

APPROVED MENTAL HEALTH PROFESSIONALS (AMHPs)

APPROVAL AND AUTHORISATION CRITERIA AND PROCEDURES

MENTAL HEALTH ACT 1983 / 2007

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Approval And Authorisation Criteria And Procedures

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1. Policy statement

These criteria and procedures have been written in accordance with:

- The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008 (Statutory Instrument 2008 No 1206);
- Reference Guide to the Mental Health Act 1983, Chapter 30 Approval of practitioners to carry out functions under the Act;
- The Mental Health Act Manual, 20th ed, Jones,R. Sweet and Maxwell

2. Purpose

These procedures seek to provide an equitable and consistent approach to the selection, approval and re-approval of Approved Mental Health Professionals (AMHPs) operating within Gloucestershire and authorised by Gloucestershire County Council (GCC).

3. Scope

These procedures will apply to all staff seeking approval and re-approval as Approved Mental Health Professionals and to the staff involved in their recruitment, training, supervision and line management within 2gether NHS Foundation Trust and GCC.

4. Legal Context

Section 114 of the Mental Health Act 2007 and The Mental Health (AMHP) (Approval) (England) Regulations 2008 set out the powers and duties held by Local Social Services Authorities (LSSA) in relation to the approval and authorisation of AMHPs.

AMHP Approval can be granted by only one English LSSA at a time.
AMHP Authorisation can be granted to an AMHP by several English LSSAs simultaneously.

Authorisation of an AMHP in Gloucestershire will normally run concurrently with Approval and be governed by the same process.

Para14.35 of the Code of Practice states that:

Local authorities are responsible for ensuring that sufficient AMHPs are available to carry out their roles under the Act, including assessing patients to decide whether an application for detention should be made. To fulfil their statutory duty, local authorities should have arrangements in place in their area to provide a 24-hour service that can respond to patients' needs.

5. AMHP Approval Procedure

5.1 Preparation

- 5.1.1 A newly qualified AMHP will need to provide evidence of successful completion of AMHP training and that the HCPC approved AMHP training course deems them suitable and competent candidates to be approved.
- 5.1.2 Once this evidence has been submitted to the AMHP Hub administrator, an approval meeting can be arranged with the approval panel (section 11).
- 5.1.3 7 working days prior to the approval meeting, the trainee will be required to:
- Submit their portfolio from the course as evidence of learning
 - Provide written evidence that their line manager agrees to support the AMHP with the requirements of the role and maintaining all professional standards related to AMHP practice and approval regulations. This includes releasing the AMHP from their substantive role to attend 1-1 supervisions, peer group supervisions, countywide forums and two days AMHP specific training provided by 2gether, as part of evidencing commitment to their Continuing Professional Development. The Line Manager must confirm that there are no disciplinary or service related impediments to approval.
 - Provide 2 photographs for the AMHP warrant card

5.2 At the meeting

- 5.2.1 The trainee will be expected to discuss two case examples of where they were involved in MHA assessments; one where the outcome was detention under the act and one where alternative plans were made. The trainee will be expected to talk about the duties of the AMHP role and verbally demonstrate AMHP competencies as set out in the AMHP approval regulations 2008.
- 5.2.2 The trainee should also present feedback given by a s12 Doctor with whom they have undertaken an assessment and also feedback from a service user or carer who they have been involved with during their time as an AMHP trainee.
- 5.2.3 The Approval Panel will then take time to consider whether approval should be made or whether there is demonstration of further learning required from the trainee. This may include a period of further practice with a supervising AMHP.

5.3 After the meeting

- 5.3.1 The AMHP can expect the AMHP Approval Panel to write to them formally either advising of:



- a) Approval for a period of time of up to 5 years or
- b) Whether there is further learning required prior to approval.

5.3.2 The outcome of the approval process will be communicated verbally and followed up in writing. If there is any outstanding learning, the letter will set out the requirements and a further date for an Approval meeting will be - arranged.

5.3.3 The AMHP Approval Panel reserves the right to decline to approve a candidate if they are not satisfied that they have met the competencies required to practise as an AMHP on behalf of Gloucestershire LSSA.

6. AMHP Re – Approval Procedure

6.1 AMHP re-approval dates will be made at the beginning of each calendar year by the AMHP administrator.

6.2 Unless otherwise specified, re-approval will occur on a 5 year basis.

6.3 Three months in advance of the expiry of Approval, the AMHP will be contacted with a re-approval meeting date and a copy of this policy detailing what is required of them:

6.4 Preparation

6.4.1 14 working days prior to the approval meeting the AMHP will be required to submit a Critical Reflection Log (see Appendix) and written evidence of each of the following *for every year* since last Approval:

- Attendance at a minimum of 2 out of the 4 countywide AMHP forums
- Attendance at a minimum of 3 out of the 6 peer group supervision sessions
- Attendance at a minimum of 4 1:1 AMHP specific supervisions
- Completion of a minimum of 18 hours AMHP related training in the form of a training log
- Completion of a minimum of 8 MHA assessments in the form of an AMHP log
- Written report in support of competence to practise from AMHP supervisor
- Record of annual reviews with AMHP supervisor and AMHP Lead prior to the approval meeting the AMHP's line manager will be required to confirm in writing that the AMHP can commit to three duty days per month (pro rata if part time). The Line Manager must

also confirm that there are no disciplinary or service related impediments to re-approval.

6.5 At the meeting

6.5.1 The AMHP will be expected to discuss two case examples of where they were involved in MHA assessments; one where the outcome was detention under the Act and one where alternative plans were made. The AMHP will be expected to talk about the duties of the AMHP role and verbally demonstrate the AMHP competencies as set out in the AMHP Approval Regulations 2008.

6.5.2 The Approval panel will then take time to consider whether approval should be made or whether there is demonstration of further learning required from the AMHP. This may include a period of further practice with a supervising AMHP

7. Authorisation by Gloucestershire of an AMHP already approved by another authority

7.1 Preparation

7.1.1 AMHPs who are to be authorised by Gloucestershire LSSA need to provide evidence in advance of the meeting in the form of:

- Their most recent approval letter and certificate from an HCPC approved AMHP training course
- A professional reference from the current approving Local Authority AMHP Lead or equivalent
- Record of Annual 18 hours of AMHP related training
- Record of Leading on a minimum of 3 Mental Health Act assessments with a Gloucestershire Approved AMHP. The Gloucestershire AMHP will be required to provide a brief report to ensure competence to practise
- Commitment in writing from their line manager to support the AMHP with the requirements of the role and maintaining all professional standards related to AMHP practice and approval regulations. This includes releasing the AMHP from their substantive role to attend 1-1 supervisions, peer group supervisions, countywide forums and two days AMHP specific training provided by 2gether, as part of evidencing commitment to their Continuing Professional Development. The Line Manager must also confirm that there are no disciplinary or service related impediments to approval.
- 2 photographs for the AMHP warrant card

7.2 At the meeting

- 7.2.1 The AMHP will be expected to discuss two case examples of where they were involved in MHA assessments; one where the outcome was detention under the act and one where alternative plans were made. The AMHP will be expected to talk about the duties of the AMHP role and verbally demonstrate AMHP competencies as set out in the AMHP approval regulations 2008.
- 7.2.2 The Approval panel will then take time to consider whether authorisation should be made or whether there is demonstration of further learning required from the AMHP.—This may include a period of further practice with a supervising AMHP
- 7.2.3 AMHPs must ensure that when acting on behalf of another LSSA that they distinguish on the relevant statutory paperwork which LSSA they are approved by and which they are authorised by.
- 7.2.4 AMHPs that are approved by another LSSA but authorised by Gloucestershire must inform their approving LSSA in writing (email or letter) and copy in the Gloucestershire AMHP lead.
- 7.2.5 In the event that the approving LSSA suspends. Approval, the AMHP must inform Gloucestershire County Council in writing.

8. AMHPs returning to practice

- 8.1 Following a break of more than 12 months since practising as an AMHP on behalf of Gloucestershire, the AMHP needs to:
- Provide written evidence that their line manager agrees to support the AMHP with the requirements of the role and maintaining all professional standards related to AMHP practice and approval regulations. This includes releasing the AMHP from their substantive role to attend 1-1 supervisions, peer group supervisions, countywide forums and two days AMHP specific training provided by 2gether, as part of evidencing commitment to their Continuing Professional Development. The Line Manager must also confirm that there are no disciplinary or service related impediments to approval.
 - Lead on a minimum of 3 Mental Health Act assessments with a Gloucestershire Approved AMHP. The Gloucestershire AMHP will be required to provide a brief report to ensure competence to practice.
 - Attend a Review Meeting with the AMHP Lead and AMHP supervisor to ascertain competency to practise and identify any support needs or requirements to enable the AMHP to practise



- Confirm commitment to three duty days per month (pro rata if part time)

9. The Role and Composition of the AMHP panel

9.1 The AMHP Approval, Re-approval and Authorisation process will be managed by a panel comprising:

- i. Head of Profession for Social Care
- ii. Gloucestershire AMHP Service Lead
- iii. Senior Manager from Gloucestershire County Council
- iv. Expert by Experience

9.2 The AMHP can expect the AMHP Approval Panel to verbally inform them of the outcome at the approval meeting of one of the following outcomes;

- a) AMHP approval for a finite period of time
- b) AMHP approval for a 5 year period
- c) Requirement for further learning prior to approval being granted.
- d) That the AMHP allowance shall be paid and date from which this will start

9.3 The outcome of the Approval Meeting will be followed up in writing. If there is any outstanding learning, a letter will set out the requirements and a further date for an Approval Meeting will be arranged.

9.4 The AMHP Approval Panel reserves the right to decline to approve a candidate if they are not satisfied that they have met the competencies required to practise as an AMHP on behalf of Gloucestershire LSSA.

10. Implementation

10.1 Approval is conditional on AMHPs:

- Undertaking to inform GCC in writing as soon as reasonably possible, if they agree to act as an AMHP on behalf of another local authority in England and when any such agreement ends.
- Undertaking to stop acting as an AMHP and to notify GCC immediately if their professional registration is suspended and when any such suspension ends. If an AMHP's professional registration is suspended, GCC must suspend their approval as an AMHP for as long as the suspension of the professional registration lasts.
- When GCC is notified that the suspension of the professional registration has ended, it must end the suspension of the approval, unless it is not satisfied that the AMHP has appropriate competence.
- Suspension of approval as an AMHP does not change the date on which that approval is due to expire.

10.2 GCC must end an AMHP's approval if:

- The AMHP notifies them in writing that they wish no longer to be approved as an AMHP
- The AMHP Approval Panel is no longer satisfied the AMHP has appropriate competence.
- If the AMHP is no longer a professional who meets at least one of the professional requirements such as described within The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008.
- The AMHP is in breach of the conditions of their Approval.
- The AMHP is approved to act as an AMHP by another local authority in England.

10.3 Ending and Suspending AMHP approval

Failure to meet any of the conditions as described in the Mental Health (Approved Mental Health Professionals) (England) Regulations 2008, will result in AMHP approval being suspended and AMHP allowance stopped. This includes failing to maintain professional registration (Schedule 1); evidence of competence in the 5 key areas (schedule 2) or in breach of any of the conditions set out in regulation 5 as described in The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008. **See appendices.**

11. Monitoring and Review

This policy will subject to review on annual basis. Next review April 2020.

12. Appendices:

CRITICAL REFLECTION Guidance

The critical reflection is a means by which to demonstrate the five key areas of competence.

The expectation is that the AMHP will work on the critical reflection log throughout the 5 year period of their approval and it will be submitted to the supervisor in advance of the annual review meeting. The Log should include:

- Five critical reflections on practice, one to be completed in each year of approval.
- Five direct observations of practice undertaken by an experienced AMHP, one in each year of the approval period. Whenever possible this should be the AMHP's supervisor.
- Pieces of feedback over the approval period from service users and carers where possible.
- Pieces of feedback over the period of approval from colleagues and other professionals.

When completing the critical reflections on practice the AMHP may wish to consider:

- The issues and challenges that they have faced in their professional decision-making and the ways in which they have addressed these.
- Reflect on the ways in which their practice has been influenced as a result and identify the evidence that supports this.
- The legislation, Code of Practice guidance, local and national policies and procedures, research and evidence that has helped them to develop their thinking and inform their decision making.
- The identification and application of the legislation and Code of Practice guidance and how has this influenced their practice.
- The most encouraging or challenging, piece of feedback (formal and informal, from other professionals and/or service users and carers) that they have received and the ways in which it has influenced their practice. Identify the evidence that supports this.
- Proactive use of supervision and increased ability to reflect on, evaluate and alter their own practice.

Direct observations of practice

The direct observations must be completed by either the AMHP's supervisor or another AMHP with the experience to make an accurate and informed judgement about the AMHP's competence. In writing the report on the observation, the observer must identify how the AMHP has demonstrated the Key Competencies by making reference to the five areas.

- The Mental Health (Approved Mental Health Professionals) (Approval) (England) Regulations 2008.



Warrant Card Process
Map.docx

- Suspension letter
- Ending approval letter
- Supporting letter signed by manager