



39 Victoria Street London SW1H 0EU

To: MPs appointed to the Mental Health Bill Public Bill Committee

24th June 2025

Dear Colleagues,

I thank you for the constructive discussion held on the first day of the Committee Stage for the Mental Health Bill, on 10th June 2025.

I am pleased to follow up on the points I said I would address following the debate.

Devolved powers in the development of the Code of Practice

The Shadow Minister, Luke Evans MP raised the following questions on Welsh involvement in the development and use of the Code of Practice:

1. Can the Minister foresee a time when section 118(5B) might be used?

The Welsh code is already required to undergo scrutiny by the Senedd Cymru. Clause 2 of the Bill updates the position in relation to the existing Senedd Cymru scrutiny procedure in Wales, in relation to the Welsh Code and this is set out in new subsections 5A, 5B and 5C. This clarification is necessary because whilst some parts of s.118 pre-dates the Welsh devolution settlement, changes to s.118 were made by the Mental Health Act 2007 which post-dates the Welsh devolution settlement.

2. What work does the Department have planned with its Welsh counterpart to ensure clear communication and professional guidance to support consistency of understanding, not only of the policy but of content?

Wales is responsible for developing its own Code of Practice. My officials will of course work closely with our colleagues in Wales to support consistency of understanding, but the Welsh government rightly controls the content of its Code of Practice.

Data on Care, Education and Treatment Reviews

The Shadow Minister, Luke Evans MP also raised a question on Care, Education and Treatment Reviews to which I committed to follow up on:

1. How many Care, Education and Treatment Reviews have been conducted?

According to Assuring Transformation data, approximately 2,175 Care (Education) and Treatment Reviews (C(E)TRs) were conducted in the 12 months between May 2024 and April 2025.

Please note some patients are expected to have had more than one C(E)TR during their stay and some C(E)TRs will be reported after the month end and therefore not included in the published figures. The annual estimate has been calculated using published rounded figures.

As of April 2025, 86% of children, young people and adults with a learning disability, autism or both who are in a mental health hospital have had a C(E)TR and 77% had their C(E)TR within the last 12 months. Please note (1) that some people choose not to have a C(E)TR and NHS England policy is clear that one cannot take place without consent and (2) these C(E)TRs may not have been conducted during the patient's most recent hospital stay.

I hope this letter has provided further clarification on the issues raised in Committee. I am copying this letter to all members of the Committee and will place a copy in the library of the House.

Yours sincerely,

STEPHEN KINNOCK