

Please keep your contributions as **brief and succinct as possible**, capturing headline information only on no more than three sides. An opportunity to provide a full assessment for your policy area will follow. If you can see challenges overlapping with other policy areas please flag these up.

Cabinet Minister Subject Area:

Portfolio Co-ordinator Contact:

Subject Area Contact:

Policy or operational area/dossier:	
1. Headline outcomes sought	<i>Effective movement of mentally ill patients across EU boundaries and effective care for British residents who become mentally ill whilst in Europe.</i>
2. Red line issues and top priorities	<i>[What are your key issues or red lines and why?]</i>
3. Current international and EU legislative base (summary)	<ul style="list-style-type: none"> • The Mental Health Act 1983 includes provision for the removal of detained patients who are neither British citizens nor have commensurate rights through the Commonwealth to be moved from hospitals in Wales to countries abroad, (section 86).Removals require authorisation of the Secretary of State or the Welsh Ministers and "proper arrangements" being made for their conveyance and subsequent care or treatment on arrival. It is also necessary that such a removal is in the interests of the patient. Any reduction in co-operation between nations and limits on free movement of people within the EU may make it more difficult to remove patients during admission. • the Mental Health Act Code of Practice for Wales states: <ul style="list-style-type: none"> ○ 40.25 Hospital managers must ensure they fulfil the terms specified in the European directive on minimum standards on rights, support and protection of victims of crime in any of

	<p>their interactions with victims of Part 3 patients¹.</p> <ul style="list-style-type: none"> Welsh patients have access to healthcare by virtue of the European Health Insurance Card ('EHIC'). Though the EHIC scheme relates to European Economic Area not EU membership, there will need to be clarity as to the access British psychiatric patients would have to psychiatric care (medication, therapies or admission) in other European countries were EHIC not to be available
4. Key issues for domestic legislation post-Brexit.	<i>Limited this is a relatively infrequent ,but regular occurrence and impacts on E&W</i>
5. Key devolution considerations	<i>Currently and E& W power, but as health policies diverge there may be more argument for welsch powers as this is a ahealth and social care matter [al risks associated with regulatory issues or cross-border issues or the level of implementation challenge involved?]</i>
6. Sector/area vulnerability and/or potential	<i>[What are the Risks and Opportunities e.g. financial, regulatory, social, community, institutional impacts or perceived impacts?] [Are there knock-on effects for other sectors and policy/delivery areas? – for housing, poverty programmes?]</i>
7. Other critical considerations	<i>[Any other key issues which would be of significance in our negotiations with the UK Government]</i>
8. Key public messages	<i>[Lines to take, including key points to help push for the inclusion of our “asks”. Please make reference to existing FM and Ministerial lines where relevant.]</i>

¹ European directive 2012/29/EU establishes minimum standards on the rights, support and protection of victims of crime. Article 6 in particular aims to ensure victims are provided with certain information in regard to an offender's release or escape from detention.
http://ec.europa.eu/justice/criminal/files/victims/guidance_victims_rights_directive_en.pdf

All contributions must be sent to (Information redacted section 40) by 18:00 22 July 2016

Lead Director:

Author:

Date:

For any further advice or assistance, please contact either of the following EU Policy contacts:

(Information redacted section 40)