

Mental Health Crisis Care Concordat – Improving Outcomes for People Experiencing Mental Health Crisis

Summary

Updated non-statutory guidance has been issued by the Department of Health and partner agencies, aimed at tackling and preventing mental health crises, and improving outcomes for those experiencing such crises.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281242/36353_Mental_Health_Crisis_accessible.pdf.

Status:

Non-statutory guidance, issued by the Department of Health and partner agencies.

Overview

The Concordat builds on and does not replace existing guidance. Current service provision should continue while the improvements envisaged in this document are put in place.

Provisions include:

Local Mental Health Crisis Declarations

The Concordat expects that, in every locality in England, local partnerships of health, criminal justice and local authority agencies will agree and commit to local Mental Health Crisis Declarations. These will consist of commitments and actions to embed the principles of the Concordat into service planning and delivery at a local level.

This should include:

- A jointly agreed local declaration across the key agencies that mirrors the key principles of the national Concordat – establishing a commitment for local agencies to work together to continuously improve the experience of people in mental health crisis in their locality;
- Development of a shared action plan and a commitment to review, monitor and track improvements;
- A commitment to reduce the use of police stations as places of safety, by setting an ambition for a fast-track assessment process for individuals whenever a police cell is used; and

- Evidence of sound local governance arrangements.

Local Protocols use of Police Powers under the Mental Health Act

Every area should have a local protocol in place, agreed by NHS commissioners, the police force, the ambulance service, and social services. This should describe the approach to be taken when a police officer uses powers under the Mental Health Act.

These local protocols should ensure that:

- When the police make contact with health services because they have identified a person in need of emergency mental health assessment, mental health professionals take responsibility for arranging that assessment;
- Individuals in mental health crisis are taken to a health based place of safety rather than a police station. The Mental Health Act Code of Practice states that 'a police station should be used as a place of safety only on an exceptional basis'. Local protocols should set out an agreement about what constitutes a truly exceptional basis, for example seriously disturbed or aggressive behaviour. Local Mental Health Crisis Declarations should include local ambitions to reduce the use of police cells as places of safety;
- Protocols should help to ensure that police custody is never used as a place of safety for children and young people, except in very exceptional circumstances where a police officer makes the decision that the immediate safety of a child or young person requires it. Even in cases where police stations are used, the use of cells should be avoided, and alternatives considered wherever possible.

Commissioning

Accommodation and facilities, including community based solutions, designed to be suitable for patients younger than 18 years must be commissioned at a level that ensures local provision in response to a young person in urgent need.

Quality and Treatment and Care for Children and Young People in Crisis

If a child or young person needs treatment, the first principle should be to treat at home or in the community if possible. If treatment is needed in an inpatient bed, local accessibility is important, so that the young person is close to home, friends and school, so long as none of these is contributing to the crisis. Units attached to adult wards in mental health hospitals can be used as places of safety if child-dedicated facilities are unavailable – under the Mental Health Act 2007, hospitals should provide 'age-appropriate' facilities that are separate from adult wards.

Young people need easily accessible and age appropriate information about the facilities available on the inpatient unit, geared towards their specific needs. This includes information on their rights and how to complain. They require extra support to settle in from a single key worker who remains the same throughout their stay where possible. They should be able to phone their families and friends. The units need to be safe, warm and decorated at an appropriate age level, and not appear to be an institution. Families should have regular meetings with the ward staff.

Training

Each statutory agency should review its training arrangements on a regional basis and agree priority areas for joint training modules between NHS, social care and criminal justice organisations. Although it is desirable that representatives of different agencies be trained together, it is not essential. It is more important that the training ensures that staff, from all agencies, receive consistent messages about locally agreed roles and responsibilities.

Contact Us

Unit 1150 Elliott Court, Herald Avenue, Coventry Business Park, Coventry CV5 6UB

www.trixonline.co.uk

T: 024 7667 8053

Copyright: The content of this Policy Briefing can be accessed, printed and downloaded in an unaltered form, on a temporary basis, for personal study or reference purposes. However any content printed or downloaded may not be sold, licensed, transferred, copied or reproduced in whole or in part in any manner or in or on any media to any person without the prior written consent of Tri.x.

