

MENTAL HEALTH LAW EXCEPTION REPORT TO THE QUALITY COMMITTEE

17 September 2025

Title	Mental Health Law Exception Report
Authors	██████████ – Associate Director of Mental Health Law
Accountable Executive Director	██████████ – Chief Medical Officer

Purpose of the report

Provide updates and assurance on the key issues being considered by the Mental Health Law Monitoring Group.

Summary of key issues

Mental Health Law Monitoring Group meeting dates: 19/05/2025, 18/08/2025

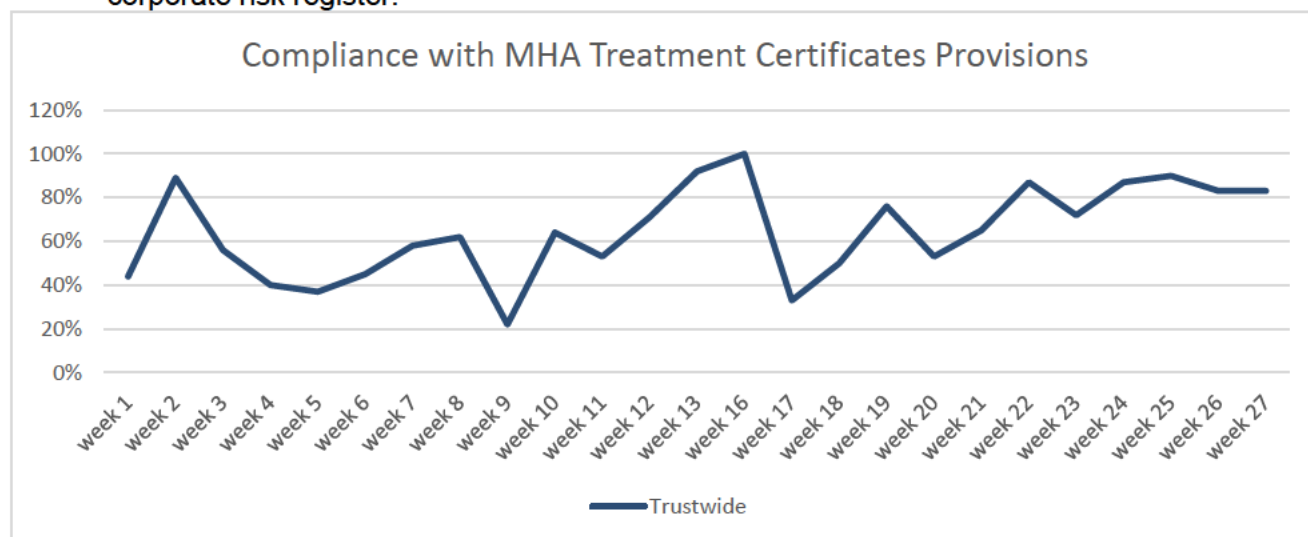
Risks and exceptions to note, and actions taken:

- CQC MHA Reviews** – Six CQC MHA Review reports have been received since the last Exception report. The MHLMG is monitoring the implementation of the action plans.

Ward	Directorate	Date	Care Plans	S132	S17 leave	Treatment Provisions	Environment	WiFi / IT
Bevan ward	C&H	27/03/25						
Onyx	L&B	17/04/25						
Ruby	NH	29/04/25						
Woodberry	Fx	22/07/25						
Loxford	Fx	22/07/25						
Cazaubon	TH	18/08/25						

	Standard met		Standard not met
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- MHA Treatment Provisions** – An audit of the MHA function was carried in the summer of 2024, which highlighted concerns around compliance with MHA treatment provisions. The MHLMG is currently monitoring the delivery of a detailed action plan. This remains on the corporate risk register.



3. **Digital Update** – ELFT was the first London based trust to go live with eMHA on 20/11/24. Since then NELFT, SWLSG, Oxleas, SLAM and NLFT have gone live. 93% of MHA forms are now done on eMHA in ELFT. User feedback is variable. Receiving Officers based on wards, in particular, have requested additional support from the suppliers which is due to be offered in October. The trust is working with NHSE and the suppliers on optimising the product and addressing the concerns raised by the AMHPs and MHA Admin staff. The British Transport Police went live with eMHA on 31/07/25. The CQC SOAD service did on 21/08/25. The Met police is due to follow in December.
4. **Core Skills Training Workforce mapping** – At the end of quarter 1, the MCA and MHA training compliance rates were **84% (+4%) and 80% (-14%) respectively**. The decrease in MHA training compliance is due to workforce re-mapping and the MHL D is supporting Operations to close the gap.
5. **S132A QI Project** – This project was launched in the summer of 2023 to improve S132A compliance for CTO patients and started showing some results in August 2024 with the introduction of a new intervention whereby Care Coordinators are now prompted and supported to document S132A attempts on EPR by the MHL D. **The compliance rate then jumped from 10 to 66% and is now at 83%**. The main obstacle is currently that CTO patients are discharged from hospital into the care of crisis teams, which haven't got Care Coordinators. The MHL D is working together with Operations to find a solution.
6. **Associate Hospital Managers (AHM)** – 14 new AHMs have now received induction and started sitting on panels. This brings the total number of ELFT AHMs to 27, which is what the service requires to meet AHM review demand.
7. **Receipt and Acceptance of Statutory Documents** - A new Core Skills training package was introduced in June 2024 for Band 5+ Receiving Officers and 96% of them were trained by May 2025. A refresher training programme is now in place together with a new starter training package.
8. **Mental Health Bill** – On 06/11/24, the Mental Health Bill was introduced in Parliament. It has been a long process since the Independent Review of the Mental Health Act in 2018. The Bill provides a heightened threshold for detention, additional safeguards for people who are autistic and/or have a learning disability and additional powers for the Tribunal. The Bill is currently progressing through the House of Common, having completed its stages in the House of Lords. Although **it is unclear when the reforms will be implemented** it is envisaged they will be phased in to enable services to prepare for the changes.
9. **Deprivation of Liberty in Emergency Departments** – Further to a complaint received at the Homerton, a project group (with representation from ELFT, NELFT and local authorities) is currently developing a joint approach to **keeping people safe and preventing them from leaving accident and emergency departments** pending the making of an application for detention under the Mental Health Act 1983.

Action requested:

10. The Quality Committee is being asked to **RECEIVE** and **NOTE** the report.

Strategic priorities this paper supports

Improved population health outcomes	☐	
Improved experience of care	☒	
Improved staff experience	☒	

Improved value	☐	
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Committees/meetings where this item has been considered

Date	Committee/Meeting
19/05/2025	Mental Health Law Monitoring Group
18/08/2025	Mental Health Law Monitoring Group

Implications

Equality Analysis	n/a
Risk and Assurance	See points 1, 2, 5, 7, 9 and 10
Service User/Carer/Staff	See points 1, 2, 9 and 10
Financial	n/a
Quality	See points 1, 2, 5, 7, 9 and 10

Supporting documents and research material

Mental Health Bill https://bills.parliament.uk/publications/56783/documents/5312
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Glossary

Abbreviation	In full
CHS	Community Health Services
CTO	Community Treatment Order
DoLS	Deprivation of Liberty Safeguards
EPR	Electronic Patients Records
MCA	Mental Capacity Act 2005
MHA	Mental Health Act 1983
MHL	Mental Health Law
MHLD	Mental Health Law Department
MHLMG	Mental Health Law Monitoring Group

MENTAL HEALTH LAW EXCEPTION REPORT TO THE QUALITY COMMITTEE

15 December 2025

Title	Mental Health Law Exception Report
Authors	██████████ – Associate Director of Mental Health Law
Accountable Executive Director	██████████ – Chief Medical Officer

Purpose of the report

Provide updates and assurance on the key issues being considered by the Mental Health Law Monitoring Group.

Summary of key issues

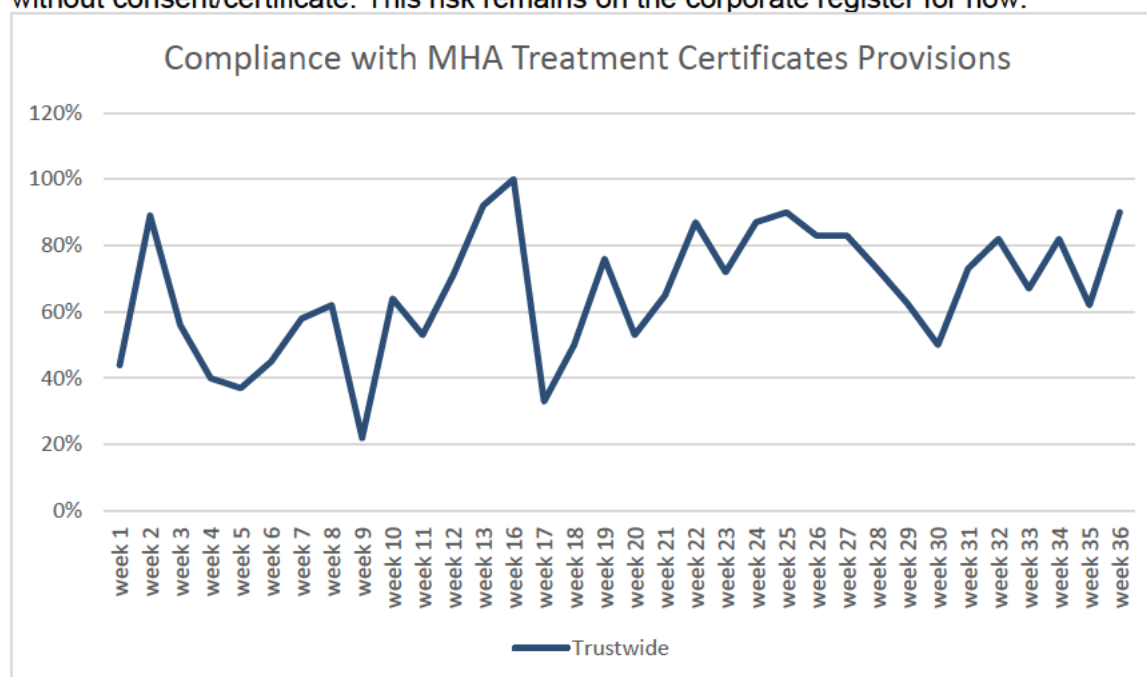
Mental Health Law Monitoring Group meeting dates: 17/11/2025

Risks and exceptions to note, and actions taken:

- CQC MHA Reviews** – Three CQC MHA Review reports have been received since the last Exception report. The MHLMG is monitoring the implementation of the action plans.

Ward	Directorate	Date	Care Plans	S132	S17 leave	Treatment Provisions	Environment
Sally Sherman	TH	05/09/25					
Emerald	NH	14/10/25					
Stratford	Fx	19/1125					

- MHA Treatment Provisions** – The MHLMG is monitoring the delivery of an action plan to improve compliance with MHA treatment provisions. Following consultations with the Clinical Directors it has been agreed to escalate 7 days prior to the end of the period of treatment without consent/certificate. This risk remains on the corporate register for now.



3. **Digital Update** – It has been a year since ELFT went live with eMHA on 20/11/24. Since then NELFT, SWLSG, Oxleas, SLAM and NLFT have gone live. **93% of MHA forms** are now done on eMHA in ELFT. User feedback is variable. The trust is working with NHSE and the suppliers on optimising the product and addressing concerns raised by AMHPs and MHA Admin staff. The British Transport Police went live with eMHA on 31/07/25. The CQC SOAD service did on 21/08/25. The Met police is due to follow in 2026.
4. **Core Skills Training Workforce mapping** – At the end of quarter 1, the MCA and MHA training compliance rates were **85% (+1%) and 85% (+5%) respectively**. The MHLD is supporting Operations to close the gap.
5. **S132A QI Project** – This project was launched in the summer of 2023 to improve S132A compliance for CTO patients and started showing results in August 2024 when Care Coordinators started being prompted and supported to document S132A attempts on EPR by the MHLD. **The compliance rate then jumped from 10 to 66% and is now at 95%.**
6. **Mental Health Bill** – The Mental Health Bill completed its passage through Parliament on 08/12/25 and is now **awaiting royal assent**. The Bill provides a heightened threshold for detention, additional safeguards for people who are autistic and/or have a learning disability and additional powers for the Tribunal. The government has announced reforms will be phased over a period of 10 years to enable services to prepare for the changes.
7. **Deprivation of Liberty in Emergency Departments** – Further to a complaint received at the Homerton, a project group (with representation from ELFT, NELFT and local authorities) is currently developing a joint approach to **keeping people safe and preventing them from leaving accident and emergency departments** pending the making of an application for detention under the Mental Health Act 1983.
8. **Section 136 Practice in Bedfordshire and Deprivation of Liberty** - Following a mock inspection of the Luton and Central Bedfordshire (L&CB) place of safety on 09/09/25, concerns were raised that an individual had been deprived of their liberty without legal authority after their S135 had come to an end. This was investigated by the Associate Director of Mental Health Law. Evidence was found that an application for detention had in fact been duly made by the AMHP service and accepted by L&CB staff. It was made electronically rather than on paper which led to the mock inspectors' confusion. There was no unlawful deprivation of liberty.

Action requested:

9. The Quality Committee is being asked to **RECEIVE** and **NOTE** the report.

Strategic priorities this paper supports

Improved population health outcomes	☐	
Improved experience of care	☒	
Improved staff experience	☒	
Improved value	☐	

Committees/meetings where this item has been considered

Date	Committee/Meeting
17/11/2025	Mental Health Law Monitoring Group

Implications

Equality Analysis	n/a
Risk and Assurance	See points 1, 2, 5, 7, 8 and 9
Service User/Carer/Staff	See points 1, 2, 7, 8 and 9
Financial	See poin 8
Quality	See points 1, 2, 5, 7, 8 and 9

Supporting documents and research material

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Glossary

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MHA	Mental Health Act 1983
MHL	Mental Health Law
MHLD	Mental Health Law Department
MHLMG	Mental Health Law Monitoring Group

MENTAL HEALTH LAW EXCEPTION REPORT TO THE QUALITY COMMITTEE

20 March 2026

Title	Mental Health Law Exception Report
Authors	██████████ – Associate Director of Mental Health Law
Accountable Executive Director	██████████ – Chief Medical Officer

Purpose of the report

Provide updates and assurance on the key issues being considered by the Mental Health Law Monitoring Group.

Summary of key issues

Mental Health Law Monitoring Group meeting dates: 16/02/2026

Risks and exceptions to note, and actions taken:

- CQC MHA Reviews** – Two CQC MHA Review reports have been received since the last Exception report. The following concerns were raised:

Places of safety (C&H and L&B) on 02/12/25:

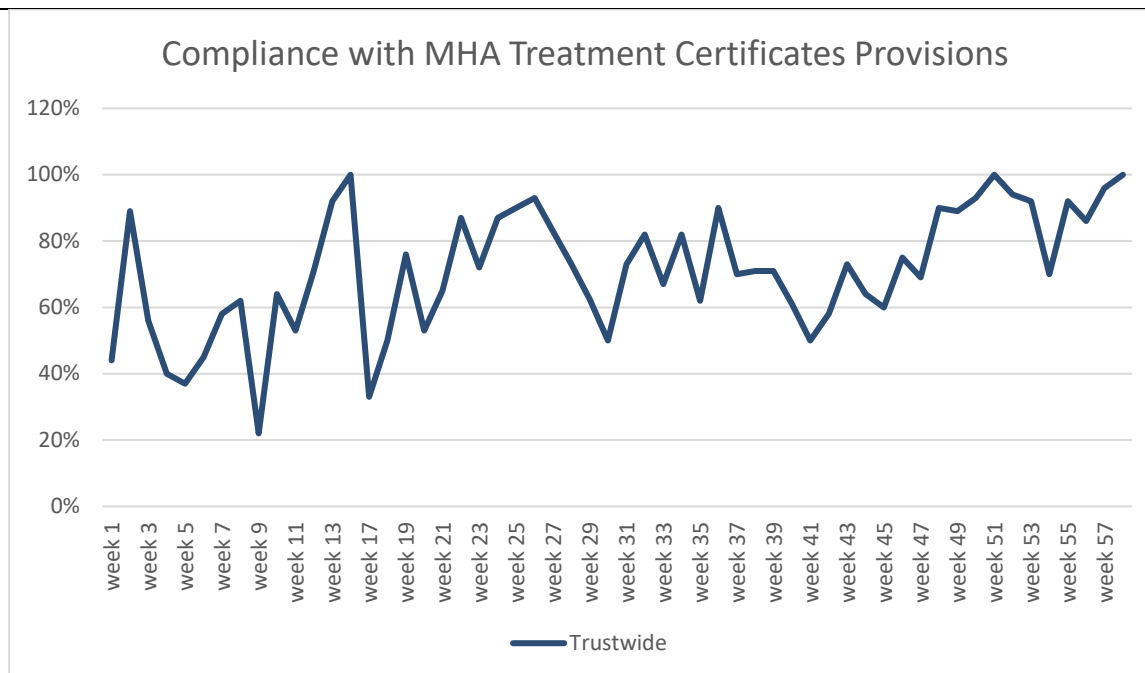
- no access to fresh air
- no clock visible from HBPoS bedroom
- non compliance with S132 rights requirements
- use of CCTV compromising privacy/dignity
- wrongful detention of a member of the public in the Luton PoS
- ligature points in Luton
- police refusing to use ED or police station as PoS in Luton
- poor records of length of detention in Luton
- poor monitoring of use of swing bed in Hackney
- change in S135 practice in London
- ineffective approach to barriers to communication for 1 patient in Luton
- lack of evidence of capacity to consent to admission for informal patient

Ivory ward (NH) on 10/02/26:

- Inaccurate seclusion records for 1 patient
- Restrictions placed on 2 informal patients
- Delayed S132 attempts
- 2 patients had care plans which were not up to date
- 3 patients and 1 carer reported not feeling safe
- Back door window damaged since Dec
- Lack of access to therapeutic activities
- 1 patient was not supported to appeal to the Tribunal

Robust action plans have been put in place by Operations and are being closely monitored by the MHLMG.

- MHA Treatment Provisions** – The MHLMG is monitoring the delivery of an action plan to improve compliance with MHA treatment provisions. The introduction, in week 51, of the latest change idea (escalating 7 days prior to the end of the period of treatment without consent) has proved effective::



3. **Digital Update** – ELFT went live with eMHA on 20/11/24. Since then NELFT, SWLSG, Oxleas, SLAM and NLFT have gone live. **93% of MHA forms** are now done on eMHA in ELFT. User feedback is variable. The trust is working with NHSE and the suppliers on optimising the product and addressing concerns raised by AMHPs and MHA Admin staff. The British Transport Police went live with eMHA on 31/07/25. The CQC SOAD service did on 21/08/25. The City of London police is due to follow in March and the Met police in April 2026.
4. **Core Skills Training Workforce mapping** – At the end of quarter 3, the MCA and MHA training compliance rates were **85% and 91% (+6%) respectively**. The MHL D is supporting Operations to close the gap.
5. **S132A QI Project** – This project was launched in the summer of 2023 to improve S132A compliance for CTO patients. It started showing results in August 2024 when Care Coordinators started being prompted and supported to document S132A attempts on EPR by the MHL D. **The compliance rate then jumped from 10 to 66% and is now at 89%.**
6. **Mental Health Act 2025** – The Mental Health Bill completed its passage through Parliament and received **Royal Assent on 18/12/25**. The new Act provides a heightened threshold for detention, additional safeguards for people who are autistic and/or have a learning disability and additional powers for the Tribunal. The government has announced reforms will be phased over a period of 10 years to enable services to prepare for the changes. Three changes came into force on 18/02/26 affecting Part III patients. An implementation plan is being delivered with oversight from the MHLMG.
7. **Deprivation of Liberty in Emergency Departments** – Further to a complaint received at the Homerton, a project group (with representation from ELFT, NELFT and local authorities) is currently developing a joint approach to **keeping people safe and preventing them from leaving accident and emergency departments** pending the making of an application for detention under the Mental Health Act 1983.
8. **Capacity to consent to admission QI Project** – The MHLMG is monitoring the delivery of a new project to improve the recording of capacity to consent to admission within 24hrs of an informal admission/decision to stay informally on a ward – with weekly reports going to Operations.

Action requested:

9. The Quality Committee is being asked to **RECEIVE** and **NOTE** the report.

Strategic priorities this paper supports

Improved population health outcomes	☐	
Improved experience of care	☒	
Improved staff experience	☒	
Improved value	☐	

Committees/meetings where this item has been considered

Date	Committee/Meeting
16/02/2026	Mental Health Law Monitoring Group

Implications

Equality Analysis	n/a
Risk and Assurance	See points 1, 2, 5, 7, 8 and 9
Service User/Carer/Staff	See points 1, 2, 7, 8 and 9
Financial	See point 8
Quality	See points 1, 2, 5, 7, 8 and 9

Supporting documents and research material

[Mental Health Act 2025](#)

Glossary

Abbreviation	In full
C&H	City & Hackney
CHC	Continuing Health Care
CHS	Community Health Services
CQC	Care Quality Commission
CTO	Community Treatment Order
DoLS	Deprivation of Liberty Safeguards
ED	Emergency Department
EPR	Electronic Patients Records
HBPoS	Health Based Place of Safety
L&B	Luton & Bedfordshire
MCA	Mental Capacity Act 2005
MHA	Mental Health Act 1983
MHL	Mental Health Law
MHLD	Mental Health Law Department
MHLMG	Mental Health Law Monitoring Group
PoS	Place of Safety

SOAD	Second Opinion Appointed Doctor
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