

**COFNODION Y CYFARFOD**  
**PWYLLGOR SICRWYDD DEDDFWRIAETH IECHYD MEDDWL**  
**WEDI EU GYMERADWYO / APPROVED**  
**MINUTES OF THE**  
**MENTAL HEALTH LEGISLATION COMMITTEE (MHLC)**

Date and Time of Meeting:	10:30-12:00pm, Tuesday 5 June 2025
Venue:	Ystwyth Board Room and Via MS Teams

Present:	Mr Iwan Thomas, Independent Member and Vice Chair of MHLC Mrs Eleanor Marks, Vice Chair of Hywel Dda University Health Board Ms Ann Murphy, Independent Member
In Attendance:	Ms Liz Carroll, Service Director MH&LD Clinical Care Group Dr Warren Lloyd, Associate Medical Director/Consultant Psychiatrist CAMHS Ms Kay Isaacs, Assistant Director of MH&LD Ms Ruth Bourke, Mental Health Act Administration Lead Ms Jane Hitchings, Pembrokeshire Local Authority Ms Angie Darlington, West Wales Action for Mental Health Mr Neil Mason, Head of Service for Older Adult Mental Health Service Ms Amanda Davies, Head of Service for Adult Mental Health Service Ms Clare James, Head of Corporate Governance Mr Richard Jones, Consultant Nurse and Responsible Clinician MHL D Ms Corinne Everett-Guy, Carmarthenshire Local Authority Mr Thomas Jones, Audit Wales Mr Simon Thomas, Ceredigion Local Authority  Secretariat: Ms Manon Horscroft, PA to Assistant Director of Nursing, Patient Safety, Quality and Experience MH&LD

MHLC (25) 01	Introductions and Apologies for Absence	Action
	<p>Mr Iwan Thomas introduced himself to committee and welcomed all attendees to the meeting.</p> <p>The following apologies for absence were received:</p> <ul style="list-style-type: none"> <li>• Supt Chris Neve, Dyfed-Powys Police</li> <li>• Andrew Carruthers, Chief Operating Officer</li> <li>• Chantal Patel, Independent Member and Chair of Mental Health Legislation Committee</li> <li>• Becky Temple-Purcell, Assistant Director of Nursing, Patient Safety, Quality and Experience</li> <li>• Angela Lodwick, Assistant Service Director of MHL D Clinical Care Group</li> <li>• Lisa Bassett-Gravelle, Head of Adult Mental Health Inpatient Wards and Learning Disabilities</li> <li>• Sarah Roberts, Mental Health Legislation Manager</li> </ul>	

MHLC (25) 02	<p><b>Declarations of Interests</b></p> <p>No declarations of interest were made.</p>	
MHLC (25) 03	<p><b>Minutes of the meeting held on 11 March 2025</b></p> <p>The minutes of the meeting held on <b>11 March 2025</b> were <b>APPROVED</b> as an accurate reflection of the previous meeting.</p> <p>Mr Thomas requested an update from Ms Jane Hitchings following the concerns that were raised during the previous meeting on Pembrokeshire staffing issues. Ms Hitchings noted that there is no update to date, the service is supported by herself and the team manager. The service currently has job advertisements out where they have increased the salary to draw more applicants in. Ms Hitchings confirmed to Committee that the service is maintaining the statutory functions under the Mental Health Act.</p>	
	<p>The Committee <b>NOTED</b> and <b>APPROVED</b> the minutes from the previous MHLC meeting held on the <b>11 March 2025</b>.</p>	
MHLC (25) 04	<p><b>Table of Actions from the meeting held on 11 March 2025</b></p> <p>There were no new and outstanding actions to review from the previous meeting.</p>	
	<p>The Committee <b>RECEIVED</b> and <b>NOTED</b> the MHLC Table of Actions.</p>	
MHLC (25) 05	<p><b>MHLC Annual Report 2024-2025</b></p> <p>The Committee reviewed and approved the Mental Health Legislation Committee Annual Report 2024-2025. Highlights included the absence of issues escalated to the public board, resolution of breaches under the Mental Health Measure 2010, and the rectification of hospital managers' pay issues. The committee acknowledged the difficulty in capturing patient stories due to the nature of the service and committed to exploring new methods.</p> <p>It was noted to Committee that the Annual Report was awaiting Chairs comments and reflections where Mrs Eleanor Marks apologised to Committee for the delay.</p> <p>Mrs Marks thanked Committee and the team who have created the report. The report covers the amount of work that the committee have discussed throughout the year.</p> <p>The Committee <b>RECEIVED</b> and <b>AGREED</b> the MHLC Annual Report 2024-2025</p>	
MHLC (25) 06	<p><b>Annual Review of MHLC Terms of Reference</b></p>	
	<p>The Committee received an update regarding the Terms of Reference, which outline the purpose, scope, membership and</p>	

operational arrangements of the Mental Health Legislation Committee. These Terms of Reference were last reviewed in June 2024 and subsequently approved by the Board on 25 July 2024.

For clarity, it was noted that the Board approved further amendments at its meeting on 28 January 2025. This included confirmation that the Committee shall comprise four Independent Members, reflecting a reduction in independent membership. Additionally, job titles were updated to reflect current roles. It was also confirmed that the Director of Corporate Governance would be removed from the 'In Attendance' section, although attendance at meetings would continue via a nominated deputy to provide governance support as required.

For those who had reviewed the report, it was further highlighted that specific changes had been applied to the Terms of Reference at points 3.2, 4.1, and 4.3, ensuring alignment with current governance arrangements and operational practices.

Ms Ann Murphy, Independent Board Member representing the Trade Unions, raised concerns regarding committee attendance and representation. She noted that, according to the Terms of Reference, two-thirds of the membership should be present for the meeting to be quorate. However, she observed that only three Independent Members were in attendance out of a total of twelve members present, raising questions about the engagement and awareness of other listed members. Mrs Murphy suggested that a review be undertaken to confirm whether all listed members are still active and aware of their responsibilities. She also highlighted that the Chief Operating Officer had submitted apologies for two consecutive meetings, equating to a six-month absence, and queried whether a deputy at executive level should be attending in their place, given the legislative nature of the committee. The Chair acknowledged these concerns and agreed to follow up on the matter directly.

Committee also queried whether a primary care GP lead had ever attended the committee. It was confirmed that a GP representative had previously participated but the position had not been filled recently. The committee agreed that this gap in representation should be reviewed and addressed. It was also noted that advocacy input is currently provided through the Scrutiny Group, and the committee acknowledged the importance of ensuring appropriate representation across all relevant sectors.

Miss Manon Horscroft will update membership titles within the in-attendance section to reflect the new Clinical Care Group structure.

The Committee **RECEIVED** and **APPROVED** the Annual Review of MHLC Terms of Reference.

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<b>MHLC (25) 07</b>	<b>Power of Discharge Sub-committee Annual Report 2024-2025</b>	
	<p>The Committee received the annual report of the Power of Discharge Sub-Committee, outlining the work undertaken during the 2024–2025. The report included a summary of the Sub-Committee’s constitution, core membership, and meeting schedule. Meetings were held on 2 April, 6 August, and 9 December 2024, with two conducted virtually and one held in person.</p> <p>The report highlighted the Sub-Committee’s focus on the responsibilities of hospital managers, particularly in relation to compliance with the Mental Health Act 1983. During the reporting period, 20 applications for discharge were submitted to hospital managers, resulting in eight hearings, with one hearing pending at the time of reporting. All detentions were upheld by hospital managers. A total of 63 detentions were renewed by responsible clinicians, and two applications for discharge were made by nearest relatives. No patients were discharged from their detention orders by hospital managers.</p> <p>It was noted that there were no requests from patients for Welsh language hearings during the reporting period. The Committee agreed that this would continue to be monitored.</p> <p>The Committee was asked to consider the report and recommend its approval. Members found the report clear and informative. A discussion followed regarding recruitment of hospital managers. It was noted that while a successful recruitment campaign had taken place in the previous year, several members had since stepped down. The Committee agreed that further efforts should be made to promote the role and encourage applications, including through social media and internal communications.</p>	
	The Committee <b>RECEIVED</b> and <b>APPROVED</b> the Power of Discharge Sub-committee Annual Report 2024-2025.	
<b>MHLC (25) 08</b>	<b>Annual Review of Power of Discharge Sub-committee Terms of Reference</b>	
	<p>The Committee received the annual review of the Terms of Reference for the Power of Discharge Sub-Committee.</p> <p>The Terms of Reference outline the Sub-Committee’s constitution, including its primary duties as set out in sections 2.1 to 2.3, which detail its operational responsibilities and delegated authority. Section 4 outlines the membership structure, confirming that the Sub-Committee shall be chaired by an Independent Member, with all Independent Members eligible to attend.</p> <p>Section 7 confirms that the Sub-Committee will meet three times per year, with a minimum of ten working days’ notice provided for each meeting. Meetings may be held in person or in a hybrid format. Section 8 outlines the accountability and reporting</p>	

	<p>arrangements, with section 8.1 stating that the Power of Discharge Sub-Committee is directly accountable to the Mental Health Legislation Committee for the performance of its functions. The reporting structure is clearly defined to ensure appropriate escalation and oversight.</p> <p>The Chair expressed thanks to those involved in the review. No objections were raised, and the Committee approved the updated Terms of Reference.</p> <p>The Committee <b>RECEIVED</b> and <b>APPROVED</b> the Annual Review of Power of Discharge Sub-committee Terms of Reference.</p>	
<b>MHLC (25) 09</b>	<b>MHLC Self-assessment Outcome</b>	
	<p>The Committee received the self-assessment report for the 2024–2025 period, which forms part of a refreshed approach to evaluating committee effectiveness, introduced in 2023. The process aligns with the organisation’s broader governance framework and includes feedback from digital self-assessment forms, previous reports to the Board, Independent Member reflective sessions, and audit or regulatory feedback.</p> <p>Six responses were received to the digital self-assessment, providing valuable comments and suggestions for improvement. The assessment reviewed the Committee’s performance over the past 12 months, identified areas for continuity, and proposed changes for the year ahead. Suggested areas of focus for 2025–2026 were outlined on pages two and three of the report.</p> <p>Key themes discussed included the impact of staffing shortages and sickness on compliance with statutory duties, and the need for cross-referencing with other committees such as Quality and People &amp; Development where appropriate. The Committee also discussed the importance of oversight for out-of-county placements, particularly in relation to legislative compliance and patient rights. It was agreed that this topic would be more appropriately explored through the Scrutiny Group.</p> <p>Concerns were raised regarding the implications of recent Supreme Court rulings on aftercare arrangements for patients placed out of area. The Committee acknowledged the need to monitor these developments and their potential financial and operational impacts.</p> <p>Ms Angie Darlington emphasised the importance of ensuring that patients placed out of area continue to have their legislative rights upheld, particularly given their increased vulnerability. It was agreed that further scrutiny of this issue would be undertaken.</p> <p>Ms Kay Isaacs, Chair of the Scrutiny Group, proposed that the topic be added to the agenda of the next Scrutiny Group meeting,</p>	

	<p>with Matthew Richards invited to attend and present relevant data. This proposal was supported by the Committee.</p> <p>Members of the committee approved the outcomes and actions from the MHLC Self-assessment.</p>	<b>KI</b>
	<p>The Committee <b>RECEIVED</b> and <b>AGREED</b> the MHLC Self-assessment Outcome.</p>	

<b>MHLC (25) 05</b>	<b>Power of Discharge Sub-committee</b>	
	<p>The Committee received the quarterly update from the Power of Discharge Sub-Committee, reflecting the minutes of the meeting held on 2 April 2025. The Chair confirmed that the Terms of Reference for the Sub-Committee had already been reviewed and approved under Agenda Item 1.8, and that the remainder of the report was presented for information.</p> <p>Ms Ruth Bourke provided a brief overview of the meeting. She reported that hospital managers had received an in-person training session on information governance, which was well received and considered highly beneficial. The Sub-Committee also discussed matters relating to Section 23 of the Mental Health Act, which concerns the discharge of patients from detention by hospital managers, responsible clinicians, or the Mental Health Review Tribunal. Relevant data and figures were reviewed as part of this discussion.</p> <p>The Committee acknowledged the value of the training provided to hospital managers, particularly in supporting their decision-making processes during emotionally complex hearings. No further questions or comments were raised.</p>	
	<p>The Committee <b>RECEIVED</b> and <b>NOTED</b> the Power of Discharge Sub-committee.</p>	
<b>MHLC (25) 06</b>	<b>Mental Health Legislation Scrutiny Group</b>	
	<p>The Committee received an update from the Mental Health Legislation Scrutiny Group, which met on 1 May 2025. Ms Isaacs provided a summary of key items discussed. The meeting was held in a hybrid format, with good representation from local partners, including voluntary sector representatives and regular attendance from police colleagues.</p> <p>The agenda reflected a wide range of legislative and operational matters. A key item was the ongoing review of Section 136 places of safety. An option appraisal had been completed, and a quality impact assessment was undertaken with broad stakeholder engagement. The final paper is scheduled for submission to the Board in either July or September 2025 for consideration of future arrangements.</p>	

	<p>The Group also received updates on the “Right Care, Right Person” initiative, with police representatives providing insight into the implementation of phases three and four. The risk register was reviewed, with three key risks remaining under active monitoring.</p> <p>Discussion also focused on the impact of staffing pressures on compliance with the Mental Health Measure. The Group noted that recovery planning is underway to address areas of concern, particularly in relation to care and treatment plan compliance. Touchpoint meetings have been established with affected teams, and local authority colleagues have been invited to contribute feedback. Additionally, the matter will be raised at the Ceredigion Mental Health Forum to ensure broader engagement.</p> <p>Dr Warren Lloyd provided further assurance regarding the fragility of Section 12 doctor availability and the operational risks this presents. He confirmed that the issue has been escalated to the NHS Executive and will be raised at the upcoming Welsh Government Quality Meeting. The Committee was informed that two agency locums are currently supporting the service, but they are not on-site full-time and are not approved clinicians, which continues to place pressure on the system.</p> <p>The Committee also discussed the importance of staff wellbeing and noted that feedback from staff working under these pressures will be gathered to inform future planning.</p> <p>Mr Simon Thomas acknowledged the ongoing collaboration between health and social care colleagues in addressing the challenges associated with Mental Health Act assessments and Section 12 doctor availability. He confirmed that these issues are regularly reflected on the risk register and welcomed continued joint working.</p> <p>The Committee noted the update and expressed appreciation for the detailed work of the Scrutiny Group.</p> <p>The Committee <b>RECEIVED</b> and <b>NOTED</b> the Mental Health Legislation Scrutiny Group.</p>	
<b>MHLC (25) 07</b>	<b>Mental Health Act Report</b>	
	<p>The Committee received the Mental Health Act Report for assurance. The report, which is also reviewed by the Mental Health Legislation Scrutiny Group, provides an overview of the use of the Mental Health Act across the Health Board. Ms Bourke confirmed that the report presented was consistent with that discussed at the operational level and that any issues raised had been incorporated into the scrutiny report.</p> <p>Operational context was provided to explain fluctuations in the use of Section 136. It was noted that pressures on bed availability sometimes necessitate the use of designated Section 136 suites as</p>	

	<p>admission beds, making them temporarily unavailable for their intended purpose. In such cases, patients may be redirected to emergency departments. Additionally, when patients present with physical health needs, it is clinically appropriate for them to be assessed in A&amp;E prior to psychiatric evaluation. These operational realities are managed through daily multi-agency bed conferences, which help prioritise admissions and ensure patient safety.</p> <p>The Committee also discussed the issue of Mental Health Review Tribunal applications being withdrawn. Ruth Bourke explained that patients are entitled to one tribunal application per detention period. Withdrawals typically occur following legal advice, often when the likelihood of a successful outcome is low or when a care plan is already in place. The reasons for withdrawal are not routinely shared with the Health Board, as they are confidential between the patient and their legal representative.</p> <p>Ms Liz Carroll queried the format of tribunal hearings. It was noted that, while most hearings are now conducted via Microsoft Teams, patients retain the right to request an in-person hearing. The Committee agreed that face-to-face hearings are preferable where possible, and it was suggested that outcomes be monitored to assess any impact of the virtual format on patient experience and decision-making.</p> <p>The Committee noted the report and thanked Ms Bourke and the team for their continued work in managing the administration of the Mental Health Act.</p>	
	<p>The Committee <b>RECEIVED</b> and <b>NOTED</b> the Mental Health Act Report.</p>	
<p><b>MHLC (25) 08</b></p>	<p><b>Mental Health (Wales) Measure 2010 Report</b></p>	
	<p>The Committee received the Mental Health Measure 2010 Report. The report provided assurance on compliance with the four parts of the Measure and highlighted areas of performance and concern.</p> <p>Ms Amanda Davies confirmed that the Health Board is now required to report 72-hour follow-up data for patients discharged from other mental health boards to Welsh Government. This data will be included in future reports, and work is ongoing to develop standards and ensure consistent implementation. It was noted that this process is already being undertaken, and the inclusion of figures will provide additional assurance to the Committee.</p> <p>Ms Isaacs added that the Scrutiny Group had previously agreed to explore follow-up arrangements for patients on extended Section 17 leave, not just those formally discharged. A flowchart is being developed to guide staff, and the same 72-hour follow-up standard will apply to these patients. This work is being progressed through the Scrutiny Group.</p>	

	<p>Ms Carroll noted that this follow-up requirement is not only a statutory obligation but also a Welsh Government performance indicator. She also commented on the reported 89.3% compliance rate, which was marked as red in the report. Ms Carroll suggested that while the figure was marginally below the threshold, it still represented strong performance and should be viewed in context.</p> <p>Ms Murphy raised concerns regarding the fragility of Learning Disability services in Carmarthenshire and Pembrokeshire, citing staff sickness and vacancies. She noted that these issues have impacted compliance and suggested that the Committee maintain oversight of this area.</p> <p>Ms Corinne Everett-Guy responded that staffing levels in Carmarthenshire had improved significantly, with the team nearing full capacity. Additional funding had been secured to recruit further staff, and improvements in performance were anticipated in the coming months.</p> <p>The Committee noted the report and welcomed the ongoing efforts to strengthen compliance and service delivery.</p>	
	<p>The Committee <b>RECEIVED</b> and <b>NOTED</b> the Mental Health (Wales) Measure 2010 Report.</p>	
<p><b>MHLC (25) 09</b></p>	<p><b>Risk Register</b></p>	
	<p>The Committee received the updated Risk Register, which included four active risks as of 21 May 2025. Ms Carroll provided a brief overview, noting that the key points had already been covered in earlier discussions throughout the meeting, particularly in relation to Section 136 place of safety arrangements and workforce pressures.</p> <p>It was acknowledged that the Committee had engaged in robust discussion around the identified risks, and that the register accurately reflected current operational challenges. Members agreed that regular review and monitoring of these risks is essential to ensure appropriate mitigation and escalation where necessary.</p> <p>No further comments or additions were raised. The Committee noted the Risk Register and thanked Ms Carroll and the team for their continued diligence in maintaining oversight of these matters.</p>	
	<p>The Committee <b>RECEIVED</b> and <b>ASSURED</b> the Risk Register update.</p>	
<p><b>MHLC (25) 10</b></p>	<p><b>Section 12(2) Doctors – Pay Review</b></p>	
	<p>The Committee received a report on the current rates for Section 12 approved doctors, both internal and external, who undertake</p>	

Mental Health Act assessments on behalf of the Health Board. The Chair noted that this item had been referenced earlier in the meeting and was now presented for formal discussion.

Dr Lloyd provided an overview of the paper, highlighting that the current rates paid by health boards across Wales vary significantly, ranging from £173 to £250 per assessment, with mileage reimbursement also inconsistent ranging from no reimbursement to 58 pence per mile. The British Medical Association (BMA) advisory rates were included in the report for reference.

It was noted that the current rates within Hywel Dda University Health Board have not been reviewed since 2005. A national review is underway, but the outcome may take considerable time due to the need for negotiation with the BMA. In the interim, the Committee was asked to consider increasing the local rate to £250 per assessment, plus mileage, to bring the Health Board in line with the average across Wales and to remain competitive in attracting Section 12 doctors.

Dr Lloyd also introduced a new pro forma for external doctors to complete following assessments. This documentation will be required before payment is authorised and will support improved record-keeping and assurance. The completed forms will be uploaded to the Care Partner system.

The Committee discussed the implications of the proposed rate increase, including the potential impact of BMA guidance on future national rates, which may exceed the proposed £250. It was acknowledged that some Section 12 doctors have declined work within the Health Board due to more favourable rates offered elsewhere.

The Committee supported the proposal in principle and agreed that the matter should be escalated to the Director of Finance for further consideration. It was also suggested that the issue be raised at Board level, given the operational risks associated with the current shortage of Section 12 doctors.

Mr Thomas will escalate the proposed Section 12 doctor rate increase to the Director of Finance and Public Board for review and recommendation.

The Committee **RECEIVED** and **NOTED** Section 12(2) Doctors – Pay Review.

The Committee will **ALERT** Public Board and to the Director of Finance for review and recommendation.

IT

<b>MHLC (25) 10</b>	<b>Policies for Approval</b>	
	No policies for renewal.	
	The Committee <b>RECEIVED</b> and <b>NOTED</b> that there were no policies for renewal.	
<b>MHLC (25) 13</b>	<b>Schedule of Meetings 2025-2026</b>	
	For information only.	
<b>MHLC (25) 14</b>	<b>Annual Work Plan 2025-2026</b>	
	For information only.	
<b>MHLC (25) 15</b>	<b>Any Other Business</b>	
	No updates for the meeting.	
<b>MHLC (25) 16</b>	<b>Matters for Escalation to Board</b>	
	<p><b>Alert:</b></p> <ul style="list-style-type: none"> <li>The Committee received a report from Dr Warren Loyd in respect to <b>Section 12(2) Doctors – Pay Review</b>. The Committee reviewed a report from Dr. Warren Loyd regarding the pay rates for Section 12(2) approved doctors conducting Mental Health Act assessments. Current rates across Welsh health boards vary widely (£173–£250 per assessment), with inconsistent mileage reimbursement. Hywel Dda University Health Board’s rates have not been updated since 2005. A national review is ongoing but may take time. To remain competitive, the Committee supported a proposal to increase the local rate to £250 plus mileage. The matter will be escalated to the Director of Finance and the Public Board due to associated operational risks.</li> </ul> <p><b>Advise:</b></p> <ul style="list-style-type: none"> <li>Mental Health Legislation Committee had nothing to advise the Public Board.</li> </ul> <p><b>Assure:</b></p> <ul style="list-style-type: none"> <li>The Mental Health Legislation Committee reviewed and approved the <b>Mental Health Legislation Committee Annual Report 2024-2025</b>. Highlights included the absence of issues escalated to the public board, resolution of breaches under the Mental Health Measure 2010, and the rectification of hospital managers’ pay issues. The committee acknowledged the difficulty in capturing patient stories due to the nature of the service and committed to exploring new methods.</li> </ul>	

- The Committee received the **Annual Report of the Power of Discharge Sub-Committee**, outlining the work undertaken during the 2024–2025 reporting period. The report included a summary of the Sub-Committee’s constitution, core membership, and meeting schedule. Meetings were held on 2 April, 6 August, and 9 December 2024, with two conducted virtually and one held in person.
- The Committee reviewed the **Mental Health Act Report**, confirming its alignment with operational discussions and incorporating relevant issues. Operational challenges, such as bed shortages, affect the use of Section 136 suites.
- The Committee received the **self-assessment report for the 2024–2025** period, which forms part of a refreshed approach to evaluating committee effectiveness, introduced in 2023. Members of the committee approved the outcomes and actions from the MHLC Self-assessment.
- The Committee received the quarterly update from the **Power of Discharge Sub-Committee**, reflecting the minutes of the meeting held on 2 April 2025. The hospital managers had received an in-person training session on information governance, which was well received and considered highly beneficial. The Sub-Committee also discussed matters relating to Section 23 of the Mental Health Act, which concerns the discharge of patients from detention by hospital managers. Relevant data and figures were reviewed as part of this discussion.
- The Committee received an update from the **Mental Health Legislation Scrutiny Group**, which met on 1 May 2025. The meeting was held in a hybrid format, with good representation from local partners, including voluntary sector representatives and regular attendance from police colleagues.
- The Committee received the **Mental Health Measure 2010 Report**. The report provided assurance on compliance with the four parts of the Measure and highlighted areas of performance and concern.

**Review of Risks:**

- **1813** - Risk to patient care at Gorwelion Crisis Resolution and Home Treatment Team (CRHT) due to workforce capacity. Risk has remained at an extreme level since November 2024. There is a limited medical workforce with no identified dedicated Consultant cover, and this was escalated to Executive level in January 2025. Unable to progress one practitioner appointment into the team due to issues with current workload. Continuing to work with HR and recruitment. Overnight cover is continuing to be offered

for bank but there is intermittent cover with this which is further impacted by gaps in Medical On-Call cover which is supported remotely from Carmarthen Medical On-Call when no cover is in situ on site As of April 2025, an appointed member of staff has withdrawn from the recruitment process. Post now to be re-advertised on TRAC.

- **1612** - Risk to patient care at North Ceredigion Community mental health centre due to workforce capacity. Risk has remained at an extreme level since November 2024 when Consultant vacated his post and an attempt to recruit via Locum was unsuccessful. Increased levels of sickness and vacancies within the Community Mental Health Team which was escalated to Executive level in January 2025.
- **1857** - Risk of significant delay in admission for individuals with medical recommendations for admission under the Mental Health Act. Demand outweighs capacity at present with delays possible for patients awaiting beds.
- **1781** - Risk of being unable to provide a Community Place of Safety (CPOS) to individuals detained under Section 136 in Ceredigion count. Likelihood score given is 3 as it is always possible that an individual in Ceredigion will need to be detained under Section 136. The current impact score given is 2 as minor intervention is sometimes required (i.e. moving an individual to a different county) with an increased length of time in care/delay in assessment being undertaken. The risk of having no facility in Ceredigion is outweighed by the fact that the facility was unfit for purpose and is a much higher risk. A review is continuing with a working group. As of April 2025, there has been no change.

<b>MHLC (25) 17</b>	<b>Date, Time and Venue of Next Meeting</b>	
	The next meeting of the Mental Health Legislation Committee will be held on Thursday 2 September. This may be in person and via MS Teams from 10:30am- 12:00pm. The venue for the in-person meeting will be notified nearer to the date of the meeting.	