

Summary of procedure for the referral for assessment and transfer to and from hospital (under part II of the Mental Health Act 1983) of a child in secure accommodation under welfare grounds in England

Version 2, 07 November 2022



WHO

Head of healthcare (or nominated member of staff) responsible for the secure setting's healthcare services

PROCEDURE

01

- Consider whether the child has the capacity or competence to consent to hospital admission and, if they do, ask if they would consent to admission for treatment.
- Notify the child or young person's social worker (who will liaise with the family as appropriate and their own approved mental health professional (AMHP) service local to the child's home area).
- Ring the children and young people mental health case manager (CYPMHCM) in the relevant specialised commissioning team (the one covering the young person's home area) for advice about the process and the level of security that might be needed, and to discuss the degree of urgency.
- Notify the GP and CYPMHS psychiatrist working in the SCH of the need for assessment.
- Notify the AMHP local to the SCH of the possible need for assessment under the Mental Health Act (MHA) 1983.
- Complete the first section of the access assessment referral form.
- Share the completed form with access assessor and CYPMHCM.
- Contact the commissioners in the Integrated Care Board (ICB) for the child's home area, to notify them that payment will be required for a second recommendation under the MHA 1983.
- Work with the clinician, health and other care staff to gather the background information that is needed to support the compulsory admission process and to complete the referral for access assessment.
- Keep the child as informed as possible, explained in a way they are able to understand.



WHO

PROCEDURE

02

Mental health casework manager or CYPMHS lead commissioner

Head of healthcare (or nominated lead) responsible for the secure setting's healthcare services

- Consider whether inpatient care is appropriate and, if so, which inpatient unit would be best for the child. Where it is considered appropriate for the child to be admitted to a medium secure unit, complete the appropriate section in the referral form and send to the ANMSU network unit nearest to the secure setting for consideration.
- Contact the AMHP in the area of the SCH to inform them that the child is in need of assessment under MHA 1983 and that the process of assessment prior to transfer to hospital has been initiated.
- Keep the AMHP fully informed of what happens from this point. The AMHP should be given contact details of the clinicians and commissioners involved.



WHO

PROCEDURE

03

Doctor (usually the SCH CYPMHS in-reach psychiatrist)

- Complete the part of the access assessment referral form that asks for medical information to establish within it the grounds for compulsory assessment and or treatment, as required by the MHA 1983.
- Send the referral form to the CYPMHCM in the relevant specialised commissioning team and to the access assessor in the relevant NHS England CYPMHS inpatient unit.



WHO

PROCEDURE

04

Mental Health Case Manager

- Two medical recommendations are required by the MHA 1983. These need to be completed on the statutory forms by two registered medical practitioners. In practice, one of the recommendations could be provided by the access assessor. The second medical recommendation could be provided by the GP, psychiatrist at the SCH and/or the doctor from the local mental health team. Liaise with the access assessor (the mental health clinician based at the inpatient unit, usually the unit's consultant psychiatrist) and the commissioning manager local to the SCH to determine who will provide the two medical recommendations required by the MHA 1983. One of the medical recommendations may be provided by the access assessor. Other doctors to consider include the GP, the psychiatrist at the SCH and/or the doctor from the local mental health team.

Note: If there are problems with any of the above arrangement or contacts, the matter should be escalated to the appropriate Mental Health commissioner at NHS England (the one in the specialised commissioning regional team that covers the child's home area). The Head of Healthcare (or nominated member of staff) at the SCH should also seek advice and help from the appropriate Health and Justice commissioner (the one in the regional team that covers the SCH where the child is placed).

WHO**PROCEDURE****05**

Head of healthcare (or nominated member of staff) responsible for the secure setting's healthcare services

- Keep the child informed about what is happening and what is likely to happen next. Notify people close to the child including the responsible local authority and the parents if deemed appropriate.

Note: If there is any delay in the process of a suitable bed becoming available there should be a discussion between the SCH, CYPMHCM at NHS England, the local CYPMHS team and the admitting team about what steps can be taken to provide interim support to the SCH to meet the child's needs.

WHO**PROCEDURE****06**

Approved Mental Health Practitioner (AMHP)

- Liaise with the clinicians carrying out the medical assessments and see the child together with the clinician carrying out the second assessment.
- Once the second assessment and report have been completed, if appropriate, make the formal application for compulsory detention for treatment to the unit where the child is to be admitted.

STOP POINT If the referral does not meet the criteria for admission

The relevant inpatient unit will report back to the doctor in the SCH and will give as much advice and support as possible about alternative treatment options, management of the child's care, and placement options.

Note: If, after the above advice, the SCH does not feel able to continue to meet the needs of the child, the Health and Justice commissioner responsible for commissioning the CYPMHS service in the SCH (the one local to the SCH) will need to meet with the multidisciplinary team in the secure setting, to discuss a care plan for the child and potentially offer to resource additional services in the interim.

WHO**PROCEDURE****07**

Head of healthcare (or nominated member of staff) responsible for the secure setting's healthcare services.

- Alert the responsible CYPMHCM and Health and Justice commissioner, to mediate and support an individual package of care, outside the dedicated, specialist CYPMHS service, that will enable the risk to be managed.

STOP POINT If a bed is found



WHO

Referring doctor and inpatient unit

PROCEDURE

08

- Verbally agree to the timescale and process for admission with written report following.

Note: Transfer should take place within seven days of making the referral for inpatient treatment. If it appears that this may be difficult to achieve, the Head of Healthcare (or nominated staff member) should notify the relevant CYPMHCM and the relevant Health and Justice commissioner.



WHO

Inpatient unit

PROCEDURE

09

- If necessary, a child can be transferred to a CYPMH inpatient service out of hours. Where admission does take place out of hours, or at the weekend or a bank holiday, alerts CYPMHCM to this on the next working day.