

## **SECTION 12 MENTAL HEALTH ACT ASSESSMENT POLICY FOR TRAINEES**

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## **SECTION 12 MENTAL HEALTH ACT ASSESSMENT POLICY FOR TRAINEES**

### **MHA assessments by Specialty Trainees in Psychiatry: Practice Guideline**

The assessment of patients and the making of formal recommendations for detention under the Mental Health Act (MHA) is a key skill required of senior psychiatrists. Experience of assessment under appropriate supervision is therefore an essential component of training.

Higher trainees (ST4-6) should all apply for recognition by the Secretary of State as having particular expertise in diagnosis and treatment of mental disorder (Section 12(2) approval). This permits them to undertake formal MHA assessments (often jointly with an Approved Mental Health Practitioner - AMHP) and to make specialist recommendation for detention. Trainees should actively seek such experiences as a necessary part of their training and should discuss such experiences as part of educational and clinical supervision sessions.

Local authorities and health authorities maintain a list of Section 12(2) approved doctors who may be called upon when an assessment is required. Trainees may choose to have their name on that list and to have their contact details made available to AMHPs seeking an approved doctor. However they should be careful not to compromise probity or ethical standards.

Trainees are formally contracted to provide a clinical service within their placement both during normal working hours and when on-call. This clinical service includes MHA assessments as necessary, e.g. within local Accident & Emergency departments, local police stations, home visits within the area served, etc. The parameters of these should be discussed with the educational supervisor as part of the induction to the placement.

**Outside of these parameters**, the provision of MHA assessments within normal working hours or when on-call is **not acceptable**. It takes the trainees away from their contracted duties within their normal place of work and makes them unavailable for emergencies. It amounts to unauthorized absence from work and as such could lay a trainee open to disciplinary proceedings.

The provision of MHA assessments outside of normal working hours and when not on-call is a matter between the trainee and the requesting AMHP. However trainees should be aware that undertaking such assessments and making recommendations for detention does constitute unsupervised independent practice at a career stage before award of their Certificate of Completed Training (CCT), notwithstanding their approval within Section 12(2) MHA.

### **Claiming Fees for Section 12 Work**

During normal working hours, a doctor within the training scheme who undertakes a Mental Health Act Assessment and completes a medical recommendation **will not be allowed to claim a fee** (this avoids a doctor being paid twice for the same work, which is a disciplinary matter). The new consultant contract makes this very clear and therefore the consultant on-call (or the higher trainee training with that consultant) would not be expected to claim payment for a Mental Health Act Assessment.

### **Indemnity for Section 12 Mental Health Act Assessments**

Trainees benefit from NHS Litigation Authority indemnity (NHSLA Website, CNST page) but this only covers assessments that had been undertaken as part of the contract with their base Trust, i.e. these assessments would normally be undertaken by a consultant or the trainee as the named deputy. Indemnity would not cover trainees who undertake Section 12 assessments as the second mental recommendation, because this is extra contractual work and attracts a separate fee.