

Betsi Cadwaladr University Health Board (BCUHB)
Confirmed Minutes of the Mental Health Legislation Committee
held in Public on 5 February 2026
held via Teams

Committee Members Present	
Name	Title
Rhian WatcynJones	Independent Member (Chair for the meeting)
Dr Prashant Bhat	Consultant Psychiatrist
Michelle Denwood	Director Of Safeguarding & Public Protection
Jenny Gilmore	Associate Hospital Manager
Dyfed Jones	Independent Member
Matthew Joyes	Deputy Director of Legal Services
Wendy Lappin	Mental Health Act Legislation Manager
Teresa Owen	Executive Director of Allied Health Professionals & Health Sciences
Dr Alberto Salmoiraghi	Consultant Psychiatrist
Angela Wood	Executive Director of Nursing & Midwifery
Committee Support	
Philippa Peake-Jones	Head of Corporate Governance
Harriet Abbott	Minute Taker

PRELIMINARY MATTERS
<p>MH26.1 Welcome and Apologies</p> <p>Apologies were received for Dyfed Edwards, Ffion Johnstone, Greg Chick, Pam Wenger, Tehmeena Ajmal, Clara Day, Gareth Williams, Phil Williams.</p>
<p>MH26.2 Declarations of Interest</p> <ul style="list-style-type: none"> Jenny Gilmore declared a potential interest regarding item MH26.5 as Co-Chair of the Advocacy Service.
<p>MH26.3 Unconfirmed Minutes of the Meeting held on 13 November 2025</p> <p>It was agreed that the minutes of the meeting held on 13 November 2025 were a true and accurate record.</p>
<p>MH26.4 Matters Arising & Action Log</p> <p>Members received the action log and noted progress against the actions.</p> <p>Questions were asked about the timing of the workshop referenced in the action log against multiple actions.</p> <p>The session will be held on the Chair's return, at the latest following the next Committee in</p>

May.

- **Action MH25.07.1:** it is noted that the website information is still not available bilingually, and is non-compliant with the Welsh Language Standards. The Executive Director of Allied Health Professionals & Health Sciences will follow up again with Welsh Government, as well as contact the Lead Officer for Mental Health Strategy for assistance. It was suggested that a Chair's letter may be helpful for resolution, with potential input from the Chairman.
- **Action MH25.45.1:** It was clarified that when the item on Consultant on Call issues came to Committee previously, there was brief discussion and it was deemed an operational issue, with steps in place to manage and mitigate risk. It was agreed for this action to be closed.

It was resolved that the Committee:

- **AGREED** to close the actions that were proposed for closure.

ROUTINE REPORTING FOR ASSURANCE

MH26.5 Mental Health Act (MHA) Assurance Report

The Deputy Director of Legal Services and the Mental Health Act Legislation Manager jointly presented the item. Key points included:

- There are ongoing challenges within the Mental Health Act team due to sickness and structural constraints, with difficulty in backfilling roles across the three areas.
- The Electronic Health Record (EHR) is expected to support improved flexibility across services once implemented.
- There were no fundamental MHA errors within this reporting period, with the number of rectifiable errors decreasing also.
- Section 136 activity remains high but stable; with continued improvement shown.
- Informal admissions saw a notable increase; reason is currently unclear. This is to be monitored.
- Police liaison and use of consultation pathways require ongoing development. A task & finish group has been established to address issues including a single consultation number.

In discussing the item, the Committee:

- Noted some inconsistencies in data presentation (months reverse, with others chronological). The performance team will be consulted to ensure consistent formatting in future reports.
- Noted gaps in the team due to shortages due to sickness and the funding shortfall for one of the posts. Cover for staffing shortages is difficult due to the detailed knowledge of the Act that is required, and it is hoped that introduction of the EHR will allow a more flexible approach. It was noted that it is referenced in the paper that the current service model is not sustainable.
- Was advised that some provisions for the new Mental Health Act are due to come into play in February 2026, however current timescale of the wider provisions of the Act are unknown. There has been no indication received from Welsh or UK

Government, although overall implementation will be over a 10-year period. A revision of the Code of Practice will be needed. A further update or progression is not expected ahead of the Senedd Election in May 2026.

- Was advised of recruitment issues experienced, with financial constraints on the lack of substantive funding on one post that sat within the budget of the Chief Operating Officer. The matter has been raised with the Director of Corporate Governance and the model for the future delivery will need to be progressed.
- Emphasised the importance of appropriate resourcing in this area, in regards to future developments and implementation of Foundations for the Future as well as the new MH Act. The new act will have a greater role for MH advocates, with required changes expected to impact on both clinical and operational services.

[Angela Wood left the meeting].

- Reviewed the data presented regarding admissions, and noted the recent increase. The reason for the increase is not yet known, but this will be monitored to review any pattern. There has been significant work regarding admissions, and decreasing use of section 136s. In Children and Young People's Services, informal admission rate is usually higher than the rate of patients detained, due to parental and patient consent that is gained. It was emphasised that the Mental health Act is always considered to ensure safeguards. Whilst the number of 136s appears high, when compared with previous years, there has been a significant reduction over recent years, which has been sustained. The important factor is to ensure appropriateness of the 136 section.
- Reviewed the data regarding 136s, and was advised that weekly meetings are held with Police colleagues to review cases, and ensure appropriate action is taken. It was agreed for this to be monitored. The Committee referenced a previous pilot of a practitioner role, who worked with the Police, going out to assess if application of a sect.136 was appropriate. It was agreed for this to be followed up to identify if this remains a possible solution if re-established.
- Was advised that data regarding 136s was included following request at the previous meeting for assurance. It was agreed for data on the 136 to be removed until the new performance report is established to ensure information is relevant for the Committee.
- Requested that future reports would include a reference to the number of patients the data refers to in order to ensure clarity.
- Queried the number of hearings that did not go ahead. It was advised that this could be due to withdrawal of an application or discharge due to patient improvement over the time required for the tribunal to convene.
- Agreed to review data for the number of hearings and first place of safety rates in 12 months to identify potential trends.
- Noted the paper included regarding Out of Area placements following request for assurance at the previous meeting.

The following actions were agreed:

- **Action MH26.5.1:** Data inconsistencies to be reviewed and amended for implementation in the new performance report.
- **Action MH26.5.2:** Include reference to resourcing and MHA in AAA report for the

Board in March.

- **Action MH26.5.3:** request follow up on previous Mental Health Practitioner pilot in East Area.
- **Action MH26.5.4:** Number of hearings and first place of safety rates to be reviewed in 12 months to identify potential trends.

It was resolved that the Committee:

- **NOTED** the reports.

MH26.6 Mental Capacity Assurance Report

The item was presented by the Director of Safeguarding & Public Protection, and highlighted the following:

- 31.2% increased in DoLS applications seen compared with last year.
- Quality audits show reduced number of documentation errors. All reapplications have been corrected within the required timeframe as per statutory guidance and legislation.
- Feedback regarding the form 1 pilot from IMCA service has been limited. Follow up is underway to encourage feedback.
- Welsh Government funding remains essential, however the requirement to rebid for recurrent funding annually continues to be ineffective, causing potential delay to service provision through the IMCA service. It was agreed that the risk register would be updated to reflect the risk relating to the IMCA service.
- Following a recent HIW inspection, there remains one recommendation outstanding, regarding information to service users on advocacy. A pathway is being explored to incorporate and remind staff to ensure documentation is available.

In discussing the item, the Committee:

- Requested follow up with the Committee Chair regarding any outcome of his discussing at the Vice Chairs' Network for improvement in response rates.
- Noted improvements in the accuracy of DoLS documentation.

The following actions were agreed:

- **Action MH26.6.1:** follow up with the Committee Chair regarding any outcome of his discussing at the Vice Chairs' Network for improvement in response rates.
- **Action MH26.6.2:** The risk register to be updated to reflect the risk relating to the IMCA service

It was resolved that the Committee:

- **NOTED** the report.

MH26.7 Healthcare Inspectorate Wales

It was resolved that the Committee:

- **NOTED** the report.

MH26.8 Associate Hospital Managers Update Report

The Mental Health Act Legislation Manager presented the report and advised that themes from the Annual Report were summarised within the paper.

In discussing the item, the Committee:

- Noted over half of the scheduled hearings were not held within the 6-week quality standard. It was advised that reasons for this include patient withdrawal, discharge before tribunal could take place, and capacity of tribunals to convene.
- Requested that narrative explaining reasons for hearings not held to be added to future reports for clarity.
- Reviewed recommendations received relating to Heddfan, and agreed for an update to be shared through future reports when known.
- Clarified for assurance that any scrutiny undertaken in units is highlighted to Ward Managers and Head of Operations. Scrutiny of the Ablett Unit and Hergest took place at the start of February, with no concerns raised. A visit to Heddfan will take place later in the week.

The following action was agreed:

- **Action MH26.8.1:** Narrative explaining reason for hearings not held to be included in future reports.

It was resolved that the Committee

- **NOTED** the report.

MH26.9 Report from the Power of Discharge Group

The Deputy Director of Legal Services presented the following key points:

- Previously funding issues have been resolved.
- Delays in receipt of funding which can impact on placement decisions remains an issue.

[Dyfed Jones left the meeting].

In discussing the item, the Committee:

- Agreed for data regarding any experienced delays to be gathered for monitoring, with an update provided at the next meeting.

The following actions were agreed:

- **Action MH26.9.1:** data regarding any experienced delays to be gathered for monitoring, with an update provided at the next meeting.

It was resolved that the Committee

- **NOTED** the report.

MH26.10 Update – Right Care, Right Person

The Executive Director of Allied Health Professionals & Health Sciences presented the report. The key points included:

- Implementation in North Wales has been successful, with strong collaborative

partnership between BCUHB and North Wales Police.

- A Task & Finish Group has been established for phase 4, with work progressing well.

It was resolved that the Committee:

- **NOTED** the report.

FOR INFORMATION

MH26.11 Corporate Governance Report

The item was presented by the Head of Corporate Governance. It was confirmed that action 45.1 on the log is to be closed.

It was resolved that the Committee:

- **NOTED** the report.

CLOSING BUSINESS

MH26.12 Agree Items for Referral to Board / Other Committees

- No items for escalation.

MH26.13 Review of Meeting Effectiveness

It was agreed that:

- The meeting ran well, and reflective discussion was held on a number of items with assured received when required.
- Progression is noted in regards to compliance in regards to DoLS and MCA.
- The Chair's Report will note the work of the committee, with confidence that the appropriate areas are focused upon.

MH26.14 Date of next meeting

14 May 2026

MH26.15 Resolution to Exclude the Press and Public

'Those representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960'