

**PWYLLGOR DEDDFWRIAETH IECHYD MEDDWL
MENTAL HEALTH LEGISLATION COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 November 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health Legislation Scrutiny Group Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers, Chief Operating Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Kay Isaacs, Chair of Mental Health Legislation Scrutiny Group

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Mental Health Legislation Scrutiny Group is a Sub-Group of the Mental Health Legislation Committee (MHLC).

The purpose of this paper is to present the Mental Health Legislation Committee an update from the Mental Health Legislation Scrutiny Group (MHLSG) meeting held on 13th of November 2025.

Cefndir / Background

The following papers are submitted as standing items on the MHLSG agenda in line with the principal duty of the scrutiny group as described within the Terms of Reference alongside any other relevant reports.

- Mental Health Act Use which includes a Specialist Child & Adolescent Mental Health Service (SCAMHS) report on admissions to the designated bed on Morlais Ward
- Mental Health Measure performance report
- Three County Local Authority Mental Health Act Data reports
- Quality Assurance and Practice Development – Care and Treatment Plan Audit

Papers are sent out to members of the MHLSG seven days in advance of the meeting and members are expected to read all papers to allow for scrutiny and discussion in respect of information provided.

The November meeting had good representation from agencies, reports were shared ahead of the meeting to facilitate discussion and scrutiny.

Concern raised in relation to the practice of discharging individuals off S2 of the Measure whilst still subject to S177 Aftercare was raised as a matter of interest.

Action – To review relevant patient cases in Pembrokeshire in the first instance and report back to SG.

S136 Review - Multi- Agency Options Appraisal Review update

The option appraisal process concluded with option 3 identified as the consensus for the location for a centralised place of safety for S136 assessments. This location is situated at the back of the Psychiatric Intensive Care and Low Secure Unit in Hafan Derwen, St David's Park, Carmarthen. Although the option appraisal process has concluded, there has been slight delay due to aligning governance processes, so an update will be provided at a future Board meeting.

Risk Register

There remain three legislation service risks on the MH&LD Clinical Care Group Risk Register.

- Temporary closure of the Community Place of Safety at Gorwelion, Aberystwyth.

This remains unchanged whilst the S136 Multi Agency Option's Appraisal progresses to a conclusion.

- Delayed admission to hospital following a Mental Health Act Assessment (MHAA) when medical recommendations for detention have been provided.

This risk was originally identified by LA colleagues due to non-availability of beds following a Mental Health Act Assessment when formal detention was required. Anecdotal activity suggests an improved position.

Plan - for LA to provide data in their reports so that the respective service holding this risk can review accordingly.

- Medical and nursing staff deficits in Gorwelion Community Mental Health Centre remain on the risk register.

Temporary service change introduced in March 2025 had a positive impact on Measure performance data and a paper has been submitted to November Public Board to seek approval for the service change to become permanent. In addition, there is an additional request that if this change is approved, for GP routine referrals to be sent to the Single Point of Contact Service, 111#2, it is then extended to Carmarthenshire and Pembrokeshire subject to engagement with stakeholders.

MH Measure Report

The Measure report which provides activity and performance data was shared prior to the meeting. This report was discussed and scrutinised and the Mental Health Measure report on the Committee agenda will cover the salient points arising from this.

Introduction of revised audit tool and cycle for Comprehensive Assessment Tool, Care and Treatment Plan, Wales Approved Risk Network and Record Keeping

The clinical lead coordinating the new audit tool and cycle for Comprehensive Assessment Tool (CAT), Care and Treatment Plan (CTP), Wales Approved Risk Network (WARRN) and Record Keeping attended the meeting and provided an overview and summary in respect of findings of the first audit cycle. The Comprehensive Assessment Tool has been audited in Community Mental Health Teams both Adult and Older Adult. The audit cycle is now completed and initial learning gained from overarching data indicates that the overall quality of the record keeping exceeded minimum expected standards.

Areas for improvement were noted in the following sections contained in CAT, Physical Health, Carers, Substance Use and Risk management plans when WARRN not required. A data summary will be provided to each Team Lead in to improve on the areas identified.

The next audit to be undertaken is WARRN and the results will be shared in the March 2026 MHLG and included in the Committee report.

Mental Health Act Report

The Mental Health Act report containing activity and performance data was shared prior to the MHLG meeting. This report was scrutinised and debated and the Mental Health Act report on the agenda will cover the salient points arising from this.

Local Authority Reports

Pembrokeshire:

Mental Health Act data provided reported an increase in use of the MHA, particularly out of hours, and the shortage of an AMHP workforce continues.

Carmarthenshire:

Report received but apologies, as no Carmarthenshire LA representation at the meeting. Issue of access to St John's ambulance raised in the report. The meeting was informed that there has been a change in St John's provision and there is now, no routine localised cover overnight but instead access to the service is centralised in Cardiff.

Ceredigion:

Increase use of Emergency Departments to undertake assessment for individuals under S136 LA to monitor and confirm how many had a physical requirement to attend ED in the first instance.

Terms of Reference

The ToR and group membership was reviewed and approved in the November meeting and is on the agenda for Committee approval.

Argymhelliad / Recommendation

The Committee is asked to receive the Mental Health Legislation Scrutiny Group Update.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	10.4.1 Report formally, regularly and on a timely basis to the Board on the Scrutiny Groups activity. This includes the submission of a Committee update report, as well as the presentation of an annual report within six weeks of the end of the financial year.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of the Mental Health Legislation Scrutiny Group.
Rhestr Termiau: Glossary of Terms:	MHLSG – Mental Health Legislation Scrutiny Group MHLOG – Mental health Legislation Operational Group CWCDG – Clinical Written Control Document Group MH/LD – Mental Health / Learning Disabilities WCDG – Written Control Document Group WMF – Ward Managers Forum CRHT – Crisis Resolution Home Treatment QAPD – Quality Assurance Practice Development AMH – Adult Mental Health IMHA – Independent Mental Health Advocate SSWA – Social Services and Wellbeing Act MHA – Mental Health Act

	<p>MHM – Mental Health Measure DOL – Deprivation of Liberty HIW – Healthcare Inspectorate Wales CIW – Care Inspectorate Wales CHC – Community Health Council CTP – care and Treatment Plan CMHT – Community Mental Team CTLD – Community team Learning Disability OAMH – Older Adult Mental Health</p>
<p>Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Deddfwriaeth Iechyd Meddwl: Parties / Committees consulted prior to Mental Health Legislation Committee:</p>	<p>MHLSG Mental Health Act Legislation Manager</p>

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Non-compliance with Mental Health Legislation could result in legal proceedings being brought against the University Health Board.
Ansawdd / Gofal Claf: Quality / Patient Care:	SBAR template in use for all relevant papers and reports.
Gweithlu: Workforce:	SBAR template in use for all relevant papers and reports.
Risg: Risk:	<p>Risk of non-compliance with the 1983 Act and with the Welsh Government's Mental Health Act 1983 Code of Practice for Wales; the Mental Health (Wales) Measure 2010 Code of Practice; and with the Good Governance Practice Guide – Effective Board Committees (Supplementary Guidance) Guidance.</p> <p>Safety of patients</p> <p>Assurance – use of statutory mechanisms</p>
Cyfreithiol: Legal:	Not Applicable.

Enw Da: Reputational:	Not Applicable.
Gyfrinachedd: Privacy:	Not Applicable.
Cydraddoldeb: Equality:	Not Applicable.