

ASW Leads Network, 5th National Conference

Developing effective support and
monitoring of the AMHP function

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NIMHE National lead for legislation

Thursday 10 July 2008

Workshop agenda

- Governance issues
- LSSA responsibilities
- Monitoring the AMHP function
- Intelligent information
- ADSS guidance
- Support from NIMHE
- Next steps - Developing best practice

Governance issues

5 Guiding Principles inform decisions:

- **Purpose** : Minimise undesirable effects of mental disorder/maximise safety and wellbeing (mental and physical of patients, promoting recovery and protecting other people)
- **Least restrictive alternative** : minimise restrictions on actions taken without patients consent, having regard to purpose for which restrictions are imposed
- **Respect** : recognise diverse needs, values and circumstances; patients views wishes and feelings. Non discrimination.
- **Participation** : patient involvement in care planning; views of significant others and carers
- **Effective, efficient equitable** : use of resources

(“ ...balanced in different ways according to particular circumstances of each individual decision.”)



LSSA – duties

- To approve AMHPs
- To ensure that there are a sufficient number of AMHPs to meet local needs
- To ensure professional competencies of AMHPS
- To end approval if necessary
- To ensure AMHPs meet 18 hours of annual mandatory training

LSSA – AMHP Approvals



- Evidence that AMHP has completed an approved training course
- Evidence of competencies (case presentation)
- Assessment by supervisor
- Evidence from senior manager that competencies are met
- Policies which provide help support to different professions
- Access to advice from experienced AMHP

Governance

Governance 'to dos'

– the partnership agenda

- Design a joint commissioning framework which reflects HC monitoring and quality standards
- Integrate this framework into Local Development Plans (LDPs)
- Develop role specifications and descriptions of how responsibilities will be carried out
- Develop service and role development to deliver MHA duties

Governance arrangements for AMHPs – ‘must dos’

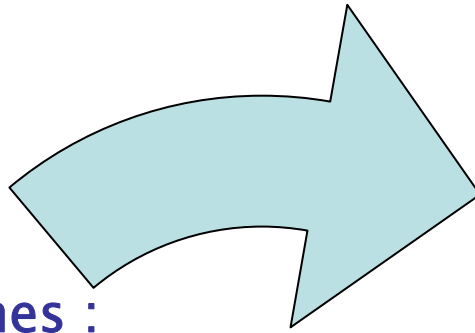
- LSSA – statement of legal indemnity whilst working in AMHP role
- Ensuring that AMHPs are aware of how to access legal advice
- Ensuring clarity of LSSA expectations of AMHP role e.g. quality and standards for post assessment reports, attendance at training

Monitoring of the AMHP function

NHS/LSSA data sharing agreements

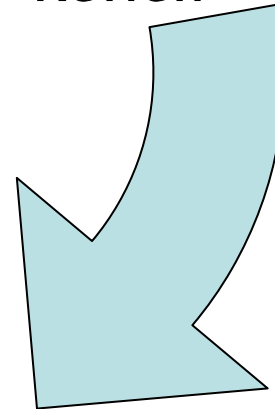
- Agreement on routes of reporting
- Speed of notification for different levels of incident
- Clarity over responsibility for investigating incidents
- Clarity over complaints procedure

**“Intelligent information”
for
Public Boards, Elected
members, Scrutiny**

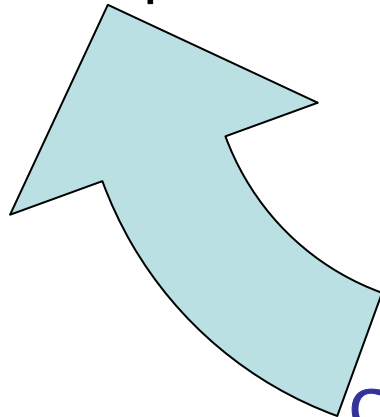


Board Action

- Set course of Action
- Allocate resources
- Monitor
- Involve Users, carers, staff
- Build public confidence
- Review



Collection of MHA data



Analysis –Trends –Outcomes :

- Purpose ?
- Least restrictive alternative ?
- Respect ?
- Participation ?
- Effective, efficient equitable ?

Dialogue with staff, users and carers



"The more people are involved in decisions, the more likely you are to get them right."

Stuart Ayriss, staff nurse, Essex



- Discuss new roles with staff from different professions
- Identify support needed to take on new statutory duty
- Training Plan
- Agenda with staff side



Advice for ADASS members June 2008

LSSAs and the AMHP Role

Advice for ADASS members :

- **The New Role**
- **Local Social Services Authorities Responsibilities**
- **S75 Agreements**
- **Individual contracts with AMHP's**
- **Responsibilities for the AMHP service within LSSAs.**

Support from NIMHE

Support from NIMHE



- Your regional lead
- Local Implementation Network
- ISAT : Implementation self assessment tool
(with Healthcare Commission & MHAC)
- ‘New ways of working with the MHA’ Guidance
(with NHS Confederation, ADSS, SHAs and NWW Team)
- Implementation micro site

Go!

Implementing the amended Mental Health Act 1983

This is the microsite for [CSIP/NIMHE](#)'s implementation programme for the forthcoming changes to the Mental Health Act 1983 in England.

We have been tasked by the [Department of Health](#) to have a key role in:

- informing those involved in mental health care of the proposed changes and the impact they may have
- supporting implementation by service providers, directly and by signposting sources of information
- and providing opportunities to influence national policy

The **Mental Health Act 2007** received Royal Assent on 19 July 2007 and can be downloaded [here](#). The current intention is to implement the main body of its provisions in October 2008 (see the [Commencement Plan](#)).

This site is building into an invaluable portal for everyone involved in implementing the amendments. Please check back regularly for updates and new resources. If you have feedback about the site, please contact the Editor, [Mark Drury](#).

[NEW - Children & Young People!](#)

[Commencement Plan](#)

An indicative list of dates for the rollout of the various provisions of the 2007 Act has now been made available.



[Summary of the Amendments](#)

Find out more about the main changes to the 1983 Mental Health Act made by the 2007 Act.



[Implementation Self Assessment Tool \(ISAT\)](#)

ISAT - a unique tool for service providers and commissioners to check their progress in implementing the Act.



Thank you

Jim Symington

National Institute for
Mental Health in England

(part of the Care Services Improvement Partnership)

Implementation website :

<http://mhact.csip.org.uk>

Next steps –
Developing best practice...

