using previous case records and histories to inform care planning ➤ Incorporating information on diagnosis ➤ Function of risk assessment and risk management in comprehensive care planning. <p>The CPA policy will be amended to reflect the following:-</p>	Service Director for MH&LD ABHB & Assistant Director Adult services CCBC	Divisional Nurse MH &LD, ABHB & Service Manager MH & LD CCBC	July 2012	January 2012	

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	<p>social care records relating to the individual.</p> <p>All available information relating to diagnosis and risk management is taken into consideration in care planning.</p>	<ul style="list-style-type: none"> ➤ Direct the referring service handing over the individual case to assume the responsibility for providing all relevant records and case summaries to the service receiving the new referral. ➤ Direct an assessor to request the notes of an individual within 24 hours when they are first made aware that he/she has been seen previously. All previous records to be reviewed as part of the assessment. ➤ Compliance monitored by the Divisional CPA Audit process. <p>The CPA training officer to be directed to reflect all of the above changes in all future CPA training.</p> <p>Compliance of Information Sharing Protocols will be monitored by ABHB and CCBC.</p>	<p style="text-align: center;">Corporate Director Social Services and Service Director for MH&LD ABHB</p>	<p style="text-align: center;">Assistant Director Adults Social Services & Exec for Community MH & Primary Care</p>	<p style="text-align: center;">September 2011</p>		

Issue: Continuing Healthcare Placements: 3.4 & 3.5

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3.4	ABHB must ensure that Continuing Healthcare placements are made following full and due consideration of the appropriateness of the placement for the patient and that that robust mechanisms are in place to monitor the clinical performance, quality and safety of care provided in the facilities.	ABHB will develop a comprehensive system to review and agree all Continuing Healthcare placement requests, The system will identify the most appropriate placement for each individual, involving independent monitoring of quality and appropriateness. The system will include.	General Manager MH &LD ABHB	ABHB CHC Senior Nurse	Completed		 Guidance notes for summary pre...  Peer Review questions (2).doc ...  Placement review proforma.ver...  Terms of Reference Peer Review...  Peer Review Proforma version.1...
3.5	Aneurin Bevan Health Board must ensure that it sets out a clear pathway for allocating and funding Continuing Healthcare	Continuing Healthcare Senior Nurse to visit all teams to provide training on the guidance notes. Aneurin Bevan Health Board will	General Manager MH &LD ABHB Service Director	ABHB CHC Senior Nurse General Manager	August 2011 January 2012	October 2011	

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	placements and that all parties involved understand their roles and responsibilities.	<p>appoint a Contract Quality Monitoring Officer specifically for Mental Health & Learning Disabilities. Their responsibilities will be to monitor compliance with the contracts.</p> <p>A register of all individuals presently in placements will be developed and this will include the dates of all CPA reviews.</p>	<p>MH& LD, ABHB</p> <p>General Manager MH &LD ABHB</p>	<p>MH& LD, ABHB</p> <p>ABHB CHC Senior Nurse</p>	<p>August 2011</p>		

Issue: Aftercare Planning: 3.6, 3.7, 3.8, 3.9, 3.10 3.11 & 3.12

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3.6	Aneurin Bevan Health Board, Caerphilly County Borough Council and third parties such as Cygnet Hospital must put in place rigorous procedures to ensure that meetings to plan aftercare under section 117 of Mental Health Act are held in a timely manner and attended by a multi-disciplinary team, using best endeavours to ensure that	<p>All contracts with the independent service providers will specify that they assume the responsibility for arranging timely 117 aftercare meetings and CPA reviews. This will be reflected in the Contract.</p> <p>This standard to be incorporated into the current 117 Policy and relevant CPA Policy.</p> <p>The Contract Quality Monitoring</p>	<p>Service Director MH& LD, ABHB</p> <p>Assistant Director Adult Services CCBC & Service Director MH &LD ABHB</p> <p>Service Director</p>	<p>ABHB General Manager, MH &LD</p> <p>Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB</p> <p>ABHB General</p>	<p>August 2011</p> <p>September 2011</p> <p>April 2012</p>	<p>October 2011</p>	

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	aftercare plans are agreed and signed off by the RMO, Care Coordinator and third party contractor and where agreement between the three cannot be reached there must be a suitable escalation arrangement.	Officer will monitor adherence to this standard Non compliance with this standard reported to the Divisional Management Team by Contract Quality Monitoring Officer	MH& LD, ABHB	Manager, MH &LD			
3.7	Aftercare planning must be systematically undertaken at the start of a patients' detention under the Mental Health Act, in order to plan for a safe and supportive discharge.	The Section 117 policy and CPA policy will be amended to ensure that aftercare planning commences at the start of the patient's detention.	Assistant Director Adult Services CCBC & Service Director MH &LD ABHB	Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB	September 2011		
3.8	Prior to discharge a multi-disciplinary team must agree the after-care, CPA and Risk Management plans which detail the arrangements for:- Accommodation which adequately meets the needs of the patient, where accommodation is required as part of the aftercare package. How medication is to be monitored and supervised if appropriate Mitigating a full range of	ABHB & CCBC will provide Training for all Care Coordinators on the amended CPA & Section 117 Policies Training to include the following; <ul style="list-style-type: none"> ➤ Accommodation ➤ Medication ➤ Care planning ➤ Risk Assessment & Management ➤ Substance Misuse ➤ Discharge Arrangements. ABHB &CCBC to review and	Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB	ABHB General Manager, MH &LD	April 2012	October 2011	
			Assistant Director	Service Manager	September		

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3.9	<p>risk factors including substance misuse and harm to the patient and others; and Transport, supervision and care for the day of discharge.</p> <p>Aneurin Bevan Health Board and Caerphilly Borough Council must put in a mechanism to ensure that aftercare plans are timely, consistent, high quality and appropriate to meet the needs of the individual. Aneurin Bevan Health Board, Caerphilly County Borough Council and Cygnet Hospital should each conduct an audit of relevant patients currently detained under the Mental Health Act to assess the quality, timeliness and consistency of aftercare plans.</p>	<p>amend the CPA Policy to ensure that it reflects all of the above and a multi-disciplinary agreement for discharge and the escalation process for dispute.</p> <p>ABHB & CCBC must develop a joint Caseload Supervision Policy that reflects all of the following</p> <ul style="list-style-type: none"> ➤ Requires the supervisor to check on Section 117 aftercare plans ➤ Quality of care planning ➤ Timeliness of plan to meet the identified needs. <p>ABHB & CCBC to develop a register of all currently detained patients subject to 117 After care planning</p> <p>To undertake an audit of current relevant detained patients care plans.</p>	<p>Adult Services CCBC & Service Director MH &LD ABHB</p> <p>Assistant Director Adults Social Services CCBC & Service Director for MH&LD ABHB</p> <p>“</p> <p>“</p>	<p>MH &LD CCBC & Divisional Nurse MH&LD ABHB</p> <p>Divisional Nurse MH &LD, ABHB & Service Manager MH & LD CCBC</p> <p>“</p> <p>“</p>	<p>2011</p> <p>January 2012</p> <p>August 2011</p> <p>August 2011</p>	<p>October 2011</p>	
3.10	<p>Aneurin Bevan Health Board and Caerphilly Borough Council must put in place measures to ensure that their after-cares responsibilities for</p>	<p>ABHB & CCBC will review and amend the current Section 117 Policy to ensure that patients are not discharged through homelessness.</p>	<p>“</p>	<p>“</p>	<p>August 2011</p>		



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	providing adequate accommodation and housing under Section 117 of the Mental Health Act are not discharged through the homelessness route	Training will be provided on the revised Section 117 Policy to existing and new practitioners.	“	“	April 2012	October 2011	
3.11	In order to assure itself that it fully meets its Section 117 responsibilities, Caerphilly County Borough Council must revise its housing policies and processes to ensure that suitable, good quality housing is provided to people with mental health issues, particularly those due to be discharged from hospital. Systems must be put in place to enable suitable accommodation to be arranged prior to a patient's discharge from hospital.	Caerphilly County Borough Council to review and revise the current policy and processes relating to individuals with a Mental Health problem requiring accommodation. All patients subject to 117 aftercare planning for discharge from secure accommodation will be provided with an NHS bed or alternative service	Deputy Chief Executive CCBC	Head of Housing Service CCBC	October 2011		
			Service Director for MH&LD ABHB	General Manager MH & LD ABHB	Completed		
3.12	Aneurin Bevan Health Board, Caerphilly County Borough Council and Cygnet Hospital must ensure that mental health review tribunal	All Mental Health Review Tribunal recommendations that arise from reviews undertaken in Low Secure Unit's will be directed to the Team Manager in Forensic	Service Director for MH&LD ABHB	General Manager MH & LD ABHB	Completed		


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	recommendations are promptly acted upon and that there is clarity about who is accountable for owning such actions. A clear escalation process must be in place.	Services; whose responsibility it will be to action them. All cases where disputes between professionals occur and remain unresolved will be escalated by the Team Manager for Forensic Services to the Divisional Management team who will intervene until situations resolved.	“	“	Completed		

Issue: Risk Management: 3.13 and 3.14

Ref	Recommendations	Action	Lead Director	Departmental Lead	Completion Date	Interim Review Date	Progress and/or action at review date
3.13	Aneurin Bevan Health Board and Caerphilly County Borough Council must assure themselves that risk management is embedded in the culture of all mental health services, ensuring that:- ➤ All staff recognise that accurate risk assessment relies fundamentally on high quality history taking and review of all previous	ABHB & CCBC recognise that Risk Management is integral to Mental Health Services and will:- ➤ Continue to train all Care Coordinators in WARRN Risk Assessment. ➤ All forensic staff will in addition to WARRN be trained in the more specific HCR20 Risk Management assessment procedure.	Director Social Services CCBC & Service Director for MH&LD ABHB	Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB	Completed		 Pathway for Forensic Rehabilit...  CPA UAP ncommunity risk assessm

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	<p>information (inc risk assessments)</p> <ul style="list-style-type: none"> ➤ All individual risk assessments and risk management plans are up-to-date, of high quality, with appropriate levels of risk tolerance and are regularly reviewed. ➤ Due regard is given to national guidance and evidence about common risk factors, including those for patients with complex needs (e.g. co-occurring substance misuse and mental health problems) and for scenarios known to be high risk (e.g. discharge from hospital) ➤ Risk management is planned and scrutinised effectively at MDT meetings. ➤ Contingency Plans and Crisis Plans are prepared for all patients under CPA in accordance with Welsh Government Mental Health Policy Guidance. Plans must be reviewed at multi-disciplinary team meeting, when implemented in crisis 	<ul style="list-style-type: none"> ➤ Develop a pathway describing the roles, responsibilities and actions to be taken by all staff managing high risk individuals. <p>The Mental Health Division to establish a Risk Reference Panel where all care coordinators caring for high risk individuals can discuss cases and seek guidance and advice on their management.</p> <p>The profile of the Risk Reference Panel will be further promoted and communicated throughout the ABHB Communities.</p> <p>Senior Clinician from the Substance Misuse Service to be included in the Risk Reference Panel membership.</p> <p>All CMHT's must use a standard MDT Agenda which must include a discussion of high risk patient's. All MDT meeting must be minuted.</p> <p>Compliance with the MDT Agenda format, WARRN Compliance will be monitored by integration into the existing bi-annual CPA Audit.</p>	<p>Director Social Services CCBC & Service Director for MH&LD ABHB</p> <p>"</p> <p>"</p> <p>"</p> <p>"</p> <p>"</p>	<p>Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB</p> <p>"</p> <p>"</p> <p>"</p> <p>"</p> <p>"</p>	<p>Completed</p> <p>Completed</p> <p>August 2011</p> <p>Completed</p> <p>Completed & ongoing</p>		 High risk of harm to others - ...

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3.14	<p>or contingency scenarios, particularly when actions involve a multi-disciplinary response.</p> <p>Aneurin Bevan Health Board and Caerphilly County Borough Council must ensure that carers assessments are used consistently and recognise the impact of patient risk factors on carers needs as well as those of the patient</p>	<p>The Development Support Unit will be requested to include risk assessment compliance as part of their CPA audit.</p>	<p>Director Social Services CCBC & Service Director for MH&LD ABHB</p>	<p>Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB</p>	<p>Completed</p>		
		<p>GSSMS to review the service model to ensure compliance with the WAG Service Framework for people with co-occurring Substance Misuse and Mental Health problem.</p>	<p>“</p>	<p>“</p>	<p>October 2011</p>		
		<p>ABHB & CCBC TO develop and provide training for Co-occurring Substance Misuse Pathway</p>	<p>“</p>	<p>“</p>	<p>April 2012</p>	<p>October 2011</p>	
		<p>ABHB & CCBC will review the CPA Policy to include an assessment of the carers in their care planning process where appropriate.</p>	<p>Director Social Services CCBC & Service Director for MH&LD ABHB</p>	<p>Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB</p>	<p>Completed</p>		
		<p>Compliance will be monitored through the CPA and Development Support Unit audit programme.</p>	<p>“</p>	<p>“</p>	<p>Completed</p>		

Issue: Service Provision 3.15, 3.16, 3.17, 3.18, 3.19 & 3.20

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3.15	Aneurin Bevan Health Board and Caerphilly County Borough Council must ensure that services do not exclude patients with Complex needs. Eligibility criteria must be flexible, with the core emphasis focussed on individuals needs	ABHB & CCBC will direct all Teams to review their eligibility criteria to ensure that individuals with complex needs are not excluded from their service.	Director Social Services CCBC & Service Director for MH&LD ABHB	Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB	Completed		
3.16	Aneurin Bevan Health Board and Caerphilly County borough Council must ensure that the needs of children and young people with Aspergers Syndrome, and those with Co-occurring mental health issue, are met comprehensively.	<p>CCBC & ABHB will undertake a strategic review into services for children with disabilities. This will ensure that a specialist service for children with autistic spectrum disorders within the children with disabilities team is implemented.</p> <p>The CAHMS Core Group Terms of Reference will include a requirement to complete audits of the effectiveness of joint working arrangements to deliver services to children with Aspergers Syndrome and co-occurring mental health issues.</p>	<p>Director Social Services CCBC</p> <p style="text-align: center;">“</p>	<p>Assistant Director Children's Services CCBC</p> <p style="text-align: center;">“</p>	<p>Completed</p> <p>October 2011</p>		
3.17	Aneurin Bevan Health Board and Caerphilly County Borough Council must develop a range of community responses to people with Complex	The Partnership Board have commissioned the development of a new mental health strategy for Gwent. This will include a description of the model of service that will be available to all	Director of Community, Primary and MH Services ABHB & Director Social	Service Director MH&LD & Assistant Director Social Services, Adult CCBC	January 2012	October 2011	

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	needs, to include Crisis resolution/Home Treatment alongside Assertive Outreach.	people with mental health problems including those with complex needs. This model of service will include Crisis Resolution and Home Treatment Teams and Assertive Outreach Teams.	Services CCBC				
3.18	Aneurin Bevan Health Board must ensure that a comprehensive range of local in-patient mental health services is available to all patient's	ABHB will Review the current in-patient pathway in its entirety. This will enable gaps in the in-patient service provision to be identified. Findings to be sent to the Partnership Board.	Service Director MH&LD	General Manager MH&LD ABHB	October 2011		
3.19	The Mental Health Programme Board for Wales must ensure that there is sufficient NHS Low secure provision in Wales	Aneurin Bevan Health Board will engage with the All Wales Programme Board to communicate any gaps in provision of low secure services in Gwent.	Service Director MH&LD	General Manager MH&LD ABHB	October 2011		
3.20	Aneurin Bevan Health Board and Caerphilly Borough Council must ensure that the Caerphilly Assertive Outreach Team is adequately resourced to provides a service 7 days a week where needed.	Aneurin Bevan Health Board and CCBC will review Assertive Outreach Team services with a view to extending service provision to 7 days. ABHB will review with all other Local Authority partners the current provision of Assertive Outreach Team services.	Director Social Services CCBC & Service Director for MH&LD ABHB Service Director for MH&LD ABHB	General Manager MH&LD ABHB & Service Manager MH &LD CCBC General Manager MH&LD ABHB	August 2011 January 2012	October 2011	

Issue: Leadership: 3.21, 3.22 & 3.23

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3.21	<p>Aneurin Bevan Health Board and Caerphilly County Borough Council must ensure that community mental health services, including CMHT's & AOT's;</p> <p>Are managed effectively and equipped with strong leadership; and Effective managerial supervision and support mechanisms are in place.</p>	<p>ABHB and CCBC recognise the need for effective and strong management and leadership within mental health services. This will be achieved by;</p> <ul style="list-style-type: none"> ➤ All Team Leaders performance will be appraised against their Job Description ➤ Clear objectives will be identified. ➤ The findings of HIW report will be incorporated into the objective. <p>The Partnership Board has been developed and this Board will assume responsibility for overseeing the future development of integration of services in Gwent. The following points will be 'Standing Agenda items of this Board and monitored by them</p> <ul style="list-style-type: none"> ➤ Integrated management structures. ➤ Single line management posts. ➤ Team Leader Integrated Job Descriptions 	<p>Director Social Services CCBC & Service Director for MH&LD ABHB</p> <p>Director of Community, Primary and MH Services ABHB & Director Social Services CCBC</p>	<p>Service Manager MH &LD CCBC & Divisional Nurse MH&LD ABHB</p> <p>Service Director MH&LD & Assistant Director Social Services, Adult CCBC</p>	<p>October 2011</p> <p>Completed</p>		
3.22	<p>Aneurin Bevan Health</p>	<p>ABHB & CCBC will ensure all community Mental Health Teams</p>	<p>Director Social Services CCBC &</p>	<p>General Manager MH&LD ABHB &</p>	<p>October 2011</p>		

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3.23	<p>Board and Caerphilly County Borough Council must strengthen multi-disciplinary systems to support and ensure effective care planning and decision making, including escalation arrangements.</p> <p>Aneurin Bevan Health Board and Cygnet must undertake a thorough review of the rationale for the clinical decisions made at the time of Mr H's discharge from Kewstoke and his subsequent care by the Caerphilly CMHT and non-admission to Ty-Sirhowy.</p>	<p>operational policies are reviewed to ensure they have strong Multi Disciplinary systems in place to support and ensure:</p> <ul style="list-style-type: none"> ➤ effective care planning ➤ decision making ➤ escalation arrangements <p>All Team Leader will be directed to immediately escalate any case, where they feel the decision making within the team is being compromised, to the Divisional Management team who will take remedial action.</p> <p>ABHB will undertake a comprehensive review of the clinical decision making rational of ABHB staff highlighted by the report</p>	<p>Service Director for MH&LD ABHB</p> <p style="text-align: center;">“</p> <p>Director of Medical Services ABHB</p>	<p>Service Manager MH &LD CCBC</p> <p style="text-align: center;">“</p> <p>Service Director for MH&LD ABHB</p>	<p>Completed</p> <p>August 2011</p>		