

The Welsh Government's Legislative Consent Memoranda on the Mental Health Bill

April 2025



1. Background

The Mental Health Bill

1. The Mental Health Bill¹ (the Bill) was introduced into the House of Lords on 6 November 2024. It is sponsored by the Department of Health and Social Care.

2. The long title to the Bill states that it is a Bill to:

“Make provision to amend the Mental Health Act 1983 in relation to mentally disordered persons; and for connected purposes.”²

3. The *Mental Health Act 1983* (the 1983 Act) provides a legal framework to authorise the detention and compulsory treatment of people who have a mental disorder and are considered at risk of harm to themselves or others.

4. The Explanatory Notes to the Bill as introduced state that:

“The measures in this Bill are generally intended to strengthen the voice of patients subject to the Act. They add statutory weight to patients’ rights to be involved in planning for their care, and to inform choices regarding the treatment they receive. The reforms will increase the scrutiny of detention to ensure it is only used when, and as long, as necessary. The Bill also seeks to limit the use of the Act to detain people with a learning disability and autistic people.”³

5. The Bill received its Second Reading on 25 November 2024. At the time this report was agreed, the Bill was at Report stage.

The Welsh Government's Legislative Consent Memorandum

6. Standing Orders 29.1 and 29.2 provide that a legislative consent memorandum is required when a relevant Bill before the UK Parliament makes provision in relation to Wales that has regard to devolved matters.

¹ Mental Health Bill, as introduced

² Mental Health Bill, as introduced

³ Mental Health Bill, Explanatory Notes, 6 November 2024, paragraph 2

7. On 21 November 2024, Sarah Murphy MS, Minister for Mental Health and Wellbeing (the Minister), laid before the Senedd a Legislative Consent Memorandum (the Memorandum) in respect of the Bill.⁴

8. The Business Committee agreed that the Legislation, Justice and Constitution Committee and the Health and Social Care Committee should report on the Memorandum by 7 February 2025.⁵ On 14 January 2025, the Business Committee agreed a revised reporting deadline of 28 February 2025.⁶ The deadline for reporting was later extended to 4 April 2025.⁷

Provision for which the Senedd's consent is required

9. The Welsh Government's assessment, as set out in paragraph 8 of the Memorandum, is that consent is required in relation to clauses 1 to 3, 5 to 8, 10 to 19, 21 to 32, 34 to 37, 39 to 46, 49 to 51, Schedule 1 and Schedule 2.⁸

10. The Memorandum states that the UK Government considers that consent is required in relation to clauses 1 to 3, 5 to 8, 10 to 19, 21 to 30, 32, 35, 39 to 40, 42 to 46, 49, Schedule 1 and Schedule 2.⁹

11. The Minister states that:

"There is a difference in position between the Welsh Government and UK Government in relation to the need for consent for clauses 31, 34, 36, 37, 41, 50, and 51. However, in my view, these clauses make provision in relation to Wales that have regard to the devolved matter of public health. Therefore, in accordance with Standing Order 29, Senedd consent is required."¹⁰

⁴ Welsh Government, [Legislative Consent Memorandum, Mental Health Bill](#), 20 November 2024

⁵ Business Committee, [Timetable for consideration: Legislative Consent Memorandum on the Mental Health Bill](#), November 2024

⁶ Business Committee, [Timetable for consideration: Supplementary Legislative Consent Memorandum \(Memorandum No. 2\) on the Mental Health Bill](#), January 2025

⁷ Business Committee, [Timetable for consideration: Supplementary Legislative Consent Memorandum \(Memorandum No. 2\) on the Mental Health Bill](#), February 2025

⁸ Memorandum, paragraph 8

⁹ Memorandum, paragraph 9

¹⁰ Memorandum, paragraph 11

The Welsh Government's position

12. In paragraphs 12 to 15 of the Memorandum, the Minister outlines the Welsh Government's position on the inclusion of provisions for Wales in the Bill:

"I support these reforms which will modernise mental health legislation to give patients greater choice, autonomy, enhanced rights and support; and ensure everyone is treated with dignity and respect throughout treatment. The Bill also includes measures to improve the care and support of people with a learning disability and autistic people, reducing reliance on hospital-based care.

There is a significant amount of cross-border provision of mental health services between Wales and England. Not taking provisions in this Bill risks increasing divergence between services available in the two countries.

Furthermore, the periods of detention and the rights to apply to the tribunal are key safeguards in the protection of rights of individuals subject to the 1983 Act and I want to take this opportunity to implement those changes here in line with the Welsh Government's approach to enhancing individual rights in Wales.

Whilst this Bill has regard to devolved matters, it also makes provision relating to reserved matters. For that reason, I consider legislating through a UK Bill to offer the most coherent approach to the provisions delivered in this legislation."¹¹

13. The Minister concludes:

"In my view it is appropriate to deal with these provisions in a UK Bill as it ensures a coherent system of rights across Wales and England, in line with our commitment to enhancing individual rights in Wales, and supports our policy objectives on new mental health strategies."¹²

¹¹ Memorandum, paragraphs 12 to 15

¹² Memorandum, paragraph 19

The Welsh Government's Supplementary Legislative Consent Memorandum (Memorandum No. 2)

14. The Minister laid a Supplementary Legislative Consent Memorandum (Memorandum No. 2) on 10 January 2025 in respect of amendments tabled by the UK Government to the Bill at Lords Committee Stage.¹³

15. The Business Committee agreed that the Legislation, Justice and Constitution Committee and the Health and Social Care Committee should report on Memorandum No. 2 by 28 February 2025.¹⁴ The deadline for reporting was later extended to 4 April 2025.¹⁵

Provision for which the Senedd's consent is required

16. During Lords Committee Stage, the UK Government tabled amendments to clauses 31 and 43 of the Bill, and also amendments to insert new clauses 32 and 52.¹⁶

The Welsh Government's position

17. In Memorandum No. 2, the Minister explains the background to the UK Government tabling new clause 52. The Minister states:

"In the previous LCM, I noted that the Bill included a consequential amendment provision in clause 51 providing the Secretary of State with powers to make consequential amendments to Senedd legislation, without conferring equivalent powers to do so on Welsh Ministers or requiring that the Welsh Ministers' consent or consultation be sought. Following discussion with the UK Government, a new clause 52 has now been tabled. New Clause 52 provides the Welsh Ministers with equivalent powers to make consequential provision to amend primary legislation in relation to Welsh

¹³ Welsh Government, [Supplementary Legislative Consent Memorandum \(Memorandum No. 2\) Mental Health Bill](#), 10 January 2025

¹⁴ Business Committee, Revised timetable for consideration: Legislative Consent Memorandum on the Mental Health Bill, January 2025

¹⁵ Business Committee, Revised timetable for consideration: Legislative Consent Memorandum on the Mental Health Bill, February 2025

¹⁶ Memorandum, paragraph 7

devolved areas. This power is equivalent to that which is provided to the Secretary of State in clause 51.”¹⁷

18. In terms of the amendments requiring the consent of the Senedd, the Minister states:

“... my view remains that an LCM is required in relation to clauses 1 to 3, 5 to 8, 10 to 19, 21 to 32, 34 to 37, 39 to 46, and 49 to 51, Schedule 1 and Schedule 2.

There is a difference in position between the Welsh Government and UK Government in relation to the need for consent for clauses 31, 34, 36, 37, 41, 50, and 51. The UK Government has not yet given an assessment of the devolution implications of new clause 32 (although it would seem likely that it would view this clause in the same way as clause 31) or of clause 52.

However, in my view, the clauses listed in the previous paragraph, including new clauses 32 and 52, make provision in relation to Wales that has regard to the devolved matter of public health. Therefore, in accordance with Standing Order 29, Senedd consent is required.”¹⁸

Evidence from the Minister

19. We considered the Memorandum and Memorandum No. 2 at our meeting on 27 January 2025.¹⁹

20. We subsequently wrote to the Minister on 4 February 2025 about matters raised in those memoranda.²⁰ The Minister responded to our letter on 28 February 2025.²¹

¹⁷ Memorandum No. 2, paragraph 19

¹⁸ Memorandum No. 2, paragraphs 22 to 24

¹⁹ [Legislation, Justice and Constitution Committee](#), 27 January 2025

²⁰ [Letter to the Minister for Mental Health and Wellbeing](#), 4 February 2025

²¹ [Letter from the Minister for Mental Health and Wellbeing](#), 28 February 2025

The Welsh Government's approach

21. We asked the Minister to explain why she believed it was appropriate to make these provisions for Wales in a UK Government Bill, rather than in a Bill introduced to the Senedd. In response, the Minister stated:

“We follow the principle that primary legislation in devolved areas should be enacted by the Senedd. However, we remain willing to work with the UK Government on its legislative programme and are committed to achieving outcomes where they are in the best interest of Wales whilst respecting devolution.

The Mental Health Bill reflects this principle, with close collaboration taking place between officials to develop provisions in the Bill from the outset.

As noted in the LCM, whilst this Bill has regard to devolved matters, it also makes provision relating to reserved matters. The interrelationship between reserved matters and devolved matters is closely intertwined; for example, clause 34 (transfers from prison to hospital: conditions) and clause 35 (transfers from prison to hospital: time limits).

For that reason, I consider legislating through a UK Bill to offer the most coherent approach to the provisions delivered in this legislation.”²²

22. We also asked the Minister to provide information about how the Welsh Government's involvement in the Bill occurred. In response, the Minister told us about the UK Government's independent review of the 1983 Act (announced in October 2017), adding:

“Following the recommendations made in the independent review, the UK Government published a White Paper on the Bill including areas that are devolved to Wales. The UK Government sought agreement from the Welsh Government to include provision for Wales (subject to formal legislative consent).

²² Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 1

Officials received copies of the Welsh consultation responses to the White Paper, and the summary report produced by the UK Government covering all the consultation responses. Officials also established a reference group, consisting of representatives from Royal College of Psychologists, NHS Wales, Health Inspectorate Wales and Social Care Wales to support the Welsh Government in reaching a policy position for Wales in response to the recommendations in the White Paper.

Officials held focused sessions to test proposed positions with key groups including the Wales Alliance for Mental Health, the Mental Health Partnership Board and the President of the Mental Health Tribunal for Wales.”²³

23. The Minister also provided further information about the policy development work undertaken by the Welsh Government in relation to mental health, and the role the Welsh Government played in the development of the Bill, including its decisions on the reforms which would apply to Wales.²⁴ She also indicated that the Welsh Government would be consulting on various mental health related strategies in April 2025.²⁵

24. The Minister also advised us that a letter from the then Deputy Minister for Mental Health and Well-being was sent to the UK Government on 21 October 2021 “to confirm the position for Wales”.²⁶ Following the election of a new UK Government, the Bill was not progressed.

25. The Minister then explained:

“In relation to the Mental Health Bill 2025, the Minister for Patient Safety, Women’s Health and Mental Health wrote to the Minister for Mental Health and Well-being on 4 November 2024 informing the Welsh Government about the introduction to Parliament of the Mental Health Bill. The Minister for Mental Health and Well-being responded on 6 November confirming

²³ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to questions 2 and 3. Reference to the Royal College of Psychologists should be a reference to the Royal College of Psychiatrists

²⁴ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, responses to questions 2, 3 and 4

²⁵ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 4

²⁶ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, responses to questions 2 and 3

that a Legislative Consent Memorandum in respect of the Bill had been laid in the Senedd.”²⁷

26. We asked the Minister what evidence and/or data had been obtained from Welsh stakeholders or in relation to Welsh patients during the development of the Bill, and how this was reflected in the Bill. The Minister stated that:

“The previous UK Government had planned to introduce the Mental Health Bill to deliver the recommendations in the Wessely Review. A draft Bill was published and the Welsh Government worked with the UK Government to ensure that voices from Wales were heard as part of the consultation on the Bill – the consultation was publicised widely with stakeholders in Wales.

Consultation responses to the White Paper were received directly by the UK Government, but responses from Wales were shared with the Welsh Government so we could consider them in relation to devolved matters. We also convened a Reference Group representing key stakeholders in Wales to inform this process.

Although the original Bill did not progress – and there was frustration and disappointment at the time – we had good engagement with stakeholders in Wales through a public consultation who broadly welcomed the proposals. This is reflected in the Mental Health Bill 2025. Officials also meet routinely with stakeholders, service users and representatives of the third sector in Wales and discussions on the Bill have taken place in these meetings.”²⁸

27. When asked what her views were on a suggestion that the Welsh Government has piggybacked on a Bill that was designed for England, the Minister said:

“The draft Bill was based on the recommendations made by Sir Simon Wessely in the independent review of the Mental Health Act. Whilst the review was commissioned by the Department of

²⁷ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, responses to questions 2 and 3

²⁸ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 5

Health and Social Care in England, the findings are applicable to Wales. The Welsh Government also had representation on the advisory panel which was convened to gather evidence and insight throughout the course of the review.

The Bill also reflects practice we have led in Wales through our Mental Health (Wales) Measure, for instance statutory care and treatment planning and extending mental health advocacy.

(...) the Welsh Government has been engaged fully with the Bill since the publication of the White Paper. The official level response to the White Paper was based on views from stakeholders in Wales so we have had the opportunity to inform the draft Bill as it progresses.”²⁹

28. The Minister added:

“Welsh Government officials continue to meet on a weekly basis with UK Government officials and (...) we are working collaboratively on the Bill.”³⁰

29. We asked the Minister what consideration the Welsh Government had given to legislating in parallel to the UK Government through a Bill introduced to the Senedd, to reduce the risk of divergence between services available in Wales and England. In her response, the Minister said:

“... the views of stakeholders in Wales have informed the Bill through a public consultation on the White Paper. Whilst this Bill has regard to devolved matters, it also makes provision relating to reserved matters. For that reason, I consider legislating through a UK Bill to offer the most coherent approach to the provisions delivered in this legislation, particularly given the cross-border operation of the Mental Health Act 1983.”³¹

²⁹ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 7

³⁰ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 7

³¹ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 8

30. When asked to set out the balance between reserved and matters devolved matters in the Bill and the interrelationship between those matters, the Minister told us:

“The balance between reserved matters and devolved matters in this Bill is fairly equal as reflected in the number of clauses included in the LCM. In many of the clauses, the interrelationship between reserved matters and devolved matters is closely intertwined; for example, clause 34 (transfers from prison to hospital: conditions) and clause 35 (transfers from prison to hospital: time limits).”³²

Specific clauses

31. We also asked the Minister questions about specific clauses in the Bill.

32. We asked the Minister why the Welsh Government does not believe that consent is required in respect of clauses 9, 33, 47 and 48, particularly given that the Welsh Government believes that consent is required for other provisions of a similar nature, such as clauses 34 and 35 (relating to transfers of prisoners). In response, the Minister stated that the Welsh Government does not consider that consent is required in respect of those clauses as “they do not have regard to devolved matters.”³³

33. New Clause 52 (as referred to in Memorandum No. 2) provides the Welsh Ministers with powers, equivalent to those provided to the Secretary of State in clause 51, to make consequential provision to amend primary legislation in relation to Welsh devolved areas.

34. The Minister told us that:

“The UK Government has confirmed its intention to table a further amendment to clauses 51 and 51A (previously understood to be new clause 52) shortly. This further proposed amendment will amend the procedure attached to regulations made. The Welsh Government is supportive of this proposal. Welsh Government understand that the amendment will provide that regulations made under the consequential

³² Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 9

³³ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to question 10

amendment powers in the Bill that amend or repeal provision made by primary legislation are subject to the affirmative resolution procedure, with any other regulations made under the consequential amendment powers in the Bill (for example, to amend or revoke subordinate legislation) being subject to the negative resolution procedure.”³⁴

35. Clause 53(3) provides that many provisions in the Bill will not come into force until regulations are made to that effect by the Secretary of State.

36. When asked why there are no commencement powers for the Welsh Ministers, and why the Welsh Government was not seeking consent in relation to clause 53, the Minister said:

“No consent has been sought in relation to clause 53 as this is a technical provision clarifying commencement of the Bill rather than a substantive provision. The commencement provision ensures that policy objectives under the Bill can be implemented by the UK Government. This avoids potential complexity and impracticality that may arise if separate commencement provisions were included in the Bill in relation to Wales, which does not appear necessary within the context of this Bill.

My officials continue to meet on a weekly basis with UK Government officials and have developed effective and collaborative working relationships. This will ensure that provisions are commenced at an appropriate time.”³⁵

2. Committee consideration

37. We discussed our report at our meeting on 24 March 2025³⁶ and agreed it on 31 March 2025³⁷.

³⁴ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025, response to Question 12

³⁵ Letter from the Minister for Mental Health and Wellbeing, 28 February 2025

³⁶ [Legislation, Justice and Constitution Committee](#), 24 March 2025

³⁷ [Legislation, Justice and Constitution Committee](#), 31 March 2025

Our view

38. We note the Welsh Government's assessment of the provisions within the Bill that require the consent of the Senedd, as set out in the Memorandum and Memorandum No. 2.

39. We also note the position of the UK Government as regards consent.

Conclusion 1. Subject to recommendations 2 and 7, we agree with the Welsh Government's assessments, as set out in the Memorandum and Memorandum No. 2, of the provisions within the Bill which require the consent of the Senedd in accordance with Standing Order 29.

40. However, it is unclear to us – based on the information provided in the memoranda – why the Welsh Government does not believe that consent is required in respect of clauses 9, 33, 47 and 48, particularly given that the Welsh Government believes that consent is required for other provisions of a similar nature, such as clauses 34 and 35 (relating to transfers of prisoners).

41. When asked to provide further clarity on this matter, we note that the Minister stated that the Welsh Government does not consider that consent is required in respect of those clauses as “they do not have regard to devolved matters”.

42. While we acknowledge the Minister's response, we do not believe it provides sufficient clarity on the Welsh Government's reasons for why – in its view – the Senedd's consent is not required in respect of clauses 9, 33, 47 and 48 of the Bill.

43. We therefore believe that the Minister should provide a fuller explanation for why the Welsh Government has reached its view.

Recommendation 1. The Welsh Government should provide more detailed information outlining why it believes the consent of the Senedd is not required for clauses 9, 33, 47 and 48 of the Bill as introduced.

44. Nevertheless, in our view, consent should be required for those provisions because the provisions still have regard to the devolved matter of public health in Wales; it is simply that the patients are within the criminal justice system.

Recommendation 2. The Welsh Government should seek the Senedd's consent for clauses 9, 33, 47 and 48 of the Bill as introduced.

45. We have raised our concerns frequently about the Welsh Government using UK Government Bills to legislate in devolved areas, rather than introducing Bills to the Senedd, and commented on the emergence of a democratic deficit as a result.³⁸ We consider that the use of the Bill to make provision in the area of mental health, a devolved policy area, contributes to that unwelcome deficit.

46. We note the Minister's comments in relation to the approach to consultation on the Bill, and how responses from Wales were shared with the Welsh Government so that it could consider them in relation to devolved matters.

47. We consider this approach to be sub-optimal, not least because the governance of the process is not being directly controlled by the Welsh Government, the situation that you would expect in circumstances where a Bill is to be introduced to the Senedd.

48. It is also unclear to us how consultation with Welsh stakeholders has influenced the Bill and, in particular, how specific Welsh concerns have been taken into account.

49. We note the Minister's comments that the Welsh Government has been "engaged fully with the Bill since the publication of the White Paper", which was published in January 2021³⁹, and that there has been "close collaboration" between Welsh Government officials and UK Government officials to develop provisions in the Bill from the outset, including weekly meetings.

Recommendation 3. The Minister should explain what consideration the Welsh Government gave to keeping the Senedd updated on the work it was undertaking in relation to the Bill, between publication of the UK Government's White Paper and the introduction of the Welsh Government's Legislative Consent Memorandum.

50. We note the Minister's comments in relation to the Welsh Government's consideration of legislating in parallel with the UK Government through a Bill introduced to the Senedd.

51. We also note the Minister's comments that there is a significant amount of cross-border provision of mental health services between Wales and England,

³⁸ See for example the Legislation, Justice and Constitution Committee's [Annual Report 2023/24](#), November 2024

³⁹ UK Government, [Reforming the Mental Health Act](#), January 2021

and that not taking provisions in this Bill risks increasing divergence between services available in the two countries.

52. We do not find the Minister's arguments persuasive. We believe it should be possible for the Welsh and UK Governments to devise and propose legislative solutions through appropriate intergovernmental working and mechanisms, to mitigate any perceived risks of divergence.

53. As such, we consider that it should have been possible for the Welsh Government to use a Bill introduced to the Senedd to achieve the same objectives that the UK Government Bill aims to deliver, particularly in light of the policy development work undertaken by the Welsh Government in relation to mental health and the level of consultation which has taken place between the Welsh Government and stakeholders in Wales.

54. In our view, given that many of the issues in the Bill are within the legislative competence of the Senedd, the Welsh Government's approach has the effect of sidelining the Senedd as a legislature, and prevents elected Members of the Senedd from having an opportunity to scrutinise legislation and seek changes, often based on issues raised by, and the experiences of, their constituents. We have highlighted this issue repeatedly and in recent reports.⁴⁰

55. We also note that the Senedd has passed significant mental health legislation in Wales, such as the *Mental Health (Wales) Measure 2010*.

56. The Minister told us that the Welsh Government is willing to work with the UK Government and is "committed to achieving outcomes where they are in the best interest of Wales whilst respecting devolution".

57. We consider that the way to achieve outcomes that are in the best interest of Wales is to legislate by means of a Welsh Government Bill in the Senedd.

58. We consider that the Welsh Government has piggybacked on legislation designed for England and it is unclear to us how this approach respects devolution.

59. It would appear that the Welsh Government has been working with the UK Government on the Bill for at least four years, and we believe this indicates that

⁴⁰ Legislation, Justice and Constitution Committee, Annual Report 2023/24, November 2024; Legislation, Justice and Constitution Committee, [The Welsh Government's Legislative Consent Memorandum on the Renters' Rights Bill](#), January 2025; Legislation, Justice and Constitution Committee, [The Welsh Government's Legislative Consent Memoranda on the Water \(Special Measures\) Bill](#), January 2025

the Welsh Government has had the capacity and time to develop its own Bill for introduction to the Senedd.

Recommendation 4. Given that that the Welsh Government appears to have been working with the UK Government on the Bill for at least four years, the Minister should explain why it has not been possible to introduce a Bill into the Senedd for scrutiny.

Recommendation 5. The Minister should explain how her approach of using a UK Government Bill to legislate in relation to mental health respects devolution.

60. We note the Minister's comments that, in many of the clauses in the Bill, the interrelationship between reserved matters and devolved matters is closely intertwined; for example, clause 34 (transfers from prison to hospital: conditions) and clause 35 (transfers from prison to hospital: time limits).

Recommendation 6. The Minister should list all the clauses in the Bill where the interrelationship between reserved matters and devolved matters is closely intertwined and explain that relationship in each case.

61. We note the Minister's confirmation that the UK Government intends to table further amendments to clauses 51 and 51A (which was referred to as new clause 52 in Memorandum No. 2), which will provide that regulations made under the consequential amendment powers in the Bill that amend or repeal provision made by primary legislation are subject to the affirmative resolution procedure, with any other regulations made under the consequential amendment powers in the Bill being subject to the negative resolution procedure.

62. We note the Minister's comments in relation to why the Welsh Government is not seeking the Senedd's consent to clause 53.

63. We also note the Minister's comments that the current commencement provisions in the Bill "avoid potential complexity and impracticality that may arise if separate commencement provisions were included in the Bill in relation to Wales", and that the collaboration between her officials and UK Government officials will ensure that provisions are commenced at an "appropriate" time.

64. However, we consider that the Senedd's consent for clause 53 is required as the commencement of provisions within a devolved policy area (which require consent) meets the test in Standing Order 29.1 of having regard to devolved matters.

65. We also believe it would be appropriate and sensible for clause 53 to provide the Minister with powers to commence the provisions, to ensure that a future Welsh Minister, the NHS in Wales and other connected stakeholders are ready to implement these changes at a time appropriate for Wales.

Recommendation 7. The Welsh Government should seek the Senedd's consent for clause 53 of the Bill as introduced.

Recommendation 8. The Welsh Government should make representations to the UK Government to seek the Bill's amendment for the purposes of including commencement powers for the Welsh Ministers.

66. We make the following overall conclusions.

Conclusion 2. Primary legislation on public health within the legislative competence of the Senedd should (except in exceptional circumstances such as an emergency) be in the form of Welsh Government Bills and the Welsh Government should not rely on UK Government Bills to deliver policy outcomes that it considers to be desirable.

Conclusion 3. We consider that the Welsh Government's decision to use a UK Government Bill to legislate for Wales in relation to mental health, which excludes the Senedd as a legislature and from engaging with stakeholders in Wales, undermines devolution.