

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	04 June 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Mental Health (Wales) Measure 2010 Performance Report between January 2026 – March 2026
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mr Andrew Carruthers, Chief Operating Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Ms Amanda Davies, Head of Adult Mental Health Community

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of this paper is to present to the Mental Health Legislation Committee the Mental Health Performance Report in relation to the Mental Health (Wales) Measure 2010 between January 2026 – March 2026.

The paper also includes assurance of other work carried out by the Mental Health and Learning Disabilities Clinical Care Group where related to mental health.

Cefndir / Background

The purpose of this Committee is to allow senior managers and clinicians from Hywel Dda University Health Board, its partner agencies, and other stakeholders to scrutinise the University Health Board's (UHB) performance, to highlight areas of good practice, and any areas of concern that must be brought to the attention of the Committee. This paper summarises performance, and any actions that have been implemented, to ensure improvements in the identified areas.

The Mental Health (Wales) Measure 2010

The Mental Health (Wales) Measure 2010 is being reported to the Committee on a quarterly basis to provide assurance that activity is closely monitored, and that practice is compliant with the requirements of The Code of Practice. This is primary legislation that was passed by the Welsh Government in 2010 and became operational during 2012. The intention of the legislation is to ensure that people can access appropriate mental health support services, receive care that is co-ordinated by a named person, enables direct access back to services following discharge and that the entitlement to independent mental health advocacy is increased.

To achieve this the Measure is divided into four Parts:

Part 1 - The expansion of mental health services within primary care settings

Part 2 - The introduction of the statutory Care and Treatment Planning for individuals receiving secondary mental health services

Part 3 - Enabling former users of secondary mental health services who have been discharged to refer themselves back for assessment without having to first go to their GP
 Part 4 - Expanding the Independent Mental Health Advocacy (IMHA) to informal patients.

Asesiad / Assessment

Part 1 – Local Primary Mental Health Support Services

Adult Part 1(a)

During December 2025, we observed an increase in demand alongside workforce pressures, including sickness absence, vacancies, and planned Christmas annual leave. These factors contributed to a temporary reduction in compliance. Following the winter period, compliance has improved in line with expectations; however, demand remains consistently high across all teams. We continue to see an increasingly complex patient profile, which is extending assessment times and, in some cases, requiring follow-up assessment appointments. This has the potential to impact overall compliance percentages. Following the challenges experienced over the last two months, teams have refocused on maximising available treatment slots. All vacant posts have now been recruited to, and sickness levels are reducing; however, Carmarthenshire services remain fragile due to a combination of long-term and short-term sickness absence. All teams are actively utilising the Primary Care Liaison Service (PCLS) at the point of referral, which is helping to reduce pressure on Local Primary Mental Health Support Services (LPMHSS) at the initial stage of the patient pathway.

Adult Part 1(b)

Compliance remains high above the required level which reflects the team's hard work. Treatment slots have returned to normal levels following the challenges over the last two months. Estates access continues to be challenging across the three counties. Staff are utilising supportive intervention options from third sector, SilverCloud digital options and our PCLS is operating across the three counties with positive outcomes of reducing potential referrals to LPMHSS, a focus on group interventions remains, however as a service we will be reviewing the current treatment menu to ensure effectiveness in treatment options. New staff in place and undertaking their induction.

PART 1	Detail		Jan	Feb	Mar
Target a	80% of assessments by the LPMHSS undertaken within 28 days from date of receipt of referral	Adult	75.2%	88.9%	92.6%
		CAMHS	93.1%	88.4%	87.7%
Target b	80% of therapeutic interventions started within 28 days following an assessment by the LPMHSS	Adult	93.4%	98.6%	99.3%
		CAMHS	90.7%	83.3%	69.2%

It was noted and discussed that the introduction of the open access and one-at-a-time approach may affect future reporting against Part 1 of the Measure. The demonstration projects may also influence reported data. A meeting will be arranged to begin local discussions and agree a broad approach to future reporting and data collation, and the matter will also be escalated to national leads for inclusion in future discussions.

Child and Adolescent Mental Health Services (AMHS) Part 1 b

Accumulation of leave in March 2026 led to lower capacity due to poor planning on the part of the service, leading to diminished capacity. This followed a period of increased maternity leave and existing staff holding off taking leave. This has been addressed with the team.

Part 2 – Care and Treatment Planning (CTP)

PART 2	Detail		Jan	Feb	Mar
Measure 1	90% of LHB residents who are in receipt of secondary mental health services to have a valid CTP	Adult	93.8%	96%	95.9%
		OAMHS	96%	96.2%	99.3%
		LD	95.7%	97.1%	97.4%
		CAMHS	91.2%	92.2%	94.5%
		Commissioning	100%	100%	81%

Adult Mental Health

Adult Services are fully compliant; however, North Ceredigion is currently not compliant. Notwithstanding this position, the service continues to demonstrate positive progress toward achieving the required standard. Improvement has been incremental, with overall compliance recorded at 77% in March. Discussed during the meeting regarding the action being undertaken by the Senior Nurse in Ceredigion to ensure that the improvement is increased by the Team.

Older Adult Mental Health Services (OAMH)

Overall OAMH Service's Care and Treatment Planning (CTP) completion has remained consistently above target during this quarter. Challenges due to staff maternity absences within South Carmarthenshire CMHT remain, however overall, across the four teams, performance has been maintained.

Learning Disabilities

Compliant through this quarter.

Specialist Child and Adolescent Mental Health Services (S-CAMHS)

Compliant through this quarter.

Commissioning

The reported compliance rate is low at 81%; however, this appears to be due to an administrative reporting error. All patients have a valid CTP in place, and actual compliance is therefore 100%.

New to secondary Mental Health services under CTP	Jan	Feb	Mar
Adult	32	19	28
Older	30	40	31
CAMHS	8	less than 5	12
LD	less than 5	less than 5	less than 5

Discharged from secondary Mental Health services	Jan	Feb	Mar
Adult	20	22	31
Older	29	26	32
CAMHS	7	8	less than 5
Learning Disabilities	less than 5	less than 5	less than 5

Data remains balanced within this quarter.

Part 3 – Self Referral to Secondary Care for Former Service Users

Adult Mental Health & Older Adult Mental Health Services OAMH

PART 3	Detail		Jan	Feb	Mar
Measure 1	Individuals are re-assessed in a timely manner; and a copy of a report to that individual is provided no later than 10 working days. (Total number of requests for re-assessment received) Target 100%	Adult	100%	100%	100%
		OAMHS	100%	100%	100%

Part 4 – Independent Mental Health Advocacy – Local Targets only

Adult inpatient

IMHA Performance target consistently met throughout the quarter.

Older Adult inpatient

IMHA Performance target consistently met throughout the quarter.

S-CAMHS inpatient

IMHA Performance target consistently met throughout the quarter.

Detail		Jan	Feb	Mar
100% of hospitals to have arrangements in place to ensure advocacy is available to all qualifying patients – Percentage of qualifying compulsory / voluntary patients have been offered advocacy services in the mental health services (Target 100%)	Adult	100%	100%	100%
	OAMHS	100%	100%	100%
	CAMHS	100%	100%	100%

Detailed IMHA Report

Mental Health Ward	JAN	FEB	MAR
Bryngofal - Carms	42	45	38

Bryngolau - Carm's	9	6	8
Low Secure Unit (LSU) - Carm's	9	7	7
Psychiatric Intensive Care Unit (PICU) - Carm's	14	16	14
Morlais - Carm's	8	11	11
Rainbow Suite/CAMHS - Carm's	0	0	0
St Caradog - Pembs	26	23	24
St Non - Pembs	14	12	16
Enlli - Ceredigion	12	13	19
Total Carmarthenshire	82	85	78
Total Pembrokeshire	40	35	40
Total Ceredigion	12	13	19
Total MH Units	134	133	137

General Hospital	JAN	FEB	MAR
Prince Phillip - Carm's	1	0	1
Glangwili - Carm's	5	less than 5	less than 5
Llandoverly - Carm's	0	0	0
Amman Valley - Carm's	0	0	0
Withybush - Pembs	7	6	7
South Pembs - Pembs	0	less than 5	less than 5
Bronglais - Ceredigion	3	0	less than 5
Tregaron - Ceredigion	0	0	0
Total Carmarthenshire	6	less than 5	less than 5
Total Pembrokeshire	7	10	9
Total Ceredigion	less than 5	0	less than 5
Total General Hospital	16	14	15

Community:	JAN	FEB	MAR
Carmarthenshire	0	less than 5	less than 5
Pembrokeshire	3	less than 5	less than 5
Ceredigion	0	0	less than 5
Community Total:	less than 5	less than 5	less than 5

During the meeting, concerns were raised regarding patient feedback about the recent shift to Mental Health Review Tribunals being conducted via Microsoft Teams, with face-to-face hearings now reserved only for exceptional circumstances.

Feedback relayed through the IMHA service indicates that some patients view this change as a backward step in their care, reporting significant difficulties engaging effectively in an online format. These concerns are being escalated through the All-Wales IMHA Peer Group to ensure that the patient voice is fully represented and that the impact of this change is understood at a national level.

72 Hour Follow up following inpatient discharge

Figures are of the people discharged from adult acute mental health wards.

Detail	Jan	Feb	Mar
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Number of people offered a post discharge within 72 Hours	23	30	25
Number of people received a post discharge follow up within 72 hours	20	23	21

The need for assurance was discussed to ensure that follow-up arrangements for individuals discharged out of area and to District General Hospitals are clearly understood and that appropriate follow-up care is provided.

Argymhelliad / Recommendation

For the Committee to take assurance from the Mental Health Performance Report in relation to the Mental Health (Wales) Measure 2010 between January 2026 – March 2026.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.2 The provisions of the Mental Health (Wales) Measure 2010 are implemented and exercised reasonably, fairly and lawfully;
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)	3. Effective 4. Efficient
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	
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

**Gwybodaeth Ychwanegol:
Further Information:**

Ar sail tystiolaeth: Evidence Base:	Contained within the body of the report
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Deddfwriaeth Iechyd Meddwl: Parties / Committees consulted prior to Mental Health Legislation Committee:	Mental Health Scrutiny Group

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not Applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Contained within the report
Gweithlu: Workforce:	Contained within the report
Risg: Risk:	Contained within the report
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable

**Cydraddoldeb:
Equality:**

Not Applicable