**Adult Social Care – Approved Mental Health Professional Policy and Guidance.**

**AMHP- Re – Approval, De – Approval, Authorisation.**

* **Recruitment**
* **Selection**
* **Retention**
* **Approval**

**October 2020.**

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**MENTAL HEALTH ACTS 1983 and 2007 *(AMENDMENTS)***

**APPROVED MENTAL HEALTH PROFESSIONAL**

**RECRUITMENT, SELECTION, RETENTION, APPROVAL, RE-APPROVAL,**

**DE-APPROVAL AND AUTHORISATION PROCEDURE AND GUIDANCE.**

# Introduction

* 1. This protocol sets out the procedures for the recruitment and selection of appropriate candidates to undertake AMHP training, the initial authorisation process, the re-approval process and the validation of approvals gained in other Local Authorities.
	2. Local Social Services Authorities (LSSAs) are responsible for ensuring that there are enough AMHP’s in their area and that arrangements are in place to provide a 24-hour service that can respond to service users’ needs. Amendments in the Mental Health Act 2007 require a collaborative approach in relation to workforce planning. The Council will work closely with the partners across the local social care and health economy to promote the role of the AMHP for all appropriate professionals

# Workforce Planning

2.1 An updated target for qualified and practicing AMHPs should be maintained in Walsall Council, allowing for up to two years for potential AMHPs to become qualified. This target should take into consideration the preferred option for delivery, expected retirement, and expected levels of turnover.

2.2 The target should emerge from discussions of the respective authority workforce planning group comprising the LSSA senior manager responsible for delivery or delegated LSSA manager, relevant Principle Social Worker, Head of Social Care, AMHP Lead and the relevant learning and development officer/consultant. At a minimum the target should be set and/or reviewed in January each year.

2.3 The target may need to change, through a meeting of the above, to accommodate unforeseen changes, such as alterations to the service design to meet AMHP rota needs, and unforeseen or unplanned workforce changes.

# Recruitment and Selection of AMHP candidates

3.1 The training programme for staff to become Approved Mental Health Professionals is accredited by Social Work England (SWE)

3.2 Dependant on the HEI, there may be either one or two stages to formal AMHP qualification training. Selection will presume two stages, with stage 1 replaced in some instances by pre

requisite courses. Should candidates have already completed such a course or equivalent, they can be considered directly for the latter element, subject to the HEI accepting the validity of prior training.

# **3.3 Requirements**

3.4. The assessment will be against the selection criteria below:

Each applicant must be a registered professional from a Social Work, Nursing, Occupational Therapy or Psychology background. Nurses with the qualification in Learning Disabilities nursing may also apply. They must have a minimum of two years post qualifying experience including working with service users with significant mental health needs.

3.4.1. The candidate demonstrates sufficient relevant experience in mental health, including evidence of observing Mental Health Act assessments. Experience will include displaying knowledge of legislation, and the ability to reflect on their experience. The AMHP lead can assist in formulating support from the AMHP Hub with preparatory learning i.e. shadowing a Mental Health Act assessment

3.4.2. The candidate shows suitable motivating factors for wishing to become an AMHP, and shows how the role will fit with their current post.

3.4.3. The candidate can demonstrate, to the relevant panel, that they have the capacity to manage the HEI requirements of the course as well as the practical and emotional aspects of the role.

3.4.4. The candidate will be expected to produce a full and accurate record of CPD.

3.4.5 The candidate has the confidence of their line manager in their readiness, ability to undertake the course, on-going commitment to practice and a discussion as to the consequences of the commitment not being met.

3.4.6. The applicants are required to produce and a critical reflective piece based on shadowing a MHAA. It is also strongly advised that candidates undertake a post graduate module to prepare them for the academic rigour of the course. The expected outcome of this is that they can provide evidence of shadowing an AMHP, and be able to demonstrate previous experience sufficiently, to satisfy University requirements.

3.4.7. Candidates will need to meet the relevant Higher Education Institute’s (HEI) selection criteria including any personal statement written to their guideline.

# 3.5. Selection Processes

3.5.1 The candidate shows a commitment to working on the AMHP rota for Walsall Council and carrying out the full AMHP role including, for example, Community Treatment Orders and Mental Health Review Tribunals and any other statutory duties pertaining to the role.

3.5.2 Applications, with support of the Line Manager, should be submitted to the PSW and/or AMHP lead the line manager of candidates will need to countersign applications to agree to the release of the staff member within the relevant requirements of the university programme.

3.5.3 The decision to recommend a candidate for AMHP training will be made by the PSW and/or AMHP lead in discussion with relevant senior managers.

3.5.4 Line Managers will need to make a written and signed commitment that on completion of the training the candidate will be enabled to act as an AMHP and make a commitment to the rota no less than 3 days per 5 weeks.

3.5.5 After the closing date for applications to be received, short listed candidates may be invited for interview.

3.5.6 The AMHP Lead offers direct comprehensive feedback both verbally and in written form to those not short-listed and their line managers.

Following interview, outcomes will be verbally communicated within 5 working days, to all concerned, including unsuccessful applicants and their managers.

3.5.7 There is a right to appeal. The appellant will contact the PSW in writing, within 2 weeks of the decision being communicated, to register their appeal. The Appeal will be considered within 2 weeks, by the relevent Group Manager, and Principal Social Worker.

3.5.8 Selection for AMHP training is the ultimate responsibility of the approved university providing the Post Qualifying award programme, within which the AMHP training is incorporated. Walsall Council continue to retain the legal responsibility for deciding whether or not to warrant a person to act as an AMHP for Walsall Council and need to be assured of competency.

3.5.9 Selection is dependent upon the availability of places, funding and the needs of the AMHP service. Candidates and Organisations must not assume that their substantive role automatically entitles them to a place on the programme.

3.5.10 Backfill is not available whilst staff are attending their course or placement.

3.5.11 Failure to successfully complete the course, or leaving the employment of the LSSA within two years of qualifying as an AMHP, will trigger the relevant reclaiming course fees in line with the relevant Local Authority policies.

3.5.12 During the selection process, the Panel will ensure that suitably qualified Practice Mentor Assessors and placements are identified for the successful candidates.

# 3.6 **Placements and Assessors**

3.6.1 The AMHP Lead for the AMHP service will liaise with the PSW, to identify placement opportunities for candidates and ensure that an adequate number ofqualified assessors are available to support candidates. The AMHP Lead will then make placement arrangements.

3.6.2 Candidates will be allocated a Practice Mentor Assessor (PMA) by the AMHP Lead according to programme requirements. PMAs will receive procedural support from the

AMHP Lead **and are expected to seek agreement via their line manager prior to agreeing to act in the capacity of assessor**.

3.6.3 PMAs will be identified according to various factors, including; geographical location, employer (to demonstrate independence in the assessment process) and PMA need (i.e. those wishing to undertake formal assessor training) and taking into account any learning needs of the Candidate. The AMHP Lead will email all AMHPs and invite expressions of interest in the PMA role.

3.6.4 If the Candidate expresses concerns about the choice of PMA, alternative arrangements will be made by the AMHP Lead. If the Candidate remains unsatisfied, then the PSW will resolve this.

**3.7 Complaints and Appeals**

There is an appeals process against the decisions made by Walsall Council’s selection panel – **please see 3.4.7 above.**

**3.8 Completion of Training**

On successful completion of the AMHP training course candidates will be invited to “shadow” assessments for up to 3 months before being expected to take part in the rota as an independent AMHP.

# 3.8 Newly qualified AMHPS will be provided with;

* + 1. Information about Local Policies and Procedures.
		2. Confirm an understanding of recording mechanisms for all activity under the Mental Health Act.
		3. Confirm established links with AMHP Rota.
		4. Establish arrangements for supervision, support and mentoring for newly qualified AMHP’s.
		5. Ensure candidates have details of local peer support groups.
		6. Provide information about re-approval requirements **(including forms to be completed).**

* + 1. Provide Letters of Authorisation / Warrants.
1. **Initial Approval**

4.1Since the MHA 2007, AMHPs may only be **approved** by one Local Social Services Authority (LSSA) but may be **authorised**by other LSSAs based on that original approval. When authorised by other LSSA AMHPs must inform the approving LSSA.

# 4.2 **Approval by the Local Authority**

On successful completion of the AMHP training course and receipt of a confirming letter from the university the AMHP Lead will arrange for consideration of approval by the AMHP panel. If the evidence and discussion shows that the candidate is ready to practice, they will be approved as an AMHP for a five year period.

# 4.3 **Criteria for AMHP Approval**

**The candidate will be required to have:**

4.3.1 The nationally agreed AMHP qualification awarded by an HEI.

4.3.2 An AMHP portfolio consistent with the SWE CPD requirements that will be informative for Panel. They will then continue to build this portfolio in the following five years for presenting when requesting re-approval.

4.3.3 Sound knowledge of existing local resources.

4.3.4 Experience of shadowing AMHPs during assessments under the Mental Health Act and of leading assessments accompanied by the AMHP, with a minimum of 1 community based assessment and 1 within the hospital setting.

4.3.5 It is the expectation that every AMHP who has been approved by the Panel, will remain as a practicing AMHP for the period of their approval, which is five years. This may be subject to additional requirements agreed with the Panel.

# 4.4 **The Approval Panel**

The Approval Panel will consist of a delegated LSSA manager, an AMHP lead (one of whom will chair) where possible, a manager of the AMHP’s own profession and a qualified and practicing AMHP. These roles may be covered by two appropriate people but must include a LSSA manager agreed with the senior manager responsible for AMHP provision. Any conflicts of interest must be declared to the chair. Alongside these, the Panel should also include a representative of people who use services or a carer’s representative.

4.5 The Approved Mental Health Professional status is conferred by the Director of Adult Social Care, Walsall Council, in the form of a letter and photo ID card / warrant.

4.6 The photo ID card / warrant should be used in conjunction with a valid identification card issued by the AMHP’s employer.

4.7 The administration of the approval and authorisation systems is undertaken by the Business Support team supporting Adult Social Care.

4.8 If the candidate decides not to complete the course (with the exception of extenuating circumstances) then they may be pursued to reimburse Walsall Council the full cost of the training course.

4.9 On successful completion of the course, AMHPs not registering or engaging with Walsall AMHP rota or their employer (depending on circumstances) will reimburse Walsall Council the full cost of the training course.

4.10 Following successful completion of the course, a Practice Assessor with AMHP experience or the appropriate AMHP Lead will remain involved to ensure the skills are embedded in practice. This role may be delegated to a suitably experienced AMHP.

# Requirements of AMHP Following Approval

5.1 Maintain a portfolio (see 6.5.)

5.2 AMHPs must carry their AMHP identification in the form of a warrant card when on AMHP duties. A suitable card with a recent photo, details of Approving LSSA, start and end dates of the Approval, & their powers of entry (s115), alongside a letter indicating approval will be provided by the LSSA. Any such ID must be returned if the AMHP ceases to act on behalf of the Approving LSSA, their letter stating the period of Approval stays with the AMHP.

5.3AMHPs must inform their line manager and AMHP lead if they agree to act on behalf of another Local Social Services Authority (LSSA) i.e. are “authorised,” and when such authorisation ends.

5.4AMHPs must cease to act as an AMHP, and to notify the approving LSSA, if they are suspended, cease to be registered by their professional body or are no longer licensed to practise.

5.6AMHPs must notify the approving LSSA if their performance or judgement is affected by their health.

# Renewal of Approval

**Re-Approval**

6.1 Re-approval will be undertaken on a 5-yearly basis or more frequently if required and agreed with partner organisations. Walsall Council would re-approve for the 5 years, but if there have

been concerns highlighted at Panel, then the re-approval can be recommended with a review at 1, 2, or 3-year period.

6.2 Newly qualified AMHPs, although approved for 5 years will be expected to develop a portfolio and attend panel at the end of their first year. This is to enable the Service to identify on-going competency, learning and support needs.

* 1. The register of AMHP’s will be maintained by the Business Support Team and a reminder of forth coming renewal requirements will be sent to the AMHP and AMHP Lead where appropriate 6 and 3 months before the panel date.
	2. The AMHP re-approval panel is responsible for the examination of portfolios submitted for re-approval of AMHP status and for reviewing the re-approval process. The panel will be chaired by the PSW, and will consist of the relevent Group Manager and AMHP Lead.
	3. Approved Mental Health Professionals seeking re-approval of their status are required to produce a **portfolio** (the forms for the portfolio are appended to this document), which must include all the relevant information, to demonstrate the following:
		1. On-going training and professional development. Evidence of 18 hours accredited AMHP Refresher Training per annum. (see example Form 7 for a training record template)
		2. The operational need for AMHP status;
		3. Competent, regular and recent practice as an AMHP. A record of the number of MHA Assessments conducted since last approval. (See example Form 7 for an assessment list template)
		4. Evidence of AMHP Supervision (Form 8) utilising the AMHP supervision pro forma; or rationale for why this may not have been possible.
		5. A minimum of five anonymised AMHP reports/pro-formas, 5 x critical reflective practices from which the AMHP will be expected to evidence their range of skills, knowledge & experience as listed by SWE section 2 (Form 5).
		6. Evidence of attendance of 50% of identified AMHP meetings and Forums – (pro rata if part-time).
		7. One observed assessment by AMHP lead or nominated practice assessor or, if unavailable, an experienced AMHP to confirm competence of practice. (See Form 9 for example observation template).
		8. Evidence of any special work undertaken by the AMHP such as participation in workgroups, research, placement supervision, mentoring or training.
		9. Reference confirming their competence as an AMHP from their AMHP qualified supervisor, AMHP qualified line manager or a qualified Section 12 approved medical practitioner.
		10. Any written reports for Tribunals, Appeals or Guardianship Case Conferences, etc.
		11. The AMHP is encouraged to include any service user or carer feedback, or testimonies from other professionals. (See example Form 10 for a feedback template)
		12. Registration with the relevant professional body or current license to practice which will be checked electronically.
	4. Following submission of portfolio, AMHPs will be invited to attend panel for a discussion around their practice and knowledge.
	5. Approved status lasts for up to 5 years (please see 6.1).
	6. The AMHP will be notified by the Business Support Team 6 and 3 months before their status is due to expire. However, it is the AMHP’s responsibility to ensure that they gain re-approval before their warrant expires.
	7. The portfolio should be completed and ready for submission four weeks before the Re-approval Panel meeting. The date of the panel will be detailed in the 3-month notification. AMHP Portfolios submitted later than 1 week before the panel will not be processed which may result in a loss of authorisation.
	8. The Approved Mental Health Professional will discuss the contents of their portfolio with their Line Manager prior to submission. (See “Guidance: Documentation and Presentation of Portfolios”.)
	9. The Business Support Team will inform all interested parties (in writing) of the outcome of the Panel and records will be updated accordingly and new warrants will be sent out. AMHPs will be given verbal feedback about their portfolio.
	10. Any AMHP whom the panel feels needs additional support to be able to practice, will be referred to the AMHP Lead to facilitate this accordingly. This support could take the format of additional supervision, viva voce, linking in for bespoke training if required.
	11. Approvals will be renewed on a rolling programme of five years.
	12. The senior LSSA manager responsible for AMHP service, or their delegated representative,will be responsible for giving sufficient notice, setting up the Panel, and reminding all concerned of the requirements below.
	13. The Re-Approval Panel’s composition will be as for Approval (refer to 4.4).

The decision will be based on a discussion with the AMHP about their role, the contents of the portfolio and any further evidence available. The areas for discussion will broadly cover the national requirements and competences which are in use at the current time.

* 1. **The Panel may recommend:**
	2. Renewal of the approval for five years.
		1. Renewal, with a requirement to obtain further experience or learning. For example - additional activities or training pertinent to the AMHP’s practice which they may be asked to undertake within a certain timeframe and return to the Panel.
		2. Delay the approval and, therefore, suspend them from practice as an AMHP if there are issues which need resolution regarding their competence to practice, or understanding of the role.
		3. Decide not to renew, in which case the AMHP has the right of appeal to the Principal Social Worker.
		4. The Panel will, following formal LSSA agreement, inform the applicant’s line manager, the AMHP Lead and, if necessary, the relevant HR Department of the above outcomes.
	3. The actual Approval of any AMHP lies with the identified LSSA Senior Manager, and, whilst they may accept the recommendations of the Panel, formal sign-off and record keeping of Approval, Re-approval, or Authorisation lies with them or their delegated representative.
	4. The Chair of the Panel will seek, and bring to Panel, any information held on the AMHP’s practice, such as compliments, complaints, areas of particular expertise and any problems with **Authorisation of AMHP’s.**
1. **Authorisation of AMHP**
	1. All AMHP’s working on behalf of Walsall Council will be required to have up to date DBS clearance which is completed as part of induction.
	2. The senior LSSA manager Walsall, responsible for the provision of AMHP services, will maintain a record of staff approved to act as AMHPs in Walsall, as well as all AMHPs which it has authorised.

1. **Validation of approvals gained in other Authorities**

8.1 Professionals who have been warranted as an AMHP in another Local Authority must have their warrant validated before they may act on behalf of Walsall Council.

8.2The Business Support Team supporting Adult Social Care facilitates the validation of approvals gained in other Local Authorities, which the AMHP Lead and director of adult social care approves.

* 1. The AMHP must complete an appropriate induction period in Walsall and the AMHP Lead together will monitor their practice via scrutiny of assessment documents to ensure that competence to practice has been demonstrated. This can be managed on an individual basis in partnership with the employing agency.
	2. The Business Support Team will request proof from the professional's previous authorising authority of the following:
		1. The first transitional approval date where applicable.
		2. The first full approval date.
		3. The dates of re-approval where applicable.
		4. Details of formal mental health training provided for the individual including dates / duration.
		5. Details of job experience.
	3. AMHP Lead will ensure that the professional has completed a recommended induction period. They will also require a testimonial from the professional’s previous line manager or rota manager that the person seeking authorisation had demonstrated competence to practice and that their status as an AMHP is required.
	4. Once agreed by the AMHP Lead, the Business Support Team will present the information to the Director who will validate the authorised status.
	5. The Business Support Team will notify the AMHP lead who will inform the professional. Records will be updated accordingly.
	6. If agreeing Authorisation, the LSSA will issue a warrant card, with details of the Authorising LSSA, and the start and end dates of the Authorisation alongside a letter confirming the Authorisation.
	7. If authorised, the AMHP is required to inform their employer and/or LSSA responsible for their Approval. This again applies should they cease to act on behalf of the Authorising body, or Authorisation is suspended or withdrawn.
	8. They are also responsible to inform the Authorising LSSA if they are suspended, cease to be registered by their professional body, are no longer licensed to practise or if their performance or judgement is affected by their health.
	9. LSSA need to be aware that an Authorised AMHP is responsible for maintaining their own fitness to practice. If they are not receiving supervision or attending refresher training through another organisation (e.g. where Approved), then this may be best met through arrangements with an Authorising authority. The LSSA (Walsall) may, therefore, wish to set a condition that they are informed if any current arrangements come to a close. (E.g. cease practicing for Approving authority).
	10. Where an authorised AMHP, due to a change in employment, no longer has support and refresher training arrangement with their approving LSSA, consideration should be given to a fresh approval from the current authorising authority. This will facilitate provision of refresher training by the new approving LSSA.
	11. Staff working for Agencies or as self-employed are responsible for arranging their own training and supervision, which may be charged for by the authorising LSSA.
	12. Walsall Council may choose to limit the period of Authorisation, but during that period there is a responsibility to ensure that up to date knowledge and practice, evidenced through their portfolio, is in place. Similarly evidence of Refresher training is required on an annual basis.
	13. If for any reason, including failure to evidence the above, the Authorisation is withdrawn, then it is good practice for the Authorising authority to inform the Approving authority. The AMHP in question has an obligation to do so.
	14. A period of Authorisation may not exceed the current period of Approval.
1. Review
This policy shall be reviewed in three years or sooner if organisational or legislative changes require.
2. De-ApprovalWhere the AMHP leaves the approving LSSA, the approval to practice in that authority will cease with effect from their last day of employment. A letter of confirmation will be sent to the AMHP from the AMHP Lead/Principal Social Worker.

# ASW / AMHPs With Lapsed Approval

* 1. ASW’s who did not complete the ASW-AMHP Transitional Training would need to undertake a formal qualification via the University commissioned by Walsall Council at the time. They will not be considered for approval by Walsall Council, until they have successfully completed this training.
	2. AMHP’s who have not maintained their approval can be considered to undertake the ‘’refresher’ re-training programme, to enable for them to be re-warranted by Walsall Council. This provides a refresher of the AMHP role and responsibilities, whilst demonstrating and assuring Walsall Council of competency. Although this will need to be considered on a case by case example.
	3. Once the requirements have been met, the AMHP will need to submit a portfolio of work (date to be agreed) and will be invited to attend a panel with the AMHP Lead for a discussion around their practice and knowledge.
	4. The Business Support Team will inform all interested parties of the outcome of the Panel (in writing) and records will be updated accordingly and an AMHP warrant will be issued.
	5. Verbal feedback will also be provided about portfolios.
	6. Any AMHP whom the panel feels needs additional support to be able to practice, will be referred to the AMHP Lead to facilitate this accordingly. This support could take the format of additional supervision, viva voce, linking in for bespoke training if required.

# AMHPs not allocated to the Rota

* 1. AMHP’s unable to support daytime duty rotas and where the AMHP status is not written into job descriptions will have their warrants revoked (unless working as a standby AMHP for AMHP Hub) after a set period and viewed on a case by case basis. If in receipt will forfeit the increments associated with their participation on the AMHP rota.
	2. AMHP’s who leave their substantive posts within Walsall Council will have their warrant automatically revoked after 3 months and will be expected to return their warrant and Mental Health Act Manual to the Business Support Team on their last day of employment in Walsall. However, during the notice period Walsall will seek to transfer the warrant to the new employer or seek alternative solutions for Walsall to remain holding the warrant. This can be undertaken on a case-by-case basis
	3. Agency AMHP’s. These are professionals who tend to work autonomously and independently across a number of Local Authorities. Walsall Council would not expect to assume the full responsibility of ‘Warranting’ an AMHP, although we could ‘‘authorise’ these AMHPs to work for Walsall Council. It would need to be clarified however that these AMHPs would only be ‘authorised’ for the duration of their support of the Walsall AMHP rotas.

# Useful Resources / Documents

* [The Standards for employers of Social Workers in England](https://www.local.gov.uk/standards-employers-social-workers-england-2020)
* [HCPC Section 2: Approved Mental Health Professionals Criteria](https://www.hcpc-uk.org/standards/standards-relevant-to-education-and-training/amh-criteria/)
* [Social Work England - Approved Mental Health Professional Guidance](https://www.socialworkengland.org.uk/education-training/information-for-providers/guidance-documents/approved-mental-health-professions-amhp-guidance/)
* [Social Work England - Professional Standards](https://www.socialworkengland.org.uk/standards/professional-standards/)
* [BASW supervision policy](http://cdn.basw.co.uk/upload/basw_73346-6.pdf)
* [BASW Professional Capabilities Framework (PCF)](https://www.basw.co.uk/social-work-training/professional-capabilities-framework-pcf)
* [SCIE Care Act 2014](http://www.scie.org.uk/care-act-2014/)
* [SCIE Effective supervision in a variety of settings](http://www.scie.org.uk/publications/guides/guide50/)
* [SCIE Research briefing 43: Effective supervision in social work and social care](http://www.scie.org.uk/publications/briefings/briefing43/)
* [Walsall Council Workforce Development AMHP information](http://www.walsallsocialcareworkforce.co.uk/test/323)
* [Walsall Council AMHP Professional Supervision Policy](http://www.walsallsocialcareworkforce.co.uk/test/284)
* [Walsall Council Workforce Development AMHP and Social Care Forum information](http://www.walsallsocialcareworkforce.co.uk/test/352)
* [Walsall Council Workforce Development Induction, Supervision and Appraisal information](http://www.walsallsocialcareworkforce.co.uk/test/284)
* [Walsall Council Workforce Development Learning Opportunities](http://www.walsallsocialcareworkforce.co.uk/meet-the-team/)

# Appendices

**Form 1**

|  |  |
| --- | --- |
| **Details** | **Dates** |
| **Record of Approved Status:** |  |
| **Name of AMHP:** |  |
| **Current Post:** |  |
| **Based at:** |  |
| **Profession:** |  |

|  |  |
| --- | --- |
| **Experience as an AMHP** | **Dates** |
| Date of recommendation as an AMHP |  |
| Number of years as an AMHP |  |

|  |  |
| --- | --- |
| **Details** | **Dates** |
| Please note any breaks in approval: |  |
| Signature: |  |
| Date of Re-approval: |  |

**Form 2**

**Annual Checklist**

|  |  |  |
| --- | --- | --- |
| **Year 1** | **Comments** | **Date** |
| Dates of AMHP/Peer Group attendance (4 per year – please attach attendance record from minutes) |  |  |
| Number of hours training completed (minimum requirement of 18 hours training required) |  |  |
| Number of Mental Health Act assessments completed (minimum requirement of 5 – see guidance) |  |  |
| Pieces of written work submitted as evidence (3 each year – see guidance) |  |  |
| **Year 2** | **Comments** | **Date** |
| Dates of AMHP/Peer Group attendance (4 per year – please attach attendance record from minutes) |  |  |
| Number of hours training completed (minimum requirement of 18 hours training required) |  |  |
| Number of Mental Health Act assessments completed (minimum requirement of 5 – see guidance) |  |  |
| Pieces of written work submitted as evidence (3 each year – see guidance) |  |  |
| **Year 3** | **Comments** | **Date** |
| Dates of AMHP/Peer Group attendance (4 per year – please attach attendance record from minutes) |  |  |
| Number of hours training completed (minimum requirement of 18 hours training required) |  |  |
| Number of Mental Health Act assessments completed (minimum requirement of 5 – see guidance) |  |  |
| Pieces of written work submitted as evidence (3 each year – see guidance) |  |  |
| **Year 4** | **Comments** | **Date** |
| Dates of AMHP/Peer Group attendance (4 per year – please attach attendance record from minutes) |  |  |
| Number of hours training completed (minimum requirement of 18 hours training required) |  |  |
| Number of Mental Health Act assessments completed (minimum requirement of 5 – see guidance) |  |  |
| Pieces of written work submitted as evidence (3 each year – see guidance) |  |  |
| **Year 5** | **Comments** | **Date** |
| Dates of AMHP/Peer Group attendance (4 per year – please attach attendance record from minutes) |  |  |
| Number of hours training completed (minimum requirement of 18 hours training required) |  |  |
| Number of Mental Health Act assessments completed (minimum requirement of 5 – see guidance) |  |  |
| Pieces of written work submitted as evidence (3 each year – see guidance) |  |  |
| Direct observation – (1 per renewal period) |  |  |

**Form 3**

**Report by Approved Mental Health Professional**

This form should be completed at the end of each fiver year periods of approval. The report should reflect experience and learning during the five years period and demonstrate awareness of current issues. An example of learning of legislative requirements should be included e.g. understanding the impact of AMHP practice of a Court ruling.

**Form 4**

**Statement by Line Manager/Supervisor**

This must include information to demonstrate that the re-approval criteria are met. The Line Manager/Supervisor should:

* Verify the content of the portfolio.
* Comment upon the operational need for the AMHP to be re-approved.
* Confirm that the AMHP has been provided with the opportunity to participate in supervision in respect of the AMHP duties under the Mental Health Act 1983. This is particularly relevant where the line manager does not specialise in mental health work.

**AMHP’s name:**

* **I confirm that the records and examples contained in this portfolio are an accurate reflection of the work undertaken by the AMHP.**
* **References to individuals have been made anonymous.**
* **The content of the portfolio is the sole work of the AMHP.**
* **I confirm that the AMHP has attended supervision as stated and that reviews (Form 5) have been completed annually.**
* **I confirm that I am not aware of any reason why the AMHP should not continue in professional practice.**
* **I confirm that there is an operational need for the AMHP to be re-approved.**

**Please add any additional comments (use a separate sheet if necessary)**

**Name of Line Manager/Supervisor:**

**Signature:**

**Date:**

**Form 5**

**Review of Practice and Development**

**To be completed annually in discussion with Line Manager/Supervisor**

1. Please note any outstanding areas for development identified at previous review or on completion of training.
2. Opportunities/experiences in the development of the AMHP role including reference to 1 (e.g. use of Mental Health Act, specific work with individuals).
3. Please give examples of how anti-discriminatory practice has been incorporated into your work.
4. Description of contributions to the development of services or the development of other workers.
5. Areas needing further development (to be reviewed every 12 months).

**Signature of AMHP:**

**Date:**

**Signature of Line Manager/Supervisor:**

**Date:**

**Form 6**

**Record of Mental Health Act Assessments**

**Name of AMHP:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Initials of service user and ID number** | **Age** | **Gender** | **Ethnicity** | **Date of assessment** | **Place of assessment****e.g. Police station, Hospital, Community** | **Outcome of assessment** |
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**Form 7**

**Details of Mental Health Related Training**

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| --- | --- | --- | --- |
| **Dates**  | **Total no of days**  | **Organising Body** | **Course Title and Brief Description** |
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**Form 8**

**Supervision Record for AMHP Practice**

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| --- | --- | --- | --- |
| **Dates**  | **Name of Supervisor**  | **Group Supervision****(tick)** | **Individual/ 1 to 1****(tick)** |
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**Form 9**

**AMHP Reapproval Direct Observation Template**

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| --- | --- |
| **AMHP** |  |
| **Name & role of observer**  |  |
| **Date & setting of observation**  |  |

**Section 1 – AMHP to complete**

**Complete boxes 1 and 2 before the observation**

|  |
| --- |
| **1. Brief background to observed contact between yourself and the service user** |
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| --- |
| **2. Planning for intervention** *including how consent was gained, and how you intend to gather feedback from the Service User if appropriate* |
|  |

**Complete boxes 3 and 4 after the observation**

|  |
| --- |
| **3. Brief description of the intervention** *e.g. what happened, what was achieved? What actions did others take?* |
|  |

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| --- |
| **4. Reflections on the observed practice** *e.g. What went well? How do you know? How did you feel about being observed? What is your key learning from the process? Were there any surprises for you arising from the Observation?* |
|  |

**Complete boxes 5 and 6 after reading the observer’s report**

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| --- |
| **5. Critical reflection and professional development** *have you identified or confirmed any specific areas of further development. How do you intend to address these? Have you recorded them in your Professional Development Plan?* |
|  |

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| --- |
| **6. Comments and reflections on the feedback given by the observer**  |
|  |

|  |  |
| --- | --- |
| **AMHP’s signature:** |  |
| **Date:** |  |

**Direct observation template A, Section 2**

**Observer to complete after the direct observation**

Please provide information to support your assessment of the direct observation; reference can be made to the seven domains where relevant. **You are not required to make a comment against each domain, neither is an AMHP expected to demonstrate every competence – they are given for your guidance only** but can be used to identify strengths and areas for development/concern (including reference to individual competence statements if necessary).

|  |
| --- |
| **Holistic assessment of the candidate’s capability demonstrated in the direct observation of practice (up to 300 words maximum)** *Give an brief overview of how the AMHP being observed performed* |
|  |

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| **Domain 1 Knowledge**1.1 Understand legislation, related codes of practice and national and local policy and guidance applicable to the role of an AMHP and be able to apply this in practice.1.2 Understand the legal position and accountability of AMHPs, employers and the authority the AMHP is acting for in relation to the Mental Health Act 1983.1.3 Understand a range of models of mental disorder, and be able to apply them in practice.1.4 Understand the contribution and impact of social, physical and development factors on mental health, and be able to apply this in practice.1.5 Understand the social perspective on mental disorders and mental health needs in working with service users, their relatives, carers and other professionals, and be able to apply this in practice.1.6 Understand the implications of mental disorders for service users, their relatives, carers and other professionals, and be able to apply this in practice.1.7 Understand the implications of a range of treatments and interventions for service users, their relatives and carers, and be able to apply this in practice.1.8 Understand child and adult protection procedures in relation to AMHP practice.1.9 Understand the needs of children and young people and their families and the impact those needs have on AMHP practice. |
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| **Domain 2 Autonomous practice**2.1 Be able to exercise appropriate use of independence, authority and autonomy in the AMHP role.2.2 Be able to recognise, assess and manage effectively the risks related to the AMHP role.2.3 Be able to manage anxiety, risk and conflict and understand its impact on AMHP practice. |
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| **Domain 3 Informed decision making**3.1 Be able to evaluate critically local and national policy to inform AMHP practice.3.2 Be able to draw on, and evaluate critically, a range of research relevant to evidence-based AMHP practice.3.3 Be able to gather, analyse and share information appropriately. |
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| **Domain 4 Equality & Diversity**4.1 Be able to demonstrate sensitivity to factors such as race, gender, age, sexuality, disability, culture, religion and belief in AMHP practice.4.2 Be able to identify, challenge and redress discrimination and inequality in AMHP practice.4.3 Understand and respect service users’ qualities, abilities and diverse backgrounds.4.4 Be able to promote the rights, dignity and self-determination of service users consistent with their own needs and wishes to enable them to contribute to the decisions made affecting their quality of life and liberty.4.5 Be able to demonstrate sensitivity to a service user’s needs for personal respect, confidentiality, choice, dignity and privacy. |
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| --- |
| **Domain 5 Communication**5.1 Be able to communicate effectively with service users, relatives and carers when undertaking the AMHP role.5.2 Be able to communicate advice, instruction, information and professional opinion, including providing verbal and written reports.5.3 Be able to present a case at a legal hearing.5.4 Be able to balance and manage the competing requirements of confidentiality and effective information sharing to the benefit of the service user and other persons concerned with the service user’s care. |
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| **Domain 6 Collaborative Working**6.1 Be able to work with service users, carers and others to evaluate the outcomes of interventions and identify any unmet needs.6.2 Be able to build and sustain effective professional relationships with service users, relatives and carers when undertaking the AMHP role.6.3 Be able to work as an AMHP in partnership with others, including inter-agency and inter-professional working.6.4 Understand the roles and responsibilities of other professionals involved in statutory mental health work.6.5 Be able to use networks and community groups to influence collaborative working with service users, agencies and advocates. |
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| **Domain 7 Assessment & Intervention** 7.1 Be able to make appropriate decisions that are sensitive to the needs of the service user.7.2 Be able to assess the feasibility of, and contribute effectively to, planning and implementing options for care of the service user.7.3 Be able to plan, negotiate and manage compulsory admission to hospital or arrangements for supervised community treatment.7.4 Be able to manage and co-ordinate effectively the relevant legal and practical processes, including the involvement of other professionals, as well as service users, relatives and carers.7.5 Be able to complete statutory documentation, including an application for admission, and written records in accordance with applicable legislation, protocols and guidelines. |
|  |

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| **Action plan following the direct observation** (if applicable)Have areas of development/learning needs been identified? What action needs to be taken to address these? Are they any other outstanding issues? |
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| --- |
| **Service user feedback** *(if no user feedback has been collected, explain why)* |
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| --- | --- |
| **Observer’s signature:** |  |
| **Date:** |  |

**Form 10**

**Service user/ Carer/ Nearest Relative Feedback**

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| --- |
| **Assessment Date/ AMHP name:** |
| **Did you feel that you had enough information given to you?**Yes No  |
| **Did you feel that the AMHP listened to you/ your cared for person?**Yes No  |
| **Did you feel that the AMHP was respectful towards you or your cared for person?**Yes No  |
| **Any Other Comments you would like to make?** |

**Thank you very much for completing this**

**Form 11**

**Contents Checklist**

**AMHP Name:**

**Date of Re-approval:**

* Form 1 – Record of Approval Status
* Form 2 – Annual Checklist
* Form 3 – Report by AMHP
* Form 4 - Statement by Line Manager/Supervisor
* Form 5 – Review of Practice and Development
* Form 6 – Record of Statutory Work Undertaken by AMHP (during each 12 month period)
* Form 7 – AMHP Training Record
* Form 8 - Supervision Record for AMHP Practice
* Form 9 - AMHP Re-approval Direct Observation Template
* Form 10 - Service user/ Carer/ Nearest Relative Feedback
* Form 11 – Contents Checklist: to be completed by AMHP Re-approval Panel.

**Comments/Observations from Panel:**

**Members of Panel:**

**Date of next Re-approval:**

**Signature of Panel Chair:**

**Guidance: Documentation and Presentation of Portfolios**

The following forms should be included in the portfolio:

1 each of Forms 1, 2, 3, 4 and 9

5 each of Forms 5, 6, 7 and 8.

Optional Form 10

All evidence concerning service users must be made anonymous.

AMHPs should meet regularly for AMHP supervision with their line manager/supervisor and have an annual review to discuss the requirements of their approved status and the completion of their portfolio. Form 5 should be completed at this time.

The portfolio should be presented in a logical way. Forms 11, 1, 2, 3 and 4 should be at the front of the portfolio. Three sections should follow to reflect each year of approved status. Each section should include forms 5, 6, 7, and 8 three pieces of written work, records of peer group meetings and other relevant evidence (see below). Where the AMHP has been unable to attend peer group meetings, it may be possible to include details of team meetings where particular AMHP practice issues have been discussed.

**Form 1: Record of Approved Status**

This should be retained and updated every five years.

**Form 2: Annual Checklist**

This should be completed by the AMHP each year and filed in the portfolio. It can be used to monitor that the AMHP is maintaining the requirements for Approved status. **A copy of this form must be returned annually to the AMHP lead for records.**

**Form 3: Report by AMHP**

The AMHP should complete this at the end of each five year period of approval. The Report should be reflective of experience and learning during the five year period and demonstrate awareness of current issues. An example of learning legislative requirements should be included e.g. understanding of the impact on AMHP practice of a Court ruling. A description of the work undertaken is not sufficient. This report will be presented to the Panel.

**Form 4: Statement by Line Manager**

This should be completed at the end of each five year period of approval. The Line Manager/supervisor must

* Verify the content of the portfolio
* Comment upon the operational need for the AMHP to be re-approved
* Confirm that the AMHP has undertaken their duties competently
* Include information about the arrangements for supervision of the AMHP in respect of their duties under the Mental Health Act 1983 as Amended by the Mental Health Act 2007. This is particularly relevant where the Line manager does not specialise in Mental Health work.

 **Form 5: Review of Practice and Development**

There should be one form 5 for each year of the approval. This must be completed with the line manager/supervisor every twelve months and should demonstrate developments in terms of experience and competence.

**Form 6: Record of Statutory Work Undertaken by AMHP (during each twelve-month period)**

There should be one Form 6 submitted for each twelve month period. These forms should list **all** the assessments.

The AMHP lead will audit 2 assessments per year and the feedback will be sent to the AMHP to add their portfolio evidence.

It is advised that discussion of the Form 6 should take place with the line manager/supervisor at each annual review in order to monitor the amount of work being undertaken by the AMHP.

It is recognised that at times individual AMHPS will have extenuating circumstances such as maternity leave, sickness and these will be looked at on a case by case basis.

**Form 7: AMHP Training Record**

This form is required to be completed for each twelve-month period as part of the annual review of practice and development. A minimum of 18 hours of relevant training per year is required. **A copy of this form must be returned to the AMHP lead annually with confirmation from the supervisor.** This is because under the regulations it is stated that if the 18 hours training is not completed, immediately upon becoming aware that the AMHP has breached this condition, the LSSA must end approval.

**Form 8: Supervision Record**

This should be completed for every 12 month period.

**Form 9: AMHP Re-approval Direct Observation Template**

This form is required to be completed for every period of approval. This will usually be a minimum of 1 direct observation per 5 years

**Form 10: - Service user/ Carer/ Nearest Relative Feedback**

This form is optional.

 **Form 11: Contents Checklist**

This should be presented at the front of the portfolio and will be completed by the Re-approval Panel.