

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

**RR/App 31(ii)/2022**

(Agenda item: 27(e))

# 

**Board of Directors**

**Terms of Reference v6**

**Mental Health & Law Committee**

**For: Approval**

**Executive Summary**

The draft Terms of Reference went to the Public Board Meeting on 30th March 2022. Due to time restraints, they were considered after the meeting. Only two straight approvals were received, and 11 approvals would be required for approval out of session.

On the 28th April at the MHLC, the Board queries and ToR were considered and addressed, with an updated ToR V6 recommended for Board Approval. The Responses are below.

**Observations / Queries raised by Board Members and responses:**

*This committee was previously set up in response to a CQC criticism that the Board had insufficient oversight of the MH Act. My understanding was that it was to be a task and finish committee to strengthen our oversight and ensure processes were created to feed appropriate information in to Board meetings. There was a specific action plan developed to do this. Given demands on both Exec and NED time, is there a reason why this is now being morphed into a permanent sub committee? Are MHA sub committees a common feature of NHS boards?*

**Response:** MHA sub-committees are a common feature of NHS MH provider Board. This was the reason the CQC would have highlighted this. These committees report directly to the Board.

*What is driving the expansion of remit? Have any specific concerns been identified internally, any feedback received from external agencies, or themes emerging from SI reviews/complaints/disciplinary processes etc?*

**Response:** Mental Health legislation is already part of the work undertaken by this committee, but has not been indicated in its previous TOR or indeed it name.

*The remit of the committee is being expanded beyond the Mental Health Act with the TOR referencing ‘all legislation governing the care provided to its service users’. This wording suggests it will apply to clinical care across the Trust, including that provided within the community directorate, forensic and specialised services directorate and LD team, which I’m supportive of. The bulk of the TOR wording is MH heavy so could perhaps be expanded to make greater reference to those non-MH areas.*

**Response**: Mental Health legislation impacts more than on the MH directorate, e.g. Mental Capacity Act, and the Human Rights Act, and affects all NHS patients and a remit for all staff. This is covered by the ToR. This will be reviewed by the MHLC in due course.

*It would be useful for a cover note to draw attention to i) the scale of difference and ii) to highlight those differences compared to existing*

**Response:** The previous chair, spend much time considering this. The new ToR states more clearly what the committee work has been. This is included in the updated ToR.

*In a couple of areas where one might reasonably expect other committees to be active, I would like to understand better the specific role of this committee. These are:*

*“• Provide a forum for consideration of matters with a wide ethical and social impact (separate from clinical ethics) such as:*

*o Population Health;*

*o Health and Social care; and*

*o Research and Development. “*

*I would think both Quality and PLC would participate in the first 2 of these 3 bullet points and good not to trip over ourselves here.*

**Response:** There is no reason that Board Committees address the same issue, but with different perspectives, and with some overlap. The *Care Act* is one area that has been included in the ToR with spans the 1st two points.

“*6.4 The Committee will monitor coherent internal and external communication around Trust values, ethics and human rights; “*

*The intersection with Values is again something that would be good to coordinate with PLC and the wider OD agenda.*

*So perhaps it’s a combo of some more specificity about the differentiated role of MHL in these areas and then also to flag areas of common interest with other committees.*

*In other ToR structures I’ve seen a section ‘Key Relationships’ which can be a useful parking place to list these*

**Response:** Excellent to have Key Relationships, and this has been added to the ToR. We would hope that that MHLC, could signpost area for action/consideration for other Board Sub committees or other Trust working groups. The ToR indicates that.

**Recommendation**

The MHLC has discussed and revised the Terms of Reference. It is recommending the TOR to the Board for their approval.

**Lead Executive Director: Dr Karl Marlowe , Chief Medical Officer**

**28th April 2022**