

**Betsi Cadwaladr University Health Board (BCUHB)**  
**CONFIRMED Minutes of the Mental Health Legislation Committee**  
**held in Public on 8<sup>th</sup> May 2025**  
**in the Boardroom, Carlton Court, St Asaph and via Teams**

<b>Committee Members Present</b>	
<b>Name</b>	<b>Title</b>
Gareth Williams	Health Board Vice Chair (Chair of Mental Health Legislation Committee)
Rhian Watcyn Jones	Independent Member (IM)
Dyfed Jones	Independent Member (IM)
<b>In Attendance</b>	
Dr Sree Andole	Interim Executive Medical Director
Michelle Denwood	Director of Safeguarding and Public Protection
Michelle Green	IHC Director East (via Teams)
Jenny Gilmore	Associate Hospital Manager
Matthew Joyes	Deputy Director for Legal Services
Wendy Lappin	Mental Health Act Legislation Manager
Teresa Owen	Executive Director of AHP and Health Science
Alberto Salmoiraghi	Medical Director, Mental Health & Learning Disabilities (MHLD)
Chris Walker	Head of Safeguarding Adults
Iain Wilkie	Director of Mental Health and Learning Disabilities
Phil Williams	Associate Hospital Manager
<b>Committee Support</b>	
Philippa Peake-Jones	Head of Corporate Governance

<b>Agenda Item</b>
<b>PRELIMINARY MATTERS</b>
<b>MH25.18 - Welcome and Apologies</b>
Apologies were received for Dr Prashant Bhat, Consultant Child Psychiatrists, NNAS.
<b>MH25.19 Declarations of Interest</b>
No declarations of interest were received.
<b>MH25.20 Unconfirmed Minutes of the Meeting held 06.02.2025</b>
It was resolved that the Committee: <ul style="list-style-type: none"> <li>• <b>AGREED</b> that the minutes of the meeting held on 6 February 2025 were a true and accurate record.</li> </ul>
<b>MH25.21 Matters Arising &amp; Action Log</b>
The Committee reviewed the action log and noted the following actions should be added:



**MH25/05 – Mental Capacity Assurance Report –** It was noted that the Senior MHA Manager had returned to work on a phased return. The Deputy Director of Legal Services updated the Committee in terms of staffing across the three area teams, and CAMHS. Resilience within the team was an issue of concern given the specialised nature of the work and a review would be undertaken as to how to address this, including succession planning.

**MH25/06 – Mental Capacity Assurance Report -** This was with regard to patients admitted to hospital under DoLS. It was noted that the data was not currently captured on the NCAR system, and a request nationally had been made for this to be included. Discussion was on-going with CHC colleagues to identify those patients admitted to hospital under DOLS being funded. Members were advised on the process in place for patients who are admitted under Section 21a and the complexity of this area of work. It was noted that issues would be fed back to the National DoLS Network so that they were aware. Advice would also be sought from expert leads on this matter. This issue is included within the Directorate Risk Register. Also, feedback had been provided to the NHS Executive as they were looking at Safeguarding and DOLS in its totality.

**MH25/07 – HIW Assurance Report –** With regard to the capturing of patient and carer feedback around the accessibility of patient information, it was noted that this would be within the remit of the QSE Committee. Following discussion, it was agreed that a copy of the national standard of accessible / easy read information would come back to a future meeting the Committee as a pack for review. It was requested to ensure that this patient information was available bilingually. Members were advised that this appeared to be a general issue in other services across the Health Board. The Executive Director of AHP and Health Science agreed to action this item.

**Action:**

- **MH25/07.1** That a copy of the national standard of accessible / easy read information would come back to a future meeting as a pack for review. A request was made that this would be made available bilingually.

**It was RESOLVED that the Committee:**

- Agreed the updates provided

**FOR ASSURANCE**

**MH25.22 - Mental Health Act Assurance Report**

The Deputy Director of Legal Services presented the report as read.

The following issues were highlighted:

- The Performance Team would work with the Committee in terms of presenting and formatting of the report moving to a Power BI system in order to provide reports in real-time information. The work will commence in the autumn 2025.
- Section 2 (Admission for Assessment) and Section 3 (Admission for Treatment) - noted that there was an increase in the use of Section 2 and decrease in Section 3.

Members were advised that Section 2 was less restrictive, and also included an automatic tribunal review which provided extra safeguards for patients. It was requested that future reporting on Section 3 is provided detail around length of stay.

- No Fundamental and Rectifiable Errors noted during the previous quarter, although caveated that these could yet be identified. The team were proactive in the management of these, and that an increase in establishment figures would see a reduction in the number of errors being identified.
- The new Mental Health Bill had passed the House of Lords and was now with the House of Commons, and it was likely that this would be passed during 2025. Implementation of the Act would take place over of longer period of time and this was being monitored.
- Sections 135 noted that this was lower in the central area. The Medical Director, (MHLD) advised that this was due to rurality and population, with vicinity being a key issue. Members were pleased to note that there were no Section 135 or Section 136 for the under 18s. Members were advised that the implementation of the mental health electronic health record was progressing at pace.

In discussing the report, the Committee:

- Considered services for children and it was agreed that an item be put on the agenda for a future Committee meeting to discuss this. It was noted that the Chief Operating Officer had taken up post and would be instrumental in facilitating discussions going forwards.

*Michelle Green joined the meeting at 10.30am*

**Action:**

- **MH25.22.1** future reporting on Section 3 is provided detail around length of stay.
- **MH25.22.2** Arrange for an update on children's services to be agendad for a future Committee meeting.

It was resolved that the Committee

- **NOTED** the report and appendices.

**MH25.23 - Mental Capacity Assurance Report**

Members received the report and noted the following:

- A national review of the Mental Capacity Act to be undertaken. BCU were piloting in certain wards the new DoLS application form. Noted that other Health Boards have now commenced pilot phase.
- Further increase in terms of DoLS applications, although there has been slight reduction in the backlog.

- Actions completed in terms of those identified from the audit. These actions now form part of the working plan for the coming year. Actions remain under review to ensure they targets are achieved.
- Letters have been received from WG regarding funding. Whilst this is permanent funding, bids need to be submitted. A request is being made for WG to include this as part of the Health Board budget in the future, ringfenced specifically for IMCA, DoLS and the Mental Capacity Act work.
  - IMCA – challenges being faced in terms of procurement. Following a meeting with the procurement team a paper will be taken to the Executive Committee at a future date. Formal letter from WG awaited to progress this matter.
  - Best Interest Assessors based at each acute site, with attendance at community sites.
  - DoLS applications – reduction in relation to issues. This had further reduced to 17% since April 2025 following introduction of the new Form 1.
  - Training compliance good across services, and further work would be undertaken to improve this further.
  - Court of Protection cases remain active and well managed. In order to support CAMHS staff, the policy for 16/17-year-old has been approved by the Safeguarding Performance and Governance Group for sharing.
  - Following comprehensive review of risks and actions associated with DoLS and the MCA, the team were in the process of updating / amending related risks.

In discussing the report, the Committee:

- Noted the difficulties being experienced regarding the IMCA service whilst awaiting formal WG letter, in terms of recruitment and retention, and the impact on the service. It was noted that this was a common issue and that the Executive Director of AHP and Health Science, and the Executive Director of Nursing and Midwifery, would write to WG to escalate this issue.
- In terms of the revised DoLS form positive feedback had been received to-date. The IMCA service would be providing feedback on its use. It was agreed that feedback would be brought back to the next Committee meeting for review. The roll out of the pilot scheme would be included as part of the services programme of work.

**Action:**

- **MH25.23.1** A paper to be prepared for the Chair of MHLC and Chair of P & C Committee regarding the IMCA service and the issues raised. Currently part of the review of principles of the wellbeing of Future Generation Act, which included reference to how we treat people who are employed / contracted by us.



- **MH25.23.2** The Executive Director of AHP and Health Science, and the Executive Director of Nursing and Midwifery, would write to WG to escalate this matter of confirmation of funding.
- **MH25.23.3** Feedback from the roll out of the paperless DoLS pilot scheme would be brought back to the next Committee meeting for review.

It was resolved that the Committee

- **NOTED** the report

### **MH25/27 – Update from Luke Hughes, North Wales Police**

*This item was brought forward on the agenda to accommodate Mr Hughes.*

Members welcomed Luke Hughes to the meeting.

Members received the report and noted that:

- A cross agency project was being undertaken ‘Right Care, Right Person’ and noted the four phases. Mr Hughes thanked staff in the BCU mental health establishments for their support.
- Transportation of individuals detained under the Mental Health Act remained an on-going issue and this was currently with the mental health service to formulate plans.
- With regard to Section 136 it was noted that an app had been developed by North Wales Police in conjunction with the Criminal Justice System to monitor weekly use of the powers, and where there had been no consultation had been made. Two months data was available showing 79% of all interactions were consulted appropriately. Data also indicated 65% of all Section 136 detentions ended up in the Emergency Department due to the suite not being available at time. Support was requested in relation to unblocking beds, or identifying a solution to finding alternative space to assess patients out of the ED setting. The issue of police officers waiting for up to 12 hours with patients in ED remained a concern.
- Mental Health Bill – two significant issues were noted:
  - Section 136 - Suggestion that Section 136 powers be broadened to an ‘authorised’ person which may not always be police. This would likely remove police custody as a place of safety for Section 136 patients, which would place additional burden on Emergency Departments.
  - Section 140 – May be amended under the current Bill. Places duty on health service to provide emergency provision for local authorities in urgent situations. It was noted that whilst BCU did not have a Section 140 policy at this time, this was also a national issue. Legislation may place duty on health organisations and there was a need to prepare for this possibility.
- Members were advised that the local authorities had written to the Health Board around Section 136 patients. A copy of the letter would be shared with members.



- Discussions would be held around what actions could be taken in the short term to free up police time, and avoid the need for Section 136 patients presenting to ED.
- The Executive Director of AHP and Health Science advised that this was a system issue and that she would report through to the Executive Team, and would update the Committee on progress. Members were advised that there were costed options that could be further explored, and this could be undertaken by the Crisis Group. A multi-agency Task and Finish Group would be established to develop a proposal to address this issue. It was agreed that this would be highlighted on the Committee's Assurance Report to the Board. It was also agreed that the issue be referred to the Executive Committee and Quality, Safety and Experience Committee.

Members thanks Mr Hughes for his attendance at the meeting and thanked North Wales Police for their on-going support.

**Action:**

- **MH25.27.1** That a copy of the letter from the local authorities be shared with members for information.
- **MH25.27.2** That a multi-agency Task and Finish Group be established to look develop proposals to address the issues of availability of beds assessment space for Section 136 patients to avoid admission to ED. This would be highlighted on the Chair's Assurance Report to the Board.
- **MH25.27.3** That the issues raised be referred to the Executive Committee, and the Quality, Safety and Experience Committee

**Resolved:**

That members **RECEIVED** the report.

**MH25.24 - HIW Assurance Report**

The Deputy Director of Legal Services presented the report.

- It was noted that three inspections had been reported on since the last meeting. The rolling programme of updates on actions were reviewed by the Quality, Safety and Experience Committee.

Members received the report and the Committee discussed and highlighted:

- All draft inspection reports were submitted to the Quality Team to action. All responses were signed off by the Executive Director of Nursing and Midwifery. A robust process was in place to ensure actions were undertaken and evidence scrutinised before actions were closed.
- The importance of staffing levels to cover Section 17 leave was discussed. It was noted that there were currently 94 registered staff vacancies within the service. Members were advised that this had been an issue within the medium secure unit although this

had not been formally raised. It was agreed that this be added to action log and reviewed at a future date.

- With regard to prison healthcare, a paper had been received for the Safeguarding Board. It was noted that this would be progressed through QSE Committee. The Head of Safeguarding agreed to come back to Committee for any issues relating to the Mental Health Act.

**Action:**

- **MH25.24.1** Section 17 leave to reviewed at future date and reported back to Committee

It was resolved that the Committee

- **NOTED** the report

**MH25.25 Associate Hospital Managers Update Report**

Members received the report and the Associate Hospital Manager highlighted to the Committee:

- 31 Hearings were held in the last quarter (January to March 2025), which was an increase on the previous quarter.
- No discharges had been made for the period to-date.
- The local set standard to hold hearings of 6 weeks had achieved 71.3% compliance. Reasons for the delays were noted.
- The Associate Hospital Managers had raised concerns around the timeliness of reports being received from clinicians in advance of Hearings. This had been fed back to colleagues.
- There were currently 16 Associate Hospital Managers, with the service seeking to recruit an additional person.

The Committee members thanked the Associate Hospital Managers for their on-going work and support.

It was resolved that the Committee

- **NOTED** the report

**MH25.26 Report from the Power of Discharge – nothing to report here.**

Members received the report and the following key areas were highlighted:

The Power of Discharge Group meeting was held on 28<sup>th</sup> April 2025. Key discussions included:

- A review of the MHA Assurance Report.
- A review of the AHM Update Report
- A review of the HIW Assurance Report, to look at recommendations for photographs on MAR charts and Section 17 leave forms.



- An update on progress of the new Mental Health Bill
- Noting ongoing staffing pressures within the MHA Team.
- Discussion around the time period for report delivery prior to Panels.

It was resolved that the Committee:

- **NOTED** the report.

#### **MH25.27 – CAMHS Legal Case Study**

Members received the report, and the Deputy Director of Legal Services highlighted key issues within the CAMHS Legal Case Study.

In discussing the report, the Committee:

- Noted that Courts cannot order clinicians re their assessments, although they did have the power to judicially review the decision-making process. It was noted that the local authority did not pursue the case through Court.

It was resolved that the Committee:

- **NOTED** the report.

#### **FOR INFORMATION**

#### **MH25.28 - Cycle of Business**

The Head of Corporate Governance advised members that Cycles of Business for all Committees were currently being refreshed. It was noted that this was a live document and would be amended as required to reflect the business of the Committee and to discuss emerging issues.

It was **resolved** that the Committee:

**APPROVED** the Cycle of Business for 2025/26

#### **MH25.29 Terms of Reference**

The Head of Corporate Governance presented the draft Terms of Reference to the Committee for its annual review. It was noted that no changes had been made. It was agreed the 'In Attendance' group should include representation from the CAMHS service along with formal representation from the Associate Hospital Manager's group. It was noted that the Executive Medical Director and Head of Safeguarding Adults could be interchangeable at meetings.

#### **Action:**

- MH25.29.1 The Executive Director of AHP and Health Science agreed to review this outside the meeting and report back.



- MH25.29.2 The Associate Hospital Managers requested that meeting papers be sent out to them as part of the distribution of meeting papers.

It was **resolved** that the Committee:

**NOTED** the Terms of Reference and await an update as discussed.

### **CLOSING BUSINESS**

#### **MH25.30 Agree Items for referral to Board / other Committees**

It was agreed that items for referral to the Board would be made via the Chair's Assurance Report.

#### **MH25.31 Agree items for Chairs Assurance Report**

The following would be referred to in the Chairs Assurance Report:

- Difficulty in accessing appropriate beds for Section 136 patients and reduce attendance at ED.

#### **MH25.32 Review of Meeting Effectiveness**

In discussing the item, the Committee agreed there had been good discussion around the agenda items.

#### **MH25.33 Date of Next Meeting**

The next meeting will be held on 7 August 2025