## Procedures relating to the role of Approved Mental Health Professional in West Berkshire Council

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## **Change History**

Version	Date	Description	Change ID
1.0	24/07/2013	First version of newly created Procedure for the Approval of Mental Health Professionals to undertake Duties under the Mental Health Act 1983.	
2.0	20/09/2017	Revision of existing procedure	

#### **Related Documents**

Reference	Title	Tier



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#### 1. Introduction

- 1.1. All Approved Mental Health Professionals (AMHPs) must be a member of one of the following professional groups who have successfully undertaken an approved post-qualifying AMHP training programme
  - a social work practitioner registered with the Health and Care Professions Council.
  - a first level nurse, registered in Sub-Part 1 of the Nurses' Part of the Register maintained under article 5 of the Nursing and Midwifery Order 2001, with the inclusion of an entry indicating their field of practice is mental health or learning disabilities
  - an occupational therapist registered in Part 6 of the Register maintained under article 5 of the Health Professions Order 2001; or
  - a chartered psychologist who is listed in the British Psychological Society's Register of Chartered Psychologists and who holds a relevant practising certificate issued by that Society
- 1.2. AMHPs have unique power and responsibilities under Mental Health Act 1983 (MHA) and it is essential that these powers and responsibilities be exercised competently. The aim of this policy is to ensure consistency, good practice and high standards in AMHP work in West Berkshire.
- 1.3. AMHPs will take responsibility for identifying their learning needs and making use of opportunities for meeting those needs. The approving Local Social Services Authority (LSSA) is responsible for providing the opportunities for AMHPs to develop and maintain competence through:
  - Refresher AMHP training courses provided by Thames Valley Consortium
  - Regular AMHP meetings, offering group supervision, policy and practice updates
  - Informal ad-hoc peer support and 1:1 AMHP supervision

#### 2. Maintaining and Developing Competence

#### 2.1. Refresher Training

- 2.1.1. A minimum of 18 hours mandatory refresher training every year will be provided. It is a legal requirement that AMHPs attend the designated AMHP refresher training days and this will link with the re-approval process. If an AMHP does not complete the required 18 hours of refresher training within a 12 month period it will be the responsibility of the AMHP Lead to determine how the training deficit should be addressed in order for the AMHP to continue practising.
- 2.1.2. The content of refresher training will include two annual legal update training days and additional subject specific options to select from. An AMHP is required to attend the two legal update days unless for practical reasons this is not possible. In this situation the AMHP will need to make up their 18 hours annual training through other AMHP related training courses.
- 2.1.3. Formal refresher training is an important means by which AMHPs maintain and develop their competence, although not the only means. Also important are opportunities such as in-house information sessions and the dissemination of written material on policy, law and research. The AMHP lead is responsible for circulating any practice and policy updates to the rest of the AMHP team.

#### 2.2. Group and Individual Supervision

- 2.2.1. Regular group supervision will be available to all AMHPs via AMHP meetings held once a month, to fulfil the following functions:
  - Accountability and feedback
  - Focused reflection and critical analysis
  - o De-briefing
  - Guidance and advice regarding practice and procedures
  - o Identification of training needs
- 2.2.2. In addition to group supervision, AMHPs should also be able to debrief, share experiences, or seek advice from their line manager or AMHP Lead at any point in the course of their practice. An AMHP on duty will have telephone access for support via the AMHP Lead or another manager.
- 2.2.3. AMHPs will have 1:1 AMHP supervision with their line manager. This supervision will focus on each of their MHA assessments and any issues relating to practicing as an AMHP. The purpose of these sessions will be to:
  - Provide support
  - Ensure good quality AMHP practice
  - Enable critically reflective practice
  - Support good quality report writing and ensure adherence to legal and policy requirements
  - Identify training needs in relation to AMHP work

#### 2.3. Conditions of approval

- 2.3.1. Approval as an AMHP is subject to the following statutory conditions:
  - In each year the AMHP is approved they must complete at least 18 hours of training agreed with West Berkshire Council as being relevant to their role as an AMHP
  - It is permissible under the MHA 1983 that an AMHP can be authorised to act as an AMHP on behalf of another LSSA. It is necessary for any AMHP approved by WBC to inform the AMHP Lead immediately if they become authorised to act as an AMHP on behalf of another LSSA. When undertaking AMHP work on behalf of another LSSA it is the responsibility of that LSSA to provide supervision, managerial and legal support.
  - AMHPs cannot be approved by two LSSAs. If an AMHP approved by WBC subsequently becomes approved by another LSSA, their AMHP warrant with WBC will need to be rescinded.
  - the AMHP shall cease to act as an AMHP and notify WBC immediately if they are suspended from any of the registers or listings referred to in the professional competencies (section 1.1 above), or if any such suspension ends, and
  - the AMHP shall cease to act as an AMHP and to notify the AMHP Lead immediately if they no longer meet at least one of the professional requirements
  - WBC reserves the right to rescind or suspend AMHP approval if it no longer feels the AMHP is competent to act as such, or a serious adverse incident occurs which requires investigation.
- 2.3.2. It is essential that AMHPs maintain a minimum level of practice. WBC requires that AMHPs conduct a minimum of five assessments under the Mental Health Act 1983 per year. If this is not achieved, due to long term sickness or maternity leave for example, it will be the responsibility of the AMHP Lead to determine if the AMHP needs to undertake further shadowing experiences prior to acting independently.

Failure to meet the required minimum level of practice may result in suspension of the AMHP warrant whilst a course of action is established in conjunction with the Service Manager.

#### 3. Preparation for AMHP training

3.1. The preparation pathway begins long before the candidate applies for the formal AMHP training. WBC is responsible for providing the opportunities and support required to enable AMHP trainees to gain a sufficient level of pre-course experience.

#### **3.2. Entry Requirements**

- 3.2.1. The formal AMHP training lasts approximately 6 months and the trainee will not be expected to undertake their normal duties during this time. The course is at Masters level and is academically demanding, applicants must demonstrate they are able to undertake learning at this level. AMHP trainee placements can occur within the WBC Specialist Mental Health Team or may occur in another local authority, whichever is most appropriate for the individual trainee.
- 3.2.2. WBC solely uses Bournemouth University to provide AMHP training. The University requires that applicants hold one of the following qualifications:

GCPP – Graduate Certificate in Professional Practice in mental health DSPP- Developing Specialist Professional Practice in mental health The Bournemouth University Best Interests Assessor Unit CPSP – Consolidation and Preparation for Specialist Practice in Mental Health PQ1 in Mental Health

- 3.2.3. Bournemouth University also requires that applicants have shadowed a minimum of 4 Mental Health Act assessments prior to starting the course.
- 3.2.4. Ideally trainees will have a minimum of 2 years experience working in a mental health setting. For any applicants coming from outside of mainstream mental health, additional attention will need to be given to ensuring they are sufficiently prepared for the training, with particular focus on:
  - Demonstrating a service user focus and a strong value base, including a sensitive approach, the ability to listen to service users and carers and appreciate their feelings and wishes.
  - Demonstrating understanding of the impact of mental disorder on service users / carers.
  - Demonstrating critical understanding and application of a range of models and in particular the social model of mental disorder.
  - Demonstrating a general understanding around mental disorder signs, symptoms, treatments, professional roles etc.
  - Demonstrating a suitable knowledge base of the legal and policy context for mental health practice.

#### 3.3. Identification and Selection Process of AMHP Trainees

3.3.1. Employees interested in AMHP training in WBC are encouraged to have an informal discussion with the AMHP Lead or Service Manager in the first instance.

The entry route towards the AMHP course will vary according to the individual's background, experience and qualifications.

- 3.3.2. The following steps will take place in every case:
  - Clarification that the candidate holds an appropriate pre-AMHP course qualification.
  - Statement from the candidate's line manager detailing their opinion as to whether the candidate is suitable for AMHP training. This statement should take into account the candidate's performance in their current role and his/her opinion on the candidate's readiness to undertake AMHP training.
  - A reflective statement from the candidate detailing their experience in their profession, in the field of mental health practice and the reasons for their interest in the AMHP Role.
  - Each candidate must demonstrate they are capable of studying at Masters Level.
  - A meeting with the AMHP Lead, Specialist Mental Health Team Manager and Service Manager to explore the candidate's interest in AMHP training and their background in the field of mental health.
- 3.3.3. The AMHP Lead, Specialist Mental Health Team Manager and Service Manager may determine that a candidate is not suitable to proceed to the AMHP preparation pathway. In this instance, guidance will be given about any areas the candidate might need to develop in their professional practice prior to reapplying for future AMHP training. An application from a candidate may be deferred whilst further experience in their professional field and in mental health practice is achieved.
- 3.3.4. If a trainee is considered suitable and ready to proceed to the AMHP preparation pathway, the AMHP Lead will work with the candidate towards completing their precourse Learning Record (Appendix D). There is no time limit for completion of all steps on the Learning Record.
- 3.3.5. All applicants must demonstrate they are sufficiently prepared with the necessary skills and knowledge to undertake the formal AMHP training. If, at the end of the preparation pathway, the AMHP Lead does not feel the individual is ready to start the course, WBC reserves the right to refuse the application to proceed.
- 3.3.6. Once the candidate is deemed ready the AMHP Lead and Service Manager will support an application for the formal AMHP training course. All applicants are subject to a formal interview process through Bournemouth University.
- 3.3.7. Once an AMHP trainee has successfully completed the formal AMHP training course, a post training log will be completed, see appendix E. The trainee will need to complete a number of shadowing assessments and the AMHP Lead will determine when the individual is considered ready to be put forward to the warranting panel for consideration of approval to act as an AMHP on behalf of WBC. The AMHP Lead may identify further training and development needs and a plan to address these will be drawn up. Successful completion of the AMHP course does not require WBC to approve the trainee and it is at WBC's discretion if and when to proceed with AMHP warranting.
- 3.3.8. All trainees who progress to the formal AMHP training course are required to sign the 'Qualification Training Agreement', see Appendix H. Appendix G ' Arrangements

for the Repayment of the Council's Financial Assistance' sets out the AMHP trainee's financial obligation to repay the AMHP training course fees in the event the programme is not successfully completed or if the AMHP ceases to work as an AMHP for West Berkshire Council during the period of up to two years following successful completion of the training.

#### 4. Warranting and Re-warranting Process for AMHPs

- 4.1. The purpose of the AMHP approval panel is to determine whether an AMHP approval warrant is issued or renewed.
- 4.2. At a minimum the panel will consist of the Adult Social Care Service Manager, the AMHP Lead and the Specialist Mental Health Team Manager. The panel may also consist of an additional senior LSSA employee or an individual from an external organisation.
- 4.3. At the approval panel meeting the prospective AMHP or AMHP seeking reapproval will present the relevant evidence and the AMHP or prospective AMHP will be asked to reflect on their work, MHA assessment shadows and AMHP training. The individual will be required to demonstrate their legal knowledge and ability to manage difficult practice situations.
- 4.4. The panel will make recommendations, with reasons regarding approval or reapproval. Panel will make the decision on behalf of WBC whether to issue or renew the AMHP warrant. If approval is granted, a warranting letter will be produced by the Communities Director of WBC which serves as official proof of approval. If approval is not granted, this will be discussed between the prospective AMHP, the AMHP Lead and the Service Manager. Where possible steps will be taken to support the AMHP in undertaking further training and development needs.
- 4.5. Trainees who are not recommended for approval or re-approval by the panel may appeal to the Head of Adult Social Care who will review the decision and make a final determination in consultation with the Service Manager. Any appeal should be made in writing within 28 days of the decision it relates to. The appeal decision should be given, with reasons within 28 days.
- 4.6. The AMHP Lead will maintain a record of the dates of all AMHP approvals and the due dates for re-approval.

#### 5. AMHP Approval following AMHP Training

- 5.1. Individuals who have successfully completed an accredited AMHP training course will be eligible for approval as AMHPs subject to the approval panel being satisfied on the recommendation of the panel that they:
  - Have completed all requirements of the training and assessment body within the expected timescales.
  - Been actively involved in a sufficient number of Mental Health Act 1983 assessments following the training, shadowed by the AMHP Lead or another

AMHP in the team. The prospective AMHP will be required to critically reflect on learning points from these assessments.

• Meet all the competencies set out within The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008, Schedule 2 (copied in **Appendix A**).

Ultimately it will be at the discretion of the AMHP Lead to determine when a newly qualified AMHP Is ready to go forward to the Approval panel. Nothing shall prevent WBC from not approving a prospective AMHP candidate should their readiness for practice not be confirmed by the AMHP Lead or the WBC Adult Social Care Service Manager. Further shadowing and learning exercises will continue until such a time when all parties confirm that the prospective AMHP is ready to go before the panel. The AMHP Lead will give regular supervision for the prospective AMHP following their completion of the training. Feedback on assessments and any further identified learning needs will be documented in supervision notes.

- 5.2. The AMHP Approval panel will require the candidate to critically reflect on their practice with the aim of ensuring the AMHP competencies are being met (The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008, Schedule 2, copied in **Appendix A**). The candidate should therefore be fully familiar with the AMHP competencies and be prepared to critically reflect on their training
- 5.3. The prospective AMHP must submit 'dummy' reports of at least two MHA assessments they have been actively involved in, at least a week prior to the panel meeting, upon which they will be scrutinised.
- 5.4. The panel will assess the prospective AMHP's academic portfolio and verbal evidence given during interview. The panel will make the decision on behalf of WBC whether to issue the warrant, subject to final approval by the Communities Director.
- 5.5. It is at the discretion of the Warranting panel and/or the Communities Director as to whether newly qualified AMHPs should be initially warranted to act as an AMHP for a period of 1 year, after which time a further warranting process will be established.

#### 6. Process for Re-approval

- 6.1. **Existing AMHPs** AMHPs are individually accountable for ensuring that they maintain their competence and apply for re-approval no later than three months before expiry of their approval. This will be done by the AMHP contacting the AMHP Lead to request a date for an AMHP Panel meeting. AMHPs seeking re-approval will be required to submit the evidence listed below 2 working days before the panel meeting:
  - A copy of two MHA assessment reports undertaken in the previous six months which both cover a good range of the AMHP competencies as detailed in The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008, Schedule 2 (copied in **Appendix A**).
  - Details of attendance at designated AMHP training days over the period since approval or last re-approval (**Appendix B**)
  - Details of any other relevant training over the same period (Appendix B)
  - A copy of the MHA report on the most recent assessment undertaken prior to seeking re-approval.
  - Evidence of learning points from one Mental Health Act 1983 assessment which has been shadowed during the six months leading up to seeking re-approval (Appendix C)
- 6.2. The AMHP Approval panel will require the candidate to critically reflect on their practice with the aim of ensuring the AMHP competencies are being met (Appendix A). The AMHP seeking re-approval should therefore be fully familiar with the AMHP competencies and be prepared to critically reflect on the submitted MHA assessments during the panel meeting.
- 6.3. The panel will assess the submitted paperwork, verbal evidence from the AMHP Lead and the AMHP. The panel's recommendations and reasons for their decision will be given by the AMHP Lead to the Communities Director and a copy provided to the AMHP. If the decision is to re-approve, the Communities Director can endorse the re-approval for a period of five years. A letter will be provided to the AMHP documenting the approval.

## 7. AMHPs joining West Berkshire Council

- 7.1. AMHPs joining WBC will be asked to submit a portfolio with the following evidence:
  - Reference from their previous employer in relation to their AMHP work
  - Evidence of completion of designated AMHP training days over the period since approval or last re-approval (**Appendix B**)
  - Details of any other relevant training over the same period (Appendix B)
  - Evidence of attending regular AMHP meetings.
  - Evidence of the number and details of assessments undertaken in the previous two years.
  - A copy of two AMHP assessment reports undertaken in the previous two years, which demonstrates a range of competencies, including a critical self-evaluation

relating to the AMHP competence requirements (Appendix A) of around 1000 to 1500 words

- Evidence of learning points from one Mental Health Act 1983 assessment shadowed by the AMHP Lead in West Berkshire (**Appendix E**)
- 7.2. The Panel will assess the portfolio, verbal evidence from the AMHP lead and AMHP. The panel's recommendations and reasons will be given to the Head of Adult Social Care and a copy provided to the AMHP. A further AMHP warrant will then be issued by the Communities Director for a period of either 1 year or 5 years, depending on each individual case.

#### Appendix A - AMHP Competence Requirements

## The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008, Schedule 2

#### 1- 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.

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

(1) 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, the Children Act 2004, the Human Rights Act 1998and the Mental Capacity Act 2005;

(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-

 (i) evaluate critically local and national policy to inform AMHP practice, and
 (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.

(2) In paragraph (1), "relevant" means relevant to the decisions that an AMHP is likely to take when acting as an AMHP.

#### 3- 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.

#### 4- 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, and
 (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.

#### 5- 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, and

(i) keep appropriate records with an awareness of legal requirements with respect to record keeping and the use and transfer of information.

## Appendix B - Details of designated AMHP training days

#### Training days completed over the period since approval or last re-approval

Date	Duration	Details of training and learning activity	How has this contributed to your training and learning

Appendix C - Learning points from a shadowed assessment

Learning points from a shadowed assessment Mental Health Act 1983 assessment from the last 6 months

Date and location of the assessment

Brief description of the details of the assessment including the material facts

Work undertaken by the AMHP in relation to the assessment

Application by the AMHP of the Mental Health Act 1983, Mental Capacity Act 2005 and their related Codes of Practice to this assessment

Application of local policies and procedures

Feedback on the quality of both the outline and full Mental Health Act assessment reports

Things that went well

Areas for improvement

## Appendix D- Preparation Pathway for AMHP training- Learning Record

#### Preparation Pathway for AMHP Training - Learning Record

The following areas need to be satisfied prior to an AMHP trainee commencing the Bournemouth University programme:

1. Basic Requirements:

Holds an appropriate professional qualification and is registered with the relevant professional body.	
Holds appropriate pre AMHP course qualification (GCPP, DPSP, BIA, PQ1).	
Is able to demonstrate over a significant period the necessary confidence and professional competence required.	
Is able to demonstrate anti- oppressive practice and uphold people's rights.	
Is able to work effectively with other professionals.	

#### 2. West Berkshire Council in-house training requirements

Safeguarding Adults Level 2 minimum	
Managing Risk in Mental Health	
Mental Capacity Act training	
Is familiar with this document, 'Procedures relating to the role of Approved Mental Health Professional in West Berkshire Council'.	

#### 3. Visits and shadowing

Has spent a minimum of 15 days with the Specialist Mental Health Team.	
Has shadowed a minimum of 7 MHA assessments with the Specialist Mental Health Team.	

(See Appendix F for guidance on the role of AMHP trainees during MHA assessments).	
Has observed a minimum of 1 MHA tribunal or Managers Hearing,	
Has spend a minimum of 2 days shadowing the Crisis Resolution and Home Treatment Team.	
Has attended a minimum of 2 care planning meetings for psychiatric inpatients.	
Has spent a minimum of 2 days with the Older Adults Mental Health Home Treatment Team (Beechcroft).	

## 4. Demonstration of knowledge and critical reflection

Has written a minimum of 2 critical reflection from MHA assessments.	
Demonstrates sufficient knowledge of a range of mental disorders	
Is familiar with the MHA manual and the MHA Code of Practice.	
Is confident that he/she will be able to perform well in interview for the AMHP course.	
The AMHP Lead is satisfied that the candidate can produce a good quality application for the AMHP course.	
Has completed a Personal Statement and Self Evaluation	
The AMHP Lead has completed the supporting statement outlining the candidates' readiness and suitability to undertake AMHP training.	

## Appendix E - Post AMHP Training Course Support Plan

## (To be completed on return to usual workplace)

Name of AMHP Trainee	
Name of Practice Assessor:	
Name of placement team:	
Name of usual work base:	
Name of AMHP Supervisor in usual work base:	

<b>Dates Participated</b>	on WE	BC AMHP Ro	ota (sha	adowing)	):		
Dates of AMHR Sur	orvisi	on since co	mplete	d the for	mal t	raining course:	
Dates of AMHP Supervision since completed the formal training course:							
Assessment Placement Experiences:							
		•					
Assessments by	No.	Indicate h	ow ma	ny of the	follo	wing you participate	d in
client group		Indicate how many of the following you participated in during the placement:					
Adult Mental Health		Section 2		Section		Managers Hearings	
(18-65)				17(a)		managoro noa mgo	
Older Persons		Section 3		Section	+	Safeguarding Adult	
Mental Health (65+)				135		Investigations	
Children's Mental		Section 4		Section		Displacement of	
Health (<18)				136		Nearest Relatives	
Learning Disability		Section 7		MHTs		Appointment of	
						Nearest Relatives	
	1				1	Hearest Keidtives	

Post Course Support Plan:

Identified AMHP Training & Development Needs:

Plan to address identified training & development needs: (May include further courses or planned learning experiences)

Post Course Support Plan (Prior to appointment as an AMHP): (To include details of planned frequency of supervision, frequency of participation (shadowing) on AMHP rota and details of support arrangements)				
Signed:				
AMHP TraineeDate				
AMHP Practice AssessorDateDate				
AMHP LeadDate				

# Appendix F - Guidance for AMHPs on involvement of trainees in MH Act assessments

AMHP trainees must participate in Mental Health Act assessments in order to develop and demonstrate relevant skills such as setting up assessments, interviewing in a suitable manner and finding the most appropriate way of providing an individual with the mental health services they need.

There are limits, however, to what can be done by someone not an approved AMHP. It is the AMHP's responsibility to 'lead' the assessment but, *in working closely with you*, the trainee can take an active role rather than be a passive observer.

#### The AMHP responsible for the assessment must:

- Introduce him/herself as the AMHP (the trainee may be introduced as an assisting colleague)
- Follow the guidance in the code of practice i.e. The AMHP must, at the start of the assessment, identify him or herself to the person, members of the family or friends present and the other professionals involved in the assessment. They should explain in clear terms the AMHP's own role and the purpose of the visit, and ensure that the other professionals have explained their roles. AMHPs should carry with them at all times documents identifying them as AMHPs.
- Make the decision whether or not to apply for detention or guardianship, or to agree to supervised community treatment. AMHPs may only make an application if they have interviewed the patient in a suitable manner and are satisfied that the statutory criteria are met.
- Complete and sign any necessary statutory forms (for practice, the trainee could complete a separate form marked 'for training purposes' and then destroy it.)
- Communicate the decision to the patient and relevant parties including the nearest relative.
- Take overall responsibility for the conveyance of the patient if they are to be admitted to hospital. Ensure that the papers go with the patient.
- Check and sign any outline report left with the hospital after an admission (trainee can contribute to this).

**The AMHP** *must* complete these tasks but, with planning, the AMHP may agree ways in which the trainee can assist and so participate fully in:

- Interviewing patient in a suitable manner
- Consulting/informing the nearest relative in person
- Discussing the assessment with doctor(s) and check any forms they have completed
- Contributing to the decision-making process
- A critical appraisal of the process after the event is especially helpful to trainee learning.

## Appendix G – Arrangement for the repayment of the Council's Financial Assistance

Circumstances in which the Council's financial assistance must be repaid	Employee must repay	Timescale and method for repayment
Employee fails to satisfactorily pass the qualification/training programme within a reasonable timescale	100%	Payroll will deduct the outstanding sums from the employee's salary by monthly instalments, over an agreed period.
Employee decides to terminate studies before completion without good reason	100%	
Employee voluntarily leaves the Council's employment whilst undertaking the qualification/training programme	100%	The outstanding sums will be payable in full on or before the employee's last day of employment. In exceptional circumstances, the Head of Service may agree to a monthly instalment plan for repayment. Employees whose employment with the Council is terminated due to redundancy or on grounds of incapability due to ill-health or disability, or who have undertaken qualifications to meet national targets will not have to repay the Council's contribution. Where other exceptional compassionate circumstances exist the Head of Service can
Employee is dismissed on disciplinary or capability grounds (except where incapability is due to ill health or disability) during the qualification/training programme	100%	<ul> <li>put a case to the section 151 officer to seek agreement to repayment being waived.</li> </ul>
Employee voluntarily leaves the Council or is dismissed on disciplinary or capability grounds (except where incapability is due to ill health or disability)after completion of the programme:		
Up to 6 months after completion	100%	
More than 6 months and up to 12 months	75%	
More than 12 months and up to 18 months	50%	
More than 18 months and up to 24 months	25%	
More than 24 months after completion	0%	

## Appendix H – Qualification Training Agreement

#### Part A – For completion by the Head of Service

I am pleased to confirm that service has approved the following financial support for your chosen programme of study:

Title of course and institution of study – Funding available for tuition fees Funding available for examination(s) Total cost of service contribution (including tuition fees and examinations) Time off for course attendance, study and examinations

To be agreed individually with line manager in accordance with the Qualification Training Procedure

Name.....

Signed......Date.....

#### Part B – For completion by the employee

I wish to accept the offer of financial assistance as outlined in Part A.

I have read and understand my commitments as laid out in the Qualification Training Procedure. I understand and accept the circumstances under which I must repay to the Council any financial assistance given to me under this agreement, in accordance with Appendix B of this document and that this forms part of my contract of employment.

Name.....

Signed..... Date.....

Line manager to send copy of completed form to Learning and Development Coordinator - who will also send a copy to HR.Copy of completed form to be retained by the line manager and employee for their records