

PART 1 - PUBLIC

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**Decision Maker:**      **Adult and Community PDS Committee**

**Date:**                    **27<sup>th</sup> July 2010**

**Decision Type:**      Non-Urgent                    Non-Executive                    Non-Key

**Title:**                    **MATTERS ARISING FROM PREVIOUS MEETINGS**

**Contact Officer:**      Philippa Stone, Democratic Services and Scrutiny Officer  
Tel: 020 8313 4871    E-mail: philippa.stone@bromley.gov.uk

**Chief Officer:**        Mark Bowen, Director of Legal, Democratic and Customer Services

**Ward:**                    N/A

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1.    Reason for report

- 1.1   This report updates Members on recommendations from previous meetings which continue to be “live”.

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2.    **RECOMMENDATION(S)**

- 2.1   The Committee is asked to note the progress on recommendations made at previous meetings.

### Corporate Policy

1. Policy Status: Existing policy. "Building a Better Bromley"
  2. BBB Priority: Excellent Council.
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### Financial

1. Cost of proposal: No cost
  2. Ongoing costs: N/A.
  3. Budget head/performance centre: Democratic Services
  4. Total current budget for this head: £476,706
  5. Source of funding: Existing Budget
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### Staff

1. Number of staff (current and additional): There are 14 posts in the Democratic Services team (11.89 fte, of which 10 fte are dedicated to committee support).
  2. If from existing staff resources, number of staff hours: Maintaining the matters arising report takes less than an hour per meeting.
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### Legal

1. Legal Requirement: No statutory requirement or Government guidance.
  2. Call-in: Call-in is not applicable.
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### Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Current Membership of the A&C PDS Committee (16 Members including Co-opted Members)
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### Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

<b><u>Minute Number/Title</u></b>	<b><u>Decision</u></b>	<b><u>Update</u></b>	<b><u>Action</u></b>	<b><u>Completion Date</u></b>
<b>29<sup>th</sup> September 2009</b>				
<b>45. Bromley PCT: Update on Primary Care Developments</b>	<b>That representatives from the PCT be asked to return to the Committee in September 2010 to provide a further update.</b>		Scrutiny Co-ordinator	September 2010
<b>17<sup>th</sup> November 2009</b>				
<b>65. Adult and Community Services Mid-Year Performance</b>	<b>That a further report outlining details of the project allocating self monitoring machines to patients with long-term conditions be provided to a future meeting.</b>	The project is being led by Supporting Independence in Bromley. Further information will be available towards the end of 2010.	Manager - Supporting Independence in Bromley	November 2010
<b>24<sup>th</sup> February 2010</b>				
<b>88. Quality Monitoring of Care Homes – Annual Report</b>	<b>That a rota for visits to care homes be circulated to the Committee</b>	The rota was circulated to Members following the last meeting.	Democratic Services and Scrutiny Officer	July 2010
<b>92. Timeliness of Assessments and Reviews</b>	<b>That data covering the number of referrals from 2006 to 2009 be provided.</b>  <b>That an update report be provided to the Committee is 12 months.</b>		Assistant Director Care Services	February 2011

<u>Minute Number/Title</u>	<u>Decision</u>	<u>Update</u>	<u>Action</u>	<u>Completion Date</u>
<b>14<sup>th</sup> April 2010</b>				
<b>115. Findings from the Transport Reference Group</b>	<b>That the report and recommendations from the Transport Reference Group be endorsed and forwarded to the relevant Portfolio Holders subject to the amendment to Recommendation Two.</b>	Funding for the Mobility Forum is awaiting approval from the Environment Portfolio Holder.		
<b>22<sup>nd</sup> June 2010</b>				
<b>5. Minutes of the ACS PDS Meeting held on 17<sup>th</sup> March</b>	<b>An issue was raised regarding whether the tag worn by patients could be a breach of their human rights and it was suggested that this issues be raised with SLAM when representatives attended a future meeting.</b>			22 March 2011
<b>6. Matters Arising from Previous Meetings</b>	<b>The Chairman queried whether a response had been received from Oxleas regarding the issue of locking wards</b>  <b>That the issue of missed appointment be raised with Dr Streather</b>	A response was received from Iain Dimond, Bromley Service Director, on 28 <sup>th</sup> June is Attached as appendix 2 to this report  Cr Streather will be attending a meeting of the Health Check Working Group and the issue can be raised during this meeting.	Democratic Services and Scrutiny Officer  Health Check Working Group	28 June

<b><u>Minute Number/Title</u></b>	<b><u>Decision</u></b>	<b><u>Update</u></b>	<b><u>Action</u></b>	<b><u>Completion Date</u></b>
<b>9. Supporting Independence in Bromley</b>	<b>Some concern had been expressed around the way information regarding day activities for adults was captured.</b>	The issue has been added to the Committee's Work Programme.	Democratic Services and Scrutiny Officer.	25 <sup>th</sup> June 2010
	<b>The Committee requested an update on the possibility of re-ablement services for self-funders.</b>	The issue has been added to the Committee's Work Programme for February 2011	Democratic Services and Scrutiny Officer	25 <sup>th</sup> June 2010
	<b>That Age Concern Bromley be invited to a future meeting to provide an update on the Brokerage Service</b>	Age Concern Bromley have been invited to provide an update to the Committee at their next meeting.	Democratic Services and Scrutiny Officer	25 <sup>th</sup> June 2010
<b>10. Confirmation of A&amp;C Portfolio Plan 2010/11</b>	<b>That further information be sent to Councillor Fookes regarding the support into employment given to people with mental health needs.</b>  <b>That the issue of supporting people with mental health needs back into employment be added to the Committees Work Programme and that representatives from Bromley Economic Partnership be invited to attend the meeting when the issue is considered.</b>			
<b>11. Update from South London Healthcare NHS Trust</b>	<b>That the issue of patient falls be taken up in the Health Check Working Group</b>		Health Check Working Group	

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**From:** Iain Dimond [mailto:Iain.Dimond@oxleas.nhs.uk]  
**Sent:** 28 June 2010 17:53  
**To:** Stone, Philippa  
**Cc:** Helen Jones; Helen Smith  
**Subject:** Re: Locked Wards at Green Parks House

Dear Philippa

Thank you very much for your email. I would be pleased to provide further clarification regarding the definition of "locked" in the context of Green Parks House.

I can appreciate that the definition of "locked" and how it is applied in a mental health inpatient setting can appear confusing. Green Parks House is an open acute inpatient mental health unit as opposed to a secure unit, where everybody will be detained under the mental health act. In an acute inpatient setting like Green Parks House, some patients are detained under the mental health act and others are not. For the former group, their movements on and off the ward will be restricted by the very fact of being subject to the mental health act. For the latter this won't be the case.

However Oxleas, along with a number of Trusts around the country has found itself in the position of locking the doors to all of its acute inpatient facilities. The need for locking ward entrances is widely recognised, the Mental Health Act Code of Practice certainly does not prohibit the locking of doors, but does give some guidance about arrangements to be put in place (which I have attached).

Fundamentally the ward door is locked for two specific reasons. The first being to prevent access to the ward by intruders, thus keeping a vulnerable patient group safe and also ensuring the safety of the staff and the belongings of both groups as well as the Trust. The second reason is with regard to individual patient safety.

The controlling of access and egress from the ward should involve a process which facilitates contact between staff and patients for both entry and exit. Pro-active clinical management means that issues of risk and safety should be managed on an individual basis. Essentially this means that a patient should not be able to leave the ward without clinical staff being aware. This supports informed risk taking and shared care with the patient. Equally it offers the opportunity to carry out intervention if needed. Informal patients (i.e. those not detained under the Mental Health Act) must inform a member of staff when leaving the ward, indicating where they are going and how long they expect to be.

Understandably the issue of locked doors gets caught up in what is a deprivation of liberty. Whilst there is no concrete definition of this all of the guidance states that locking of doors does not automatically lead to a deprivation of liberty. It therefore remains lawful to keep ward entrances locked as long as there is an appropriate policy to support this and that those patients treated on an informal basis are aware of processes to be followed in the event they wish to leave the ward.

The above applies to all five wards at Green Parks House. I have also attached a poster for patients and carers that should be on display on all the wards explaining the process for exiting the ward. The current policy is in the process of being reviewed across the Trust.

I hope this clarifies the situation, please do not hesitate to contact me if you would like further explanation.

Best regards  
Iain Dimond

Iain Dimond  
Bromley Service Director  
Banbury House  
Bushell Way  
Chislehurst  
BR7 6SF

*NAME OF WARD*

**Unless you have been told otherwise, you have the right to come and go from the ward freely.**

**The provision of a safe environment and your personal safety is of the utmost importance to staff on the ward.**

**We recognise our responsibilities and duty of care in ensuring that *Name of Ward* is safe and secure environment for the delivery of patient care.**

**At *Name of Ward* we acknowledge the need to be available to provide safety to you, the staff and the public. In addition, we have a duty to provide protection to you from the public.**

**If you wish to leave the ward, you should ask a member of staff to open the door and they will open it immediately, unless there is a known and valid reason not to do so.**

**If you leave the ward unaccompanied by staff, you must let a member of staff know where you are going and approximately when you expect to return.**

**If you are not allowed off the ward you will be given a reason and a member of staff will discuss this with you privately if you wish.**