

DATE OF MEETING	Tuesday 20 th January 2026 13.00-16.00
VENUE	Microsoft Teams

Aneurin Bevan University Health Board – Mental Health and Learning Disabilities Committee: Meeting Summary

Committee Papers: abuhb.nhs.wales/files/key-documents/mental-health-and-learning-disabilities-committee/mhldc-final-boardbook-20th-january-2026-pdf/

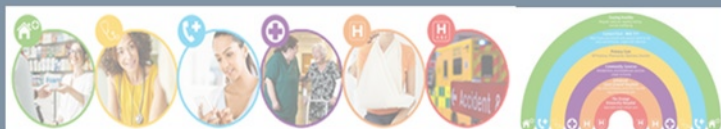
Committee Members:

Penny Jones, Chair

Paul Deneen, Vice Chair

Helen Sweetland, Independent Member

- **Meeting Administration & Attendance:** The meeting opened with apologies noted. The minutes of the previous meeting were accepted as accurate, and the action log was reviewed with no outstanding concerns raised.
- **Mental Health Act Compliance Report:** The Committee received an update on Mental Health Act activity for the July–October 2025 reporting period. General use of the Mental Health Act remained within expected variation, although some areas—such as Section 136 detentions—were higher than average, and work continued with police colleagues to ensure that the least restrictive options were used wherever appropriate. A 67% reduction in the use of Section 4 detentions was reported, attributed to improved availability of Section 12-approved clinicians, and the Committee supported further training and analysis to understand emerging themes and reduce unlawful or incorrect detentions.
- **Performance and Outcomes, including Quality, Safety and Activity:** A comprehensive performance update was provided across adult and CAMHS services. Primary mental health performance remained strong, supported by improved digital processes and robotic process automation. Work was underway to redesign psychological therapy pathways, improve access, and address persistent waiting list pressures. Collaboration continued with national teams to align reporting with new safety standards for inpatient metrics.



Significant improvements were reported in Quality and Safety activity, including strengthened clinical documentation, completion of Observation Policy training, the use of seven-minute briefings to reinforce the safe management of deliberate self-harm, and the introduction of daily incident reviews and “safe to start” checks across inpatient areas. CAMHS maintained sustained performance in key early intervention metrics. Transformation of neurodevelopmental services also continued, with a shift toward a needs-based model and the introduction of new digital resources for families. It was noted that demand remained high, with ongoing work focused on stabilising waiting lists and improving consistency across pathways.

Restrictive Practice and Associated process Report: The Committee reviewed ongoing work to minimise the use of restrictive practices across services. A national pilot was underway to strengthen oversight of restrictive interventions through enhanced Datix reporting. The Committee noted early positive feedback on the use of a ‘safety pod’ in PICU to support de-escalation. In addition, divisional dashboards were now tracking enhanced care levels on a daily basis, providing improved oversight and enabling more timely interventions

- **Mental Capacity Act and DOLS:**

The report provided assurance to the Committee of continued progress across several key areas. Tiered MCA (Mental Capacity Act) training had been implemented for all staff groups, with positive feedback received. Documentation of capacity assessments and best interest decisions had improved, and work continued to strengthen DoLS (Deprivation of Liberty Safeguards) processing and explore internal capacity to reduce reliance on external assessors. Preparation was also underway for the 2026 national consultation on Liberty Protection Safeguards (LPS).

