

Admission of patients to mental health facilities in Wales, 2017-18

27 November 2019
SFR 115/2019

Admissions

- In 2017-18, there were 8,588 admissions (excluding place of safety detentions) to mental health facilities in Wales, a decrease of 135 (2 per cent) from 2016-17 ([table 1](#)).
- 97 per cent of admissions (excluding place of safety detentions) in 2017-18 were to NHS facilities in Wales, with the remainder admitted to independent hospitals ([chart 2](#)).

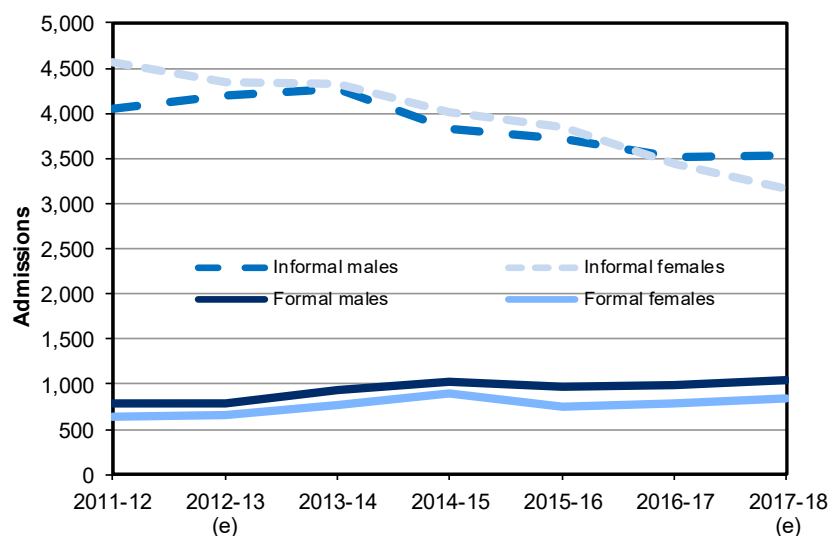
Formal admissions under the Mental Health Act 1983 and other legislation

- In 2017-18, 1,891 of the total admissions were under the Mental Health Act 1983 (excluding place of safety detentions) and other legislation, an increase of 115 (6 per cent) from 2016-17 ([table 1](#)).
- 94 per cent (1,775 of 1,891) of formal admissions (excluding place of safety detentions) were detained without the involvement of criminal courts (Part II) with 78 per cent (1,378 out of 1,775) of these being admitted for assessment, with or without treatment (Section 2 of the Mental Health Act 1983) ([table 1](#)).

Supervised community treatment

- In 2017-18, there were 149 patients subject to supervised community treatment (SCT), including 15 for whom an independent hospital was responsible ([table 3a](#)). Of this total, 96 were male and 53 were female.

Chart 1: Admissions by gender of patient, 2011-12 to 2017-18 (a)



(a) Excluding place of safety detentions.

(e) Estimate for independent hospitals – see [Key quality information](#) for more details.

About this release

This release contains summary information on the number of patients admitted to mental health facilities in Wales both formally and informally, and patients subject to supervised community treatment.

The Mental Health Act 1983 (which was amended in 2007) is the law in England and Wales that allows people with a mental disorder to be admitted to hospital, detained and treated without their consent – whether for their own health, safety, or for the protection of other people.

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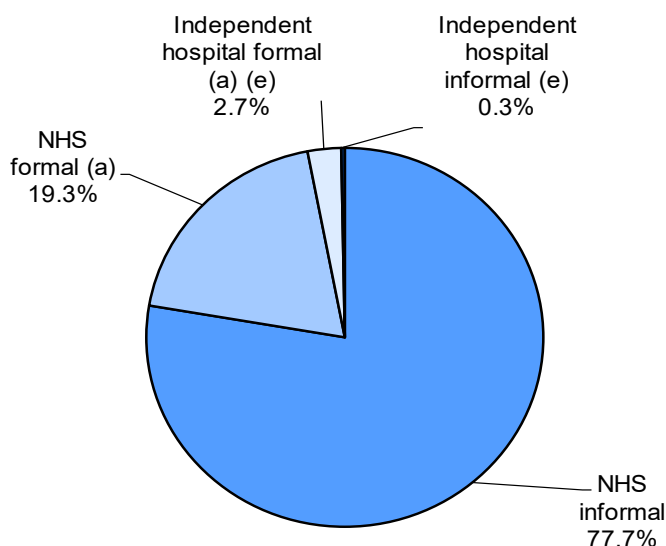
Introduction

People can be admitted, detained and treated under different sections of the Mental Health Act, depending on the circumstances. People who are compulsorily admitted to hospital are called 'formal' patients and people who are admitted to hospital when they are unwell without the use of compulsory powers are called 'informal' patients. The Mental Health Act also allows people to be put on supervised community treatment, after a period of compulsory treatment in hospital. Following changes to section 135/136 in December 2017 the data are no longer collected annually as part of this collection. A new quarterly publication for section 135/136 will start on December 5th. More information is given in the notes.

Admissions

The number of admissions in Wales (excluding place of safety detentions) has decreased year on year between 2013-14 and 2017-18 to stand at 8,588. More males than females were formally admitted each year. The number of informal admissions fell from 6,947 in 2016-17 to 6,697 in 2017-18, a decrease of 250 (4 per cent).

Chart 2: Admissions by legal status and type of premise, 2017-18

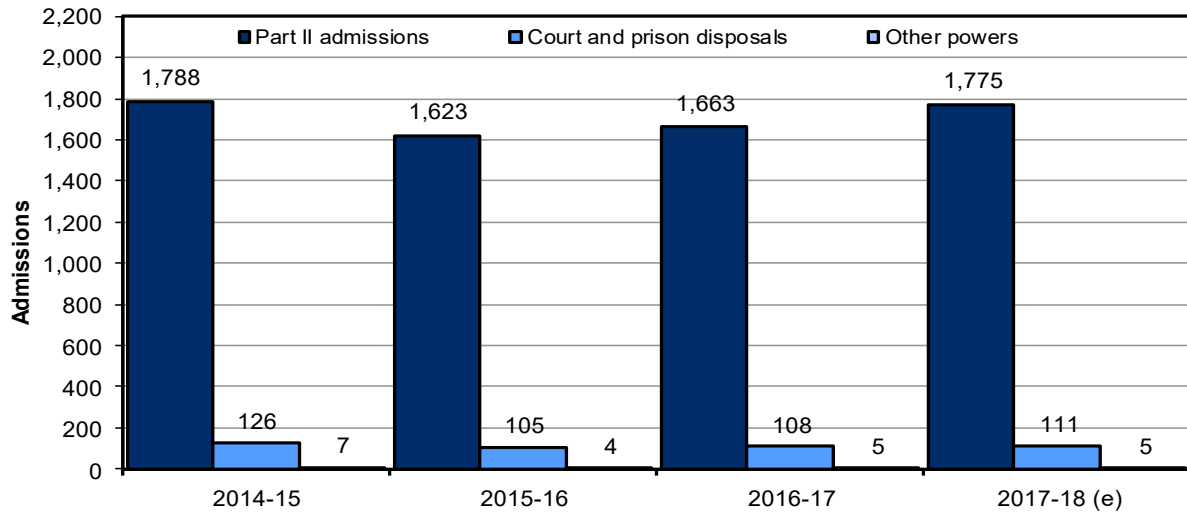


97 per cent of all admissions in 2017-18 and 88 per cent of formal admissions (excluding place of safety detentions) were to NHS facilities.

(a) Excluding place of safety detentions

(e) Estimate for independent hospitals – see [Key quality information](#) for more details.

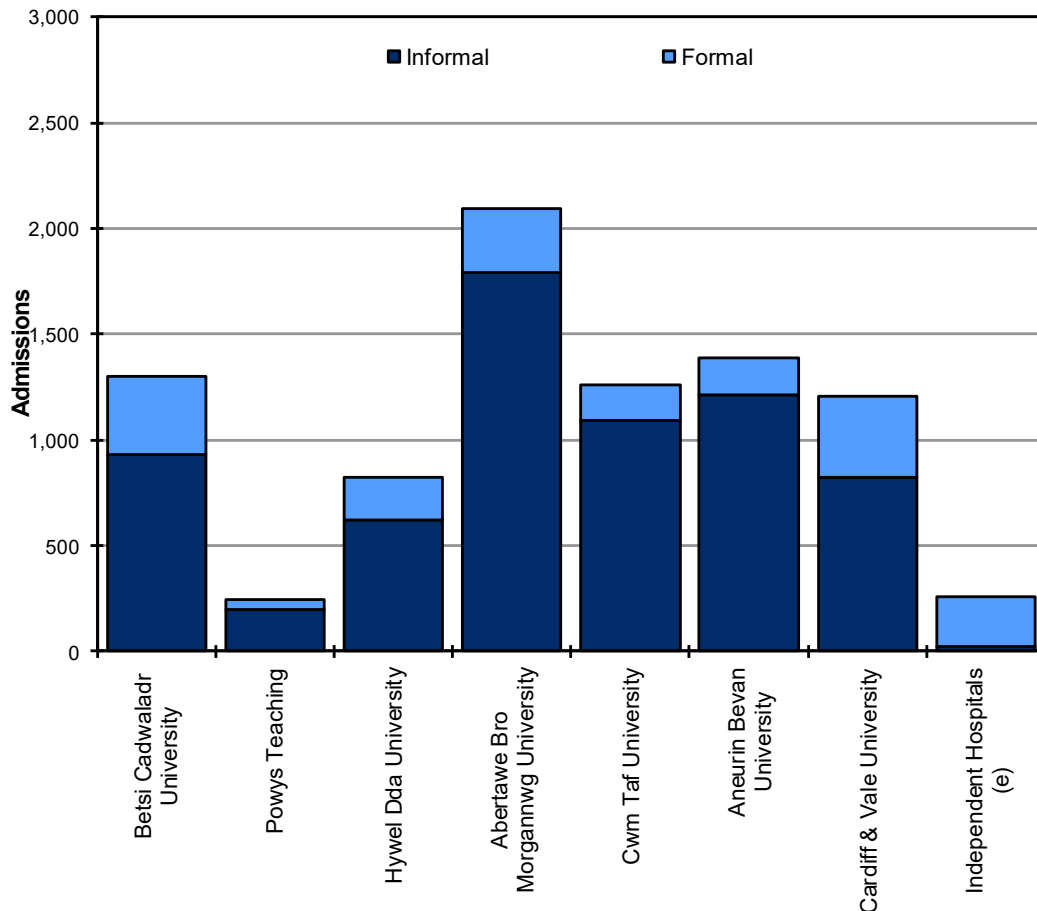
Chart 3: Use of the Mental Health Act, 2014-15 to 2017-18



(e) Estimate for independent hospitals – see [Key quality information](#) for more details.

Of those admitted formally under sections of the Mental Health Act, the majority in each year were admitted under Part II (94 per cent in 2017-18, excluding place of safety detentions).

**Chart 4: Admissions by Local Health Board and Independent Hospitals, 2017-18 (a)
(b)**



(a) Excluding place of safety detentions

(b) See [Key quality information](#) for more details of data presented for Powys.

(e) Estimate for independent hospitals – see Key Quality Information for more details.

Out of the NHS providers in 2017-18, Abertawe Bro Morgannwg ULHB had the highest number of informal admissions (1,793 or 27 per cent) and Cardiff & Vale ULHB had the highest number of formal admissions (385 or 23 per cent). Powys Teaching LHB had the lowest number of informal admissions (201 or 3 per cent) and formal admissions (44 or 3 per cent). The admission rates per 10,000 resident population (shown in [Table 2](#)), which takes account of the relative size of each health board, show a slightly different pattern. Cwm Taf ULHB had the highest informal rate (36.5) and Betsi Cadwaladr ULHB had the lowest (13.3). For formal admissions Cardiff & Vale ULHB had the highest rate (7.8) and Aneurin Bevan ULHB had the lowest (3.0). 90 per cent of admissions to independent hospitals were formal admissions.

Table 1: Number of admissions by legal status, 2014-15 to 2017-18 (a)

Legal status (b)	Number			
	2014-15	2015-16	2016-17	2017-18 (e)
Formal admissions:				
Part II:				
2 (assessment with or without treatment)	1,210	1,211	1,246	1,378
3 (to hospital for treatment)	503	347	345	338
4 (for assessment in emergency)	75	65	72	59
Total	1,788	1,623	1,663	1,775
Court and prison disposals:				
35 (remanded to hospital for report)	3	0	3	1
36 (remanded to hospital for treatment)	0	0	0	5
37 (convicted person sent to hospital for treatment with section 41 restriction)	39	31	30	17
37 (convicted person sent to hospital for treatment without section 41 restriction)	48	46	38	36
45A (combined hospital order and prison sentence disposal)	1	0	2	1
47 & 48 (prisoner transferred to hospital with section 49 restriction)	25	24	28	42
47 & 48 (prisoner transferred to hospital without section 49 restriction)	10	4	7	9
Total	126	105	108	111
Other powers (c)	7	4	5	5
Formal admissions Total	1,921	1,732	1,776	1,891
Informal admissions	7,841	7,565	6,947	6,697
All admissions	9,762	9,297	8,723	8,588
Hospital-based Place of Safety (PoS) detentions - first PoS only (d)				
135 (warrant to remove to a place of safety)	45	44	50	.
136 (removal by police from a public place to a place of safety)	1,073	1,347	1,722	.
Total	1,118	1,391	1,772	.

(a) NHS and independent hospitals.

(b) See notes at end of release for details.

(c) Other sections of the Mental Health Act 1983 and other Acts.

(d) See Key Quality Information for more details.

(e) Estimate for independent hospitals – see Key Quality Information for more details.

Table 2: Admissions by Local Health Board and Independent Hospitals, 2017-18 (a)

Local Health Board / Independent Hospital	Rate (b)		Number	
	Informal	Formal	Informal	Formal
Betsi Cadwaladr University LHB	13.3	5.4	928	376
Powys Teaching LHB	15.2	3.3	201	44
Hywel Dda University LHB	16.2	5.3	623	203
Abertawe Bro Morgannwg University LHB	33.7	5.7	1,793	303
Cwm Taf University LHB	36.5	5.7	1,091	171
Aneurin Bevan University LHB	20.6	3.0	1,212	175
Cardiff & Vale University LHB	16.7	7.8	824	385
Independent Hospitals (e)	.	.	25	234
Wales	21.4	6.1	6,697	1,891

(a) Excluding place of safety detentions. See Key Quality Information for more details of data presented for Powys.

(b) Per 10,000 resident population based on the 2017 mid year estimates.

(e) Estimate for independent hospitals – see Key Quality Information for more details.

Use of supervised community treatment (under section 17A Mental Health Act 1983)

Table 3a: Patients discharged from hospital under supervised community treatment (SCT), 2017-18

Local Health Board	Legal status prior to SCT		Number
	Section 3	Other sections	Total
	Betsi Cadwaladr University LHB	34	*
Powys Teaching LHB	*	0	*
Hywel Dda University LHB	*	*	*
Abertawe Bro Morgannwg University LHB	22	0	22
Cwm Taf University LHB	20	0	20
Aneurin Bevan University LHB	18	0	18
Cardiff & Vale University LHB	21	*	*
Wales (a) (e)	146	3	149

(a) Wales totals include patients discharged from independent hospitals under supervised community treatment.

(e) Estimate for independent hospitals – see Key Quality Information for more details.

* LHB Figures under 5 have been suppressed to avoid the risk of disclosing information about individuals. Further figures have also been suppressed to avoid secondary disclosure.

Table 3b: Supervised community treatment (SCT) related activity, 2017-18

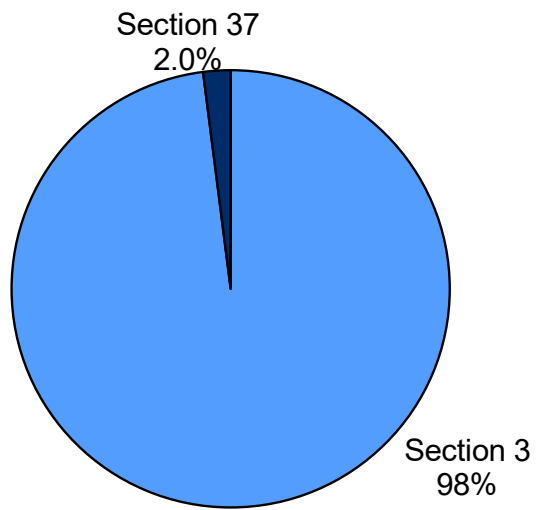
Local Health Board	SCT related activity					Number
	Recall	Revocation	Discharge	Assignment to the hospital of a SCT patient	Assignment from the hospital of a SCT patient	
	Betsi Cadwaladr University LHB	17	19	14	*	*
Powys Teaching LHB	*	*	9	0	0	0
Hywel Dda University LHB	8	5	23	*	0	0
Abertawe Bro Morgannwg University LHB	9	12	0	0	0	0
Cwm Taf University LHB	*	*	*	*	0	0
Aneurin Bevan University LHB	7	6	18	*	0	0
Cardiff & Vale University LHB	11	8	*	0	0	0
Wales (a) (e)	61	57	72	7	8	8

(a) Wales totals include patients discharged from independent hospitals under supervised community treatment.

(e) Estimate for independent hospitals – see Key Quality Information for more details.

* Figures under 5 have been suppressed to avoid the risk of disclosing information about individuals. However, further figures have also been suppressed to avoid secondary disclosure.

Chart 5: Legal Status of patients before being discharged under supervised community treatment, 2017-18



Of the patients discharged under supervised community treatment in 2017-18, the majority (98 per cent) had been admitted under Section 3, with the remaining 2 per cent under Section 37.

Key quality information

Relevance

This release provides data on the number of admissions to mental health facilities throughout the financial year 2016-17 by type of admission (e.g. formally or informally).

We also publish another release on mental health '[Patients in mental health hospitals and units in Wales, at 31 March 2019](#)'. This provides data on the number of patients who have been resident in hospitals and units for people with a mental illness and for people with a learning disability at 31 March 2019, a snapshot on that date.

Definitions of terms used can be found in the [NHS Wales Data Dictionary](#).

Users and uses

We believe the key users of these statistics are:

- Ministers and their advisors
- Assembly members and Members Research Service in the National Assembly for Wales
- policy makers of the Welsh Government
- other government departments
- NHS Wales
- students, academics and universities
- media
- individual citizens.

The statistics are used in a variety of ways. Some examples of these include:

- to provide advice to Ministers
- to inform debate in the National Assembly for Wales and beyond
- to monitor the number and type of detentions, as well as identify variations in detention rates across reporting periods and within different areas in Wales
- for trend analysis as well as informing funding arrangements
- to help determine the service the public may receive from the relevant organisations.

We consult with key users prior to making changes, and where possible publicise changes on the internet, at committees and other networks to consult with users more widely. We aim to respond quickly to policy changes to ensure our statistics remain relevant.

Accuracy

To reduce processing errors the process for producing this release is as automated as possible. There are also quality assurance procedures in place to understand and explain movements in the data and to check that the computer system is calculating the published statistics correctly. This includes, validating data received with that for previous years and if any totals show large variances confirming these with the relevant information managers of each LHB. All LHB information managers are also asked to confirm the formal and informal LHB totals.

Revisions and resubmissions

Notes at the end of the release inform the users whether the outputs have been revised or not (denoted r). We will also give an indication of the size of the revision between the latest and previous release. There are not generally revisions to the data. However, if there are revisions they generally only take place when we receive a resubmission from the LHB for previous year's data and the revisions will be published at the same time as the most recent year's data.

For Cwm Taf prior to 2015-16 figures may also be lower than those published. However, Cwm Taf are unable to provide revised figures at present.

In the unlikely event of incorrect data being published revisions to data would be made and users informed in conjunction with our [revisions, errors and postponements](#) arrangements.

Estimates

Not all independent hospitals returned data collection forms for 2012-13 and 2017-18. As a result, we have used their data submitted for 2011-12 and 2016-17 as an estimate for 2012-13 and 2017-18 respectively. This affects the figures on admissions and supervised community treatment. Data in tables and charts that are affected by this are shown by an (e).

Source

Data are collected by financial year from individual Local Health Boards via the KP90 data collection form and are subject to validation checks centrally prior to publication. However it is the responsibility of these organisations to ensure that the figures have been compiled correctly in accordance with central definitions and guidelines. A list of independent hospitals that are registered to detain patients is provided to the Welsh Government each year from Healthcare Inspectorate Wales and the Welsh Government collects the relevant data. This list can vary between years. For the period 1st April 2017 to 31st March 2018, 55 NHS mental health facilities and 17 Independent hospitals provided returns. 2 independent hospitals didn't provided returns for 2017-18.

Changes to the KP90 data collection form and guidance were made in 2008-09 to take into account changes to the Mental Health Act 1983 made by the Mental Health Act 2007. These changes may affect comparisons with data for earlier years.

Further changes were made to the data collection form in 2013 to make the form electronic, add more detail to the guidance notes and definitions. Further to this, for 2014-15 data onwards we

introduced further validation checks including returning the health boards own submitted figures to them for approval.

Agreed standards and definitions within Wales provide assurance that the data is consistent across Local Health Boards. Every year the data are collected from the same sources and adhere to the national standard, meaning that they should be coherent within and across organisations.

Coverage

Information is presented on admissions to mental health facilities in Wales (includes NHS and independent hospitals), both formally and informally. Although informal admissions account for the majority of admissions to mental health facilities in Wales, in the interest of their own health or safety or for the protection of other people a person may be formally admitted or detained in hospital under various sections of the Mental Health Act 1983 and other legislation.

On 1st April 2010, Powys Teaching LHB transferred mental health services to Aneurin Bevan LHB, Betsi Cadwaladr University LHB and Abertawe Bro Morgannwg University LHB. After that, the data was shown under these LHBs in the release. However, following discussions between Welsh Government and Powys LHB, the data from 2012-13 onwards is shown under Powys. As a result, the data from 2012-13 onwards for those LHBs will not be comparable with data for previous years. These services were subsequently transferred back by Betsi Cadwaladr University LHB and Abertawe Bro Morgannwg University LHB on the 31st November 2015.

Any transgender patients have been classified in the data according to the gender they consider themselves to be.

Quality

[Statement on confidentiality and data access](#)

Timeliness and punctuality

All outputs adhere to the Code of Practice by pre-announcing the date of publication through the [Upcoming calendar](#) web pages. Furthermore, should the need arise to postpone an output this would follow our [revisions, errors and postponements](#) arrangements.

We publish releases as soon as practical after the relevant time period.

Accessibility and clarity

The statistics are published in an accessible, orderly, pre-announced manner on the Welsh Government website at 9:30am on the day of publication. An RSS feed alerts registered users to this publication. Simultaneously the releases are also published on the National Statistics Publication Hub. We also publicise our outputs on [Twitter](#). All releases are available to download for free.

We aim to use Plain English in our outputs and all outputs adhere to the Welsh Government's [accessibility policy](#). Furthermore, all our headlines are published in Welsh and English.

Further information regarding the statistics can be obtained by contacting the relevant staff detailed on the release or via stats.healthinfo@gov.wales

StatsWales

More detailed tables are available via [StatsWales](#) (an interactive data dissemination service).

Comparability and coherence

Where there are changes to the data provided, this is shown clearly in the outputs. Where advance warning is known of future changes these will be pre-announced in accordance with Welsh Government arrangements.

Mental health data for other UK countries

There is similar information available from other parts of the UK but the data is not exactly comparable due to local definitions and standards in each area.

Statistics on admissions to mental health facilities in England and use of supervised community treatment are published by [NHS Digital](#).

Psychiatric hospital activity statistics for Scotland: [Mental Health Hospital Inpatient Care](#)

Mental health and learning disability activity statistics for Northern Ireland: [Mental Health & Learning Disability Inpatients 2018/19](#)

The Mental Health Acts 1983 and 2007

An outline of the main section of the [Mental Health Act 1983](#), under which people can be formally detained in hospital, is given below. Changes were made to the Mental Health Act 1983 by the [Mental Health Act 2007](#).

Part II admissions

Part II of the Act allows a patient to be compulsorily admitted under the Act if he/she is suffering from mental disorder as defined in the Act and where this is necessary:

- in the interests of his/her own health or
- in the interests of his/her own safety or
- for the protection of other people.

The relevant sections are:

Section 2: admission to hospital for assessment or assessment and treatment; this section has a detention limit of 28 days after which a person become an informal patient (unless detained under section 3).

Section 3: admission to hospital for treatment; this section allows for detention for up to six months, after which the order can be renewed for a further six months and then for one year at a time.

Section 4: admission for assessment in emergency; this section has a detention limit of 72 hours and cannot be renewed but a person may be assessed for further detention under section 2 or 3.

Section 5(2): a registered medical practitioner or approved clinician's power to hold informal patients already in hospital; this section has a detention limit of 72 hours and cannot be renewed.

Section 5(4): nurses' holding power of an informal patient already in hospital and receiving treatment for a mental disorder; the detention limit of six hours of this section cannot be renewed.

Admissions following court disposal

Part III of the Act relates to people involved in criminal proceedings.

The relevant sections are:

Sections 35: accused person remanded to hospital for report relating to that person's mental health; this section has a detention period of 28 days and can be renewed for two further periods of 28 days (12 weeks in total).

Section 36: accused person remanded to hospital for treatment; this section has a detention period of 28 days which can be renewed for two further periods of 28 days (12 weeks in total).

Section 37: convicted person sent to hospital for treatment (known as a 'hospital order'); this section allows for detention for up to 6 months, after which the order can be renewed for a further six months and then for one year at a time.

Section 37 can be accompanied by a restriction order under section 41 (known as section 37/41); patients detained under section 37/41 can only be discharged by a Mental Health Review Tribunal or the Secretary of State.

Section 38: convicted person sent to hospital for assessment prior to sentencing (an interim hospital order) cannot be renewed beyond a period of 12 months. Section 37(4) lasts for a maximum of 28 days.

Section 44: potential section 37 patient committed to hospital by a magistrates court pending a crown court hearing for restriction order.

Section 45A: sentenced person given a hospital direction and limitation direction alongside a prison sentence. The hospital direction is equivalent to a section 37 hospital order and the limitation direction is similar to a restriction order under section 41.

Section 47: prisoner, serving a sentence, transferred from prison (or other form of detention) to hospital – either with or without a restriction direction under section 49 (a restriction direction is similar to a restriction order under section 41).

Section 48: prisoner, not sentenced, transferred from prison (or other form of detention) to hospital – either with or without a restriction direction under section 49.

Patients subject to detention under sections 45A, 47/49 or 48/49 are subject to continuous detention until such time as they are either discharged, the restrictions end, or they are returned to prison.

Place of safety detentions data

Following the changes to the Mental Health Act relating to Section 135 and 136 in December 2017, the Welsh Government has decided it is appropriate to cease collecting data on the 'Use of Sections 135 and 136 of the Mental Health Act 1983' on an annual basis via the KP90 form. The information was previously published annually at an all Wales level only in the [Admission of patients to mental health facilities](#) Statistical First release in Tables 4a and 4b. The last of the releases showing this data was published on the 31 January 2018, showing the 2016-17 data.

The data will be published in the future via the quarterly Section 135 and 136 data that health boards and the [first publication](#) will be on the 5 December 2019.

After care under supervision (ACUS)

After-care under supervision (or ACUS) was abolished on 3 November 2008. Transitional provisions were in place until 3 May 2009. ACUS (which was introduced by The Mental Health (Patients in the Community) Act 1995 on 1 April 1996) applied to patients discharged from detention under Section 3, 37, 47 or 48 who presented a substantial risk of serious harm to themselves or other people, unless their care is supervised.

Supervised community treatment

Supervised community treatment (SCT) was introduced into the Mental Health Act 1983 by the Mental Health Act 2007 and its purpose is to allow patients to continue their treatment in the community following a period of detention in hospital. SCT has only been available since 3 November 2008.

Patients detained in hospital for treatment under section 3 (and certain Part III sections) can be discharged from detention onto a community treatment order (CTO) to continue their treatment in the community. While on a CTO, they can, if necessary, be recalled to hospital for up to 72 hours, normally for further treatment. If they need to remain detained in hospital for more than 72 hours, their CTO can be revoked. If that happens, they go back to being detained under the section they were on before going onto the CTO ("revocation of SCT"). A discharge from SCT occurs when a patient's CTO ends without being revoked.

Independent hospitals

These are establishments, other than an NHS hospital, which provide treatment or nursing (or both) for persons liable to be detained under the Mental Health Act 1983. The Care Standards Act 2000 also provides that such independent hospitals should be registered under Part II of that Act, and should comply with such National Minimum Standards as may be published. Although Healthcare Inspectorate Wales (HIW) retains responsibility for the registration and inspection of the independent hospitals, individual establishments were responsible for supplying data on detained patients. Independent hospitals classed as substance misuse treatment centres are not included for 2007-08 onwards. Care should be taken when interpreting figures relating to independent hospitals.

Mental Health (Wales) Measure 2010

Data on the [Mental Health \(Wales\) Measure 2010](#), places duties on local health boards and local authorities about the assessment and treatment of mental health problems.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural well-being of Wales. The Act puts in place seven well-being goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators (“national indicators”) that must be applied for the purpose of measuring progress towards the achievement of the Well-being goals, and (b) lay a copy of the national indicators before the National Assembly. The 46 national indicators were laid in March 2016.

Information on the indicators, along with narratives for each of the well-being goals and associated technical information is available in the [Well-being of Wales report](#).

Further information on the [Well-being of Future Generations \(Wales\) Act 2015](#).

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local well-being assessments and local well-being plans.

General notes

The following symbols and abbreviations are used in the tables:

. Not applicable

* Suppressed to avoid the risk of disclosing information about individuals.

Further details

The document is available at: <https://gov.wales/admission-patients-mental-health-facilities>

Next update

February 2020, this will include data up to 2018-2019.

We want your feedback

We welcome any feedback on any aspect of these statistics which can be provided by email to

Email: stats.healthinfo@gov.wales

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