Provision of Mental Health Assessments Out of Hours

All wards

Report authorised by: Phyllis Dunipace & Jo Cleary

Executive summary

The purpose of this report is to provide the Health and Adult Services Scrutiny Committee with an overview of the arrangements for the Out of Hours Approved Social Work provision in Lambeth: i.e. the responsibilities and circumstances in which Approved Social Workers are required to attend Mental Health Assessments.

Summary of financial implications

The Emergency Duty Service is funded within existing CYPS and ACS budgets.

Recommendations

(1) That the committee notes the report and that the Emergency Duty Service is responding in a timely manner to requests for Approved Mental Health Professionals (AMHP) out of hours.
Consultation

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<td>Jo Cleary</td>
<td>Executive Director of Adult Care Services</td>
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<td>Phyllis Dunipace</td>
<td>Executive Director Children &amp; Young People’s Service</td>
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<td>Fateha Salim</td>
<td>Legal and Democratic Services</td>
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<td>Dunni Komolafe</td>
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<td>Jenny Evans</td>
<td>Team Manager Emergency Duty Team</td>
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Report history

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Report author and contact for queries:

- Mike Benaim – Assistant Director - Children’s Social Care CYPS
- Visva Sathasivam - Assistant Director, ACS
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Background documents

NONE

Appendices

NONE
Provision of Mental Health Assessments out of hours

1. Context

1.1 The population of Lambeth has a slightly younger profile than the national average (45% of the population are aged between 20-39 years) and is also subject to high levels of mobility. Its other distinguishing factors are the high levels of ethnically diverse minority groups accounting for over 37% of the population (26% of whom are Afro-Caribbean or African) and with comparatively high levels of deprivation. All of these factors have some bearing, not only on the above average prevalence of mental illness in the community, but also on the higher level of acuity, even when compared to surrounding local boroughs. Primary care data for 2005/06 and 06/07 graphically demonstrates that mental health is by far the condition that has the most impact on people’s lives in the borough.

1.2 Mental Health Act 2007

One of the most important changes the Mental Health Act 2007 (MHA 2007) makes to the Mental Health Act 1983 is to allow a range of registered mental health professionals to undertake the functions previously carried out by Approved Social Workers (ASW) in the new role of Approved Mental Health Professionals (AMHP). Local Social Service Authorities (LSSA) are responsible for approving individual AMHPs, and also responsible for ensuring that sufficient AMHPs are available in their area to carry out their role under the Act. The regulations allow LSSAs to approve a range of registered and professionally qualified mental health professionals as AMHPs. These are: registered social workers; mental health/learning disability nurses; registered occupational therapists and psychologists. All applicants for AMHP have the appropriate competencies and meet the relevant professional requirements. Every AMHP is approved by an LSSA and is responsible for ensuring the AMHP is competent to practice in this role. The MHA 2007 has been fully implemented in Lambeth mental health services.

All AMHPs are statutorily accountable to the Executive Director of Adults’ and Community Services whilst undertaking their responsibilities under the Mental Health Act.

2. Service Provision

2.1 The Integrated Mental health service is delivered in partnership with South London & the Maudsley NHS Trust
There are three Community Mental Health sectors in Lambeth – all of which are co-terminus with the three practice-based Primary Care Commissioning Clusters. However, separate Assessment and Treatment (A&T) and Support and Recovery (S&R) and Rapid Response teams were retained in each sector. These generic community teams are composed of disparate staff from different disciplines, including community psychiatric nurses, psychologists and social work staff. In addition to the sector teams there are also separate Assertive Outreach, Home Treatment, Forensic and Lambeth Early Onset services.

2.2 Most of the social work staff are Approved Mental Health Professionals (AMHPs). It is the policy of the local authority that all social work staff should be trained to become Approved Mental Health Professionals.

2.3 Up to 90% of Mental Health Care in Lambeth is provided in Primary Health Care Settings, i.e. via 53 GP practices.

2.4 All referrals for a Mental Health Assessment received between 9-5pm are dealt with by local CMHTs. Referrals are taken by the duty AMHP and prioritised so that swift action can be taken when appropriate.

2.5 28 approved mental health professionals currently work in Lambeth Adult Mental Health Services and two staff are currently being trained to become AMHP. More staff are planned to start their training later this year.

3. Out of Hours Services

3.1 The borough-wide Emergency Duty Team is responsible for conducting out of hours Mental Health Assessments. Approximately 50% of the referrals to this team relate to vulnerable adults, mostly, but not exclusively, adults with mental health problems. The EDT is available to deal with crises/emergencies outside of 9-5pm Monday to Friday and, 24 hours a day during weekends and bank/public holidays. EDT staff ensure Mental Health Assessments are carried out and that immediate action is taken when appropriate. The team then pass the piece of work over to the daytime colleagues in the relevant team to continue the provision of services to the service user.

3.2 The team consists of 6 F/T approved social worker posts and 1 F/T team manager posts. Historically this has been a very stable team and most of the EDT workers are extremely experienced. Line management is provided through CYPS; however the budget is split 50/50 between CYPS and Adult Social Care services.

3.3 AMHPs aim to respond within one hour of receiving an Assessment referral and recent requests have all been responded to within this timescale. Delays in the process can occur, but these are usually after an assessment has taken place and there are difficulties experienced by AMHPs in accessing hospital beds. These are essential acute facilities following statutory Mental Health Assessments where the detention for treatment or observation of the person is required.
There has been no breach of the four hour target for patients to be seen in the A&E departments either at King’s or St.Thomas’s hospitals due to delay in conducting a Mental Health assessment.

3.4 Requests for an AMHP service tend to come from one of 2 sources:
- Referrals from the police to interview and assess a person removed to a place of safety or moved to another such place under Section 136/135 of the Mental Health Act.
- Referrals from the public, relatives, a GP, or other professionals to enter and inspect premises (other than a NHS hospital) in which a mentally disordered person is living if there is reasonable cause to believe the person is not under proper care under Section 115.

3.5 Referral Rates per Year

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<th>Out of Hours</th>
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<td>900</td>
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It should be noted that just over 50% of referrals for Mental Health Assessments originate in the community and just below 50% from institutional care – principally hospital wards.

4. Comments from Executive Director of Finance and Resources

There are no financial implications arising from approving this report. Any recommendation or improvement required will be met within existing budget within CYPS and ACS divisions.

5. Comments from Director of Legal and Democratic Services

5.1 To follow

6. Results of consultation

NONE

7. Organisational implications

7.1 Risk management:
There are 3 broad risks associated with this area of work

- Risk to reputation – carrying out Mental Health Assessments is a vitally important statutory function. Failure to carry these out properly will severely damage the reputation of the Local Authority and Health services.
Risk to the individual – Individuals who are mentally ill need effective assessment of their condition so that they can access appropriate treatment.

Risk to the public – some mentally ill people can, if unassessed and untreated, pose a serious risk to other members of the public. On rare occasions this could include the risk of homicide.

7.2 Equalities impact assessment:
Individuals suffering from mental illness are among the most vulnerable in our community. Historically there has been concern, on a national level, that members of certain ethnic groups tend to be over-represented in within this group. For both these reasons it is essential that Mental Health assessments are carried out in a sensitive and non-discriminatory manner and according to the highest professional standards.

7.3 Community safety implications:
See 7.1 above.

7.4 Environmental implications:
NONE.

7.5 Staffing and accommodation implications:
NONE

7.6 Any other implications:
NONE.

8. Timetable for implementation

N/A