

Approved Mental Health Professional (AMHP) - Approval and Reapproval Policy

Solihull Adult Care & Support



Solihull
METROPOLITAN
BOROUGH COUNCIL

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1. Purpose

- 1.1. This policy guides the approval and reapproval of Approved Mental Health Professionals (AMHPs) under the Mental Health Act 1983, as amended in 2007 (MHA).

AMHPs are essential to the application of the MHA, and Local Social Services Authorities (LSSAs) have a duty (s114) to approve 'sufficient' AMHPs to provide cover 24 hours a day, 7 days a week, a duty that cannot be delegated.

These procedures support SMBC's approval and reapproval of AMHPs to practice within the boundaries of Solihull and outside of Solihull on occasions where this is appropriate e.g. out of area assessments. The appointment of temporary and/or locum AMHPs is included in this document.

- 1.2. This policy supports SMBC's corporate objectives of building strong and safe communities and improving services, in this case through the provision of a high quality service to people who require support or intervention under the MHA and their carers.
- 1.3. The policy includes systems to ensure that all SMBC Approved Mental Health Professionals are effectively trained and supported in their professional practice including arrangements for consultation and guidance, professional support, continuous professional development and 5 yearly, reapproval.
- 1.4. These procedures support a robust approach to the approval, and reapproval of:
- Workers who have completed the AMHP training and are yet to be approved
 - New members of staff whose previous employer authorised them under s114.
 - Those whose approval is due for renewal on a five-year cycle.
 - Locum AMHPs acting on behalf of SMBC.

2. Legislative & Policy Framework

- 2.1. The following legislation and policy documents form the basis of this policy:

- a) Section 114, (1) of the Mental Health Act 1983, A local social services authority (LSSA) may approve a person to act as an approved mental health professional for the purposes of the Act’.
- b) D.H.S.S. Circular N. LAC (86) 15, approval and supervision arrangements.
- c) CCETSW Paper 19.19 “Requirements and Guidance for the Training of Social Workers to be considered for Approval in England and Wales under the Mental Health Act 1983” (revised ed. 1993).
- d) Mental Health Act 1983, as amended 2007.
- e) New Roles for Approving Authorities and Employers of Approved Mental Health Professionals and Approved Clinicians, MHA 1983, as amended 2007.

2.2. **Granting approval - Regulation 3**

An LSSA may only approve a person to act as an AMHP if it is satisfied that the person has appropriate competence in dealing with persons who are suffering from mental disorder. This will usually mean a Social Work, Nursing or Allied Health Professional qualification combined with a level of expertise and experience of assessment in the Mental Health system. SMBC employs social workers and Occupational Therapists as this also enables their contribution to meeting other statutory duties such as under the Care Act 2015.

- 2.3. Before an LSSA may approve a person who has not previously been approved , the person must have completed, within the preceding five years a course approved by the Health Care Professionals Council (HCPC), formerly the General Social Care Council (GSCC)
- 2.4. Approval of AMHPs Newly Acting on Behalf of SMBC, Including in Urgent Circumstances. Approval will be given for 3 months for AMHPs from other LSSAs, newly qualified AMHPs and agency workers. In relation to AMHPs from these groups, the AMHP Manager, MHT Manager and AMHP Training Officer will agree a plan for
 - induction;
 - supervision;
 - shadowing of autonomous practice; and
 - scrutiny of their AMHP Reports

Monthly supervision will take place for the first three months to ensure that the relevant evidence is gathered to demonstrate that the AMHP has met the five statutory competencies (Schedule 2). Following this, and subject to Steering Group approval, the usual conditions for approval, as outlined in this document, will then apply. If the AMHP has been unable to demonstrate their competence a decision will

be made by the AMHP Steering Group regarding the ways in which this might be addressed.

2.5. Period of Approval - Regulation 4

An LSSA may approve a person to act as an AMHP for a period of up to five years. It is expected this will form the majority of approvals. Shorter periods of one and three years may be chosen in exceptional circumstances and based on evidence presented to the Authoriser.

2.6. Conditions of Approval - Regulation 5

When approval is granted under Regulation 5, it will be subject to these statutory requirements:

- a) The AMHP shall complete at least 18 hours of training relevant to their role per annum.
- b) The AMHP shall undertake to notify in writing the approving LSSA as soon as reasonably practicable if they agree to act as an AMHP on behalf of another LSSA, and to notify in writing when this agreement ceases. The record of the AMHP's work with another LSSA can be used as evidence of meeting the required minimum levels of assessment
- c) The AMHP shall undertake to cease to act as an AMHP and to notify the approving LSSA immediately if they are suspended from any of the registers or listings referred to in the professional competencies, or if any such suspensions ends, and
- d) The AMHP shall undertake to cease to act as an AMHP and to notify the approving LSSA immediately if they no longer meet at least one of the professional requirements.

2.7. Suspension of Approval - Regulation 6

If at any time after being approved, the AMHP's HCPC registration or other professional requirements are suspended, the approving LSSA shall suspend the AMHP's approval for as long as their registration or listing is suspended.

Suspension may be due to sickness absence or maternity leave, or performance concerns. The suspension of approval will last until the AMHP is able, with the agreement of the Steering Group to return to their duties.

The Steering Group will take into account the individual circumstances and ensure that a plan is agreed for training, shadowing, supervision and so on.

2.8. End of Approval - Regulation 7

A person shall cease to be approved to act as an AMHP at the end of the day on which their period of approval expires.

2.9. The AMHP Steering Group may extend the period of approval for no more than 12 months in specific circumstances such as long-term sickness or other unpredictable barriers to the reapproval process. However, this will be subject to a clear plan by which the AMHP will be supervised and necessary evidence gathered as soon as this is possible.

2.10. The approving LSSA shall end the approval of a person it has approved to act as an AMHP before their period of approval expires if it evidences that that AMHP has failed to meet the required competencies and that management remedial action has failed to improve the AMHP practice. The LSSA will write to the AMHP within one week of the suspension of the warrant, setting out the reasons for suspension.

It will also notify other LSSA's if it is known that the AMHP is warranted in that locality. There will be a right of appeal to the Authorising Officer within one month of suspension.

3. Role of Approved Mental Health Professionals

3.1. The five statutory competencies in schedule 2 of the MHA 1983 (2008) sets out the values, experience and technical expertise required of AMHP's.

3.2. MHPs have a wider role than reacting to requests for compulsory admission to hospital, making arrangements and ensuring legal compliance. They have specialist knowledge and skills, and are a resource for making appropriate decisions in respect of both service users and their relatives and co-ordinating appropriate service responses. They should be familiar with the day-to-day working of integrated mental health services and able to assess what is required in each case and mobilise appropriate responses.

3.3. The AMHP role is to consider appropriate courses of actions and demonstrate consideration of the Guiding Principles within the Code of Practice, with particular emphasis on the '**least restrictive principle**'. This will require evidence of using risk assessment tools, a good understanding of local community resources, and a personalised approach that promotes co-production with users and carers.

3.4. The AMHP role is to provide an independent decision as to alternatives to detention (Code of Practice to MHA 14.52), and also to make application for admission, where appropriate (founded on appropriate medical recommendations as defined by S12).

- 3.5. When assessing an individual the AMHP has overall responsibility for co-ordinating the process and implementing any decision that is taken. They must identify themselves and explain in clear terms the AMHP role and purpose of the assessment.
- 3.6. The guiding principles, contained in the Code of Practice must be observed at all times during the assessment process.
- 3.7. The AMHP is required to complete the required documentation and ensure the AMHP report is uploaded onto Care First (SMBC data base). For those areas not able to gain access to Care First (e.g. EDT) the AMHPs will ensure a copy of the AMHP report is forwarded through to the Mental Health Act coordinator within Birmingham and Solihull Mental Health Foundation Trust (BSMHFT).
- 3.8. The AMHP is able to demonstrate independent practice at all times.

4. **AMHP Steering Group**

- 4.1. For the purpose of the approval and reapproval process, the AMHP Steering Group will be convened and chaired by the Head of Service for SMBC Adults Care and Support. Membership of the group will consist of a minimum of;
 - The Team Manager or delegated appropriate other to support the Chair and to assure that all training and supervision requirements have been met;
 - The AMHP Manager or delegated appropriate other
 - The AMHP Training officer
 - Such other persons as determined from time to timeA decision of the group can only be taken where the Chair and 2 members of the Steering Group are present for a quorate decision.
- 4.2. The Panel will sit quarterly as a minimum or may operate virtually when required.
- 4.3. Where there are concerns regarding a practising AMHP the AMHP Steering Group **may** be convened to consider suspension or termination of a current warrant.

5. **AMHP Approval/Reapproval Process**

- 5.1. The SMBC, AMHP Approval/Reapproval Process will ensure that AMHPs are supported and monitored throughout their practice, allowing both the AMHP and the Authority to identify any issues at an early stage.
- 5.2. Support and consultation is available from an AMHP manager from Monday to Friday during working hours and until the last daytime AMHP finishes for the

day. AMHPs co-operatively support each other both informally and through the monthly AMHP Development Forum.

- 5.3. AMHPs can access legal advice from the SMBC Legal Team, with the agreement of the AMHP manager, or in their absence, any member of the Steering Group.
- 5.4. Members of the SMBC Management Team will monitor Mental Health Act activity both statistically, and through supervision of AMHPs including scrutiny of written documentation. AMHP reports will be checked and signed off by the AMHP Managers during supervision.

Any issues arising will be discussed in supervision and a plan will be agreed with the AMHP. The Mental Health Team Manager and Workforce Development AMHP Lead will report any issues to the AMHP Steering Group.

- 5.5. Each AMHP will have a 4 monthly supervision session with an AMHP manager. This will provide support and consultation for the AMHP, and will also generate evidence of competence through an analysis of the AMHPs practice such as management of the assessment process; report writing; ethical and legal dilemmas; decision making and planning for outcomes including alternatives to use of the Mental Health Act.

Any additional learning or development needs can also be identified and planned for within this process. At the 4 year point, the AMHP and AMHP Manager will draw up a plan to ensure that all competences are evidenced within their portfolio for consideration by the AMHP Steering Group by the 5 year reapproval date.

5.6. **Each AMHP Reapproval Portfolio will include:**

- a. Evidence of successful completion of a recognised AMHP course with requisite evidence of attendance at post qualifying AMHP training up to the period of lapse.
- b. Evidence of achievement of the annual 18 hour training requirement, and participation in any other relevant education or training activity. AMHP managers will ensure that AMHPs are supported to access the time and necessary resources for agreed development opportunities.
- c. Evidence of supervision meetings outlined in 5.4.
- d. Reports produced by the AMHP demonstrating their range of practice under the Act. The portfolio will be built incrementally over the 5 years to provide evidence of competence.

- e. A report of an observation within year 4 by an AMHP manager/training lead.
- f. A list of AMHP Forums and the legal knowledge shared and tested within these sessions. Evidence of which of these sessions have been attended by the AMHP.

5.7. Reapproval of AMHP's whose approval has lapsed

The requirements for re-approving AMHPs whose approval has lapsed within the previous year will depend upon circumstances and will be determined by the AMHP Steering Group and other relevant parties.

This may include seeking the views of another LSSA in which the AMHP has practised in recent years. Each decision will be on a case by case basis including factors such as when the AMHP was last approved; current skills and knowledge, familiarity with local services and so on. In the event of a long gap since last period of practice, there may be a need for completion of part or all of an accredited AMHP course.

5.8. The AMHP and an AMHP manager will assemble a portfolio for the AMHP Steering Group including:

- Evidence of successful completion of a recognised AMHP course with requisite evidence of attendance at post qualifying AMHP training up to the period of lapse.
- A recommendation from an appropriate manager/supervising AMHP from within SMBC that they are acclimatised to local services and ready to be approved.
- A recommendation/reference statement from the last authority in which they were appointed to act as an AMHP (where appropriate).
- To have led 2 assessments within SMBC, evidenced by a competency statement from the AMHP and the observer.
- Evidence of at least one specific AMHP supervision session with the supervising AMHP or an AMHP manager following the 2 assessments (as previously outlined).

5.9. In the case of AMHPs not directly employed by the Mental Health Team (for example AMHPs within the Emergency Duty Team or other Specialist teams), each will again be dealt with on a case-by-case basis and the portfolio as outlined in 3.8 will be provided for consideration by the AMHP Steering Group.

6. Administrative

6.1. Records

SMBC will maintain a record of each AMHP it approves in accordance with statutory guidance. This record, which will contain information pertaining to all of the AMHPs practising in Solihull will be updated and maintained by the AMHP Training Officer and the AMHP Manager, and will be made available at each AMHP Steering Group. The information will include;

- a) Name
- b) Profession
- c) Date of approval
- d) Details of any period of suspension
- e) Details of the completion of training to comply with regulation 5 (a)
- f) Details of any previous approvals as an AMHP within the previous five years.
- g) Other LSSAs for whom the AMHP has agreed to act as an AMHP.
- h) The date and reason for the end of approval, if applicable.

6.2. Each AMHP is responsible for updating the contents of their portfolio, in conjunction with their AMHP supervisor. This will be checked as part of the 4 monthly supervision sessions.

6.3. Following the Steering Group decision regarding Approval or Reapproval, a letter signed by the Chair of the Steering Group, will be issued to the AMHP stating the dates the warrant commences and ceases, as per panel recommendations. This letter will state the obligations of SMBC and those of the AMHP and will constitute sufficient authority for the individual to work as an AMHP.

6.4. The AMHP is required to provide a digital photograph to the AMHP Manager for the purpose of a warrant card, and the AMHP Manager will request the production of the card within SMBC. Each AMHP is responsible for informing an AMHP Manager if they lose or lack an up to date Warrant Card.

6.5. On leaving SMBC the AMHP must return their warrant card on their last working day to an AMHP manager. Following receipt of the returned warrant the AMHP will be issued with a letter stating they were approved and practised as an AMHP during the period of employment to present to their new employer as appropriate.

6.6. On suspension or termination of a warrant the holder will be required to immediately submit their warrant card to the AMHP Manager.

7. Audit & Quality Assurance

- 7.1. AMHP portfolios will follow a standard format and guidance is provided in Appendices to this Policy. This maintains a consistent level of evidence in the approval and reapproval process, and demonstrates the competency base of the AMHP.
- 7.2. Learning from AMHP reports, AMHP supervisions, day to day management observations and the Steering Group will be communicated as appropriate, for example from the AMHP Forum, Mental Health Team Meeting, one to one supervisions or in a training format.

8. Complaints & Appeals

- 8.1. All AMHPs have a right to appeal regarding any outcomes carried out under this policy.
- 8.2. In the first instance, concerns should be raised with the AMHP Manager or the Mental Health Team Manager.
- 8.3. If this does not resolve the issue, or the AMHP feels it is inappropriate or detrimental to pursue this route then initial complaints/appeals should be addressed in writing to the Chair of the AMHP Steering Group, who is also the SMBC Mental Health Head of Service.

9. AMHP Management Arrangements

- 9.1. An AMHP Manager will be responsible during office hours for ensuring the efficient operation of the AMHP rota, service provision and for consultation in the execution of the role. The AMHP manager will be readily accessible via telephone.
- 9.2. The AMHP Manager will generally be an Assistant Team Manager from the Mental Health and Autism Team with a particular focus on the MHA. At other times the Mental Health Team Manager or other Assistant Team Managers who are AMHPs will cover the AMHP Manager role.
- 9.3. Out of hours, provision is via the Emergency Duty Team, for which there is a manager who sits on the AMHP Steering Group.

10. REVIEW ARRANGEMENTS

- 10.1. This policy will be reviewed by the AMHP Steering Group on an annual basis, or as the needs of the service dictate.

Appendix 1 AMHP Competencies

Schedule 2 of Code of Practice to Mental Health Act: Matters to be taken into account to determine competence.

Key Competence Area 1 Application of Values to the AMHP Role

Whether the applicant has:

- a) the ability to identify, challenge and, where possible, redress discrimination and inequality in all its forms in relation to AMHP practice;
- b) an understanding of and respect for individuals' qualities, abilities and diverse backgrounds, and is able to identify and counter any decision which may be based on unlawful discrimination;
- c) the ability to promote the rights, dignity and self-determination of patients consistent with their own needs and wishes, to enable them to contribute to the decisions made affecting their quality of life and liberty, and
- d) a sensitivity to individuals' needs for personal respect, confidentiality, choice, dignity and privacy while exercising the AMHP role

Key Competence Area 2 Application of Knowledge: The Legal and Policy Framework

Whether the applicant has:

- a) appropriate knowledge of and ability to apply in practice
 - i. (mental health legislation, related codes of practice and national and local policy guidance, and
 - ii. relevant parts of other legislation, codes of practice, national and local policy guidance, in particular the Children Act 1989(1), the Children Act 2004(2), the Human Rights Act 1998(3) and the Mental Capacity Act 2005(4); The Care Act 2014.
- b) a knowledge and understanding of the particular needs of children and young people and their families, and an ability to apply AMHP practice in the context of those particular needs;
- c) an understanding of, and sensitivity to, race and culture in the application of knowledge of mental health legislation;
- d) an explicit awareness of the legal position and accountability of AMHPs in relation to the Act, any employing organisation and the authority on whose behalf they are acting;

- e) the ability to evaluate:
 - i. critically local and national policy to inform AMHP practice.
 - ii. base AMHP practice on a critical evaluation of a range of research relevant to evidence-based practice, including that on the impact on persons who experience discrimination because of mental health.
 - iii. practice independently which is particularly pertinent to mental health nurse qualified AMHP's who may be working on a MHA assessment with Medical Assessors that could be their manager.

Key Competence Area 3 Application of Knowledge: Mental Disorder

Whether the applicant has a critical understanding of, and is able to apply in practice:

- a) a range of models of mental disorder, including the contribution of social, physical and development factors;
- b) the social perspective on mental disorder and mental health needs, in working with patients, their relatives, carers and other professionals;
- c) the implications of mental disorder for patients, their relatives and carers, and
- d) the implications of a range of treatments and interventions for patients, their relatives and carers.

Key Competence Area 4 Application of Skills: Working in Partnership

Whether the applicant has the ability to:

- a) Articulate, and demonstrate in practice, the social perspective on mental disorder and mental health needs.
- b) Communicate appropriately with and establish effective relationships with patients, relatives, and carers in undertaking the AMHP role.
- c) Articulate the role of the AMHP in the course of contributing to effective inter-agency and inter-professional working.
- d) Use networks and community groups to influence collaborative working with a range of individuals, agencies and advocates.
- e) Consider the feasibility of and contribute effectively to planning and implementing options for care such as alternatives to compulsory admission, discharge and aftercare.
- f) Recognise, assess and manage risk effectively in the context of the AMHP role.
- g) Effectively manage difficult situations of anxiety, risk and conflict, and an understanding of how this affects the AMHP and other people concerned with the patient's care.

- h) Discharge the AMHP role in such a way as to empower the patient as much as practicable.
- i) Plan, negotiate and manage compulsory admission to hospital or arrangements for supervised community treatment.
- j) Manage and co-ordinate effectively the relevant legal and practical processes including the involvement of other professionals as well as patients, relatives and carers.
- k) Balance and manage the competing requirements of confidentiality and effective information sharing to the benefit of the patient and other persons concerned with the patient's care.

Key Competence Area 5 Application of Skills: Making and Communicating Informed Decisions

Whether the applicant has the ability to:

- a) Assert a social perspective and to make properly informed independent decisions.
- b) Obtain, analyse and share appropriate information having due regard to confidentiality in order to manage the decision-making process including decisions about supervised community treatment.
- c) Compile and complete statutory documentation, including an application for admission.
- d) Provide reasoned and clear verbal and written reports to promote effective, accountable and independent AMHP decision making.
- e) Present a case at a legal hearing.
- f) Exercise the appropriate use of independence, authority and autonomy and use it to inform their future practice as an AMHP, together with consultation and supervision.
- g) Evaluate the outcomes of interventions with patients, carers and others, including the identification of where a need has not been met.
- h) Make and communicate decisions that are sensitive to the needs of the individual patient.
- i) Keep appropriate records with an awareness of legal requirements with respect to record keeping and the use and transfer of information.

Appendix 2 Guidance on Acceptable Training and Professional Development

See Regulation 5A Mental Health (Approved Mental Health Professionals (Approval) (England) Regulations 2008 and came into force on 3rd November 2008.

All AMHPs are expected to make every effort to attend 2 AMHP training/development days per year as provided by Learning & Development Team.

Each training/development day will provide evidence of 6 hours towards the required minimum annual training requirement of 18 hours. However, if as a result of sickness, absence or any other exceptional circumstances the AMHP has been unable to attend these training days, it is recommended that a discussion between the AMHP and the AMHP Training Manager will guide the formulation of a plan to address the shortfall.

In addition to the above, each monthly AMHP Development session will include 1 hour of AMHP Development/Training activity which can also contribute to the annual 18 hours training.

Other relevant training can include conferences and workshops which address subjects relevant to the AMHP role such as Safeguarding, Mental Capacity Act and issues relating to specific service user groups and/or carers. The AMHP WFD Lead will advise on any queries regarding relevance of training to the AMHP role, and will maintain a record of each AMHP's training compliance.

Appendix 3 Content of the Portfolio

All SMBC portfolios will be set out in the following order:

1. Index.
2. A copy of original AMHP qualification or most recent letter of Approval/Authorisation
3. A copy of most recent HCPC certificate
4. CPD Log, including evidence of annual 18 hours.
5. Evidence of all AMHP supervision and any peer supervision or action learning sets.
6. Observed Practice Report
7. Copies of AMHP Reports with appropriate range to demonstrate AMHP competencies.
8. User/Carer feedback – this may be a letter of thanks, an email, comments recorded in notes and so on.
9. Other relevant information i.e. Tribunal Reports; Guardianship Reports; Testimonies from other professionals e.g. nursing, medical, police and so on.

NB: Only one piece of evidence is required for each competency, although others can be provided and cross-referenced.

Appendix 4. Approval Letter



ADULT CARE & SUPPORT DIRECTORATE

Manor Square, Council House

Solihull West Midlands B91 9QU

Tel: 0121 709 7043

Email:

www.solihull.gov.uk

Date

Dear

RE: APPROVED MENTAL HEALTH PROFESSIONAL MENTAL HEALTH ACT 1983, SECTION 114.

I am pleased to confirm that you have successfully met the training and portfolio elements of the SMBC AMHP Reapproval Process (see SMBC Approval and Reapproval Policy). The SMBC AMHP Steering Group is satisfied that you have shown an appropriate level of competence to continue to carry out the required duties under the Act on behalf of SMBC.

Your approval is for a period of XX commencing from the date on this letter and expires on xx.

You will be provided with support and opportunities to maintain your competence. It is important that you make the AMHP Manager aware if you have any difficulties which impact upon your ability to carry out the role so that a plan can be agreed to support you.

Your AMHP approval is subject to the following conditions:

- 1) You shall complete at least 18 hours training relevant to the AMHP role in each year of approval – the training agreed by AMHP Training Co-ordinator.
- 2) You shall notify the Mental Health and Autism Team Manager for Solihull MBC if you agree to act on behalf of another LA and when that authorisation ends.

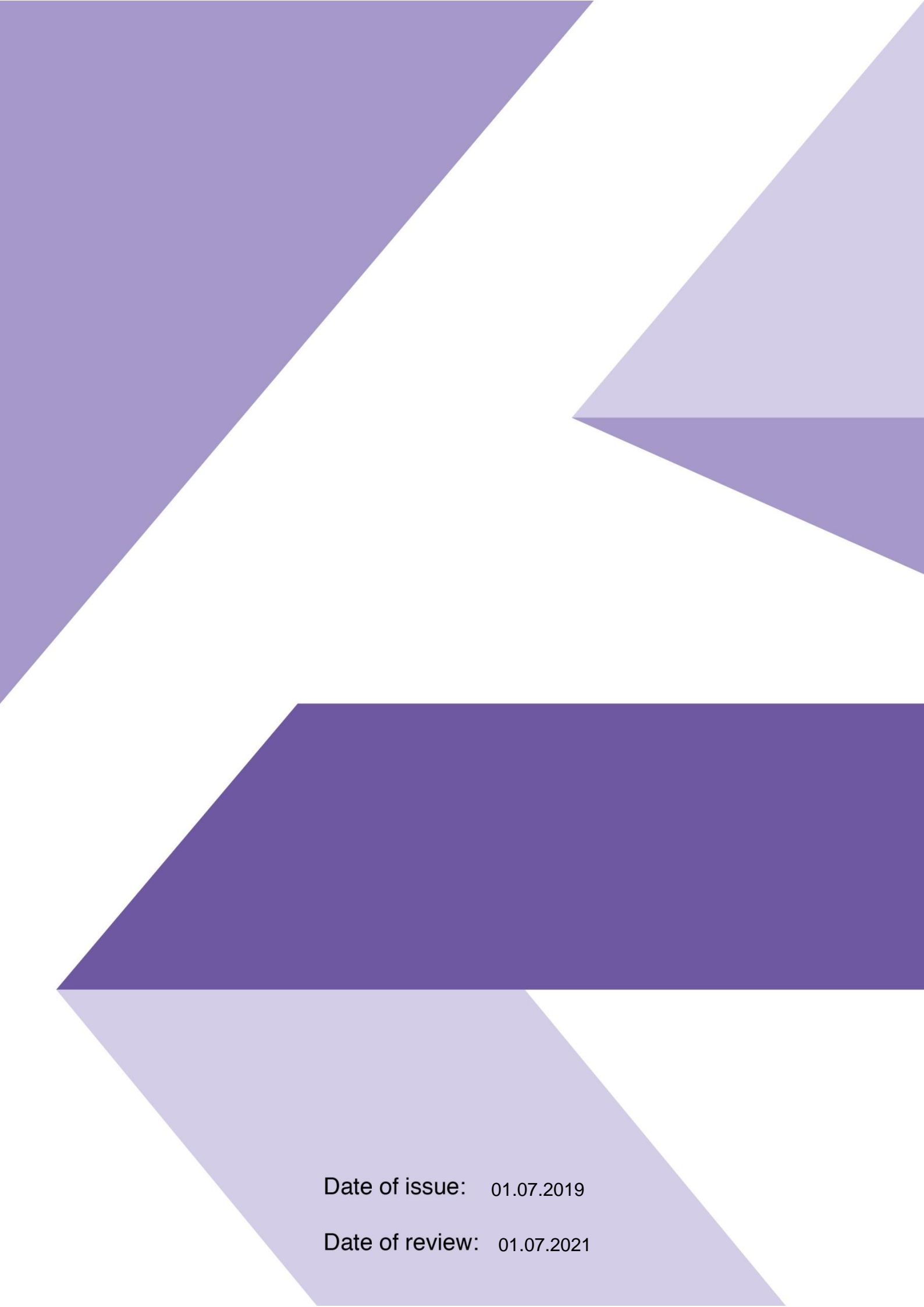
3) You shall cease to act as an AMHP, and notify the Mental Health and Autism Team Manager for Solihull MBC if you are suspended by your professional body;
And

4) You shall stop acting as AMHP, if you or the authority considers that you no longer meet the professional requirements (schedule 1, AMHP Regulations).

You should retain this letter for the purposes of confirmation and a copy of it should be held within your AMHP Portfolio. Please ensure that you seek an up to date warrant card from the AMHP manager.

Yours sincerely,

Head of Service



Date of issue: 01.07.2019

Date of review: 01.07.2021