

What is an AMHP?

AMHP stands for Approved Mental Health Professional, they are normally social workers (but can be Nurses, OTs and Psychologists) that have been approved by a social services authority to carry out certain duties under the Mental Health Act. They are responsible for many roles under the Mental Health Act but the major remit of their role is coordinating Mental Health Act assessments and making an application for admission to hospital if necessary.

To complete a Mental Health Act Assessment requires, with some exception, two Doctors and an AMHP. The Doctors role is to determine whether someone is suffering from their Mental Health and requires treatment, if the doctor believes hospital admission is required they can complete a medical recommendation. It is the AMHPs role to consider the person in the wider context of their life and to make the final decision whether hospital admission is the most appropriate and proportionate response.

AMHPs also have the responsibility of locating and communicating with the Nearest Relative, relaying legal information and rights as well as responsibility for conveying the individual to hospital if they are admitted.

Other roles an AMHP can carry out are assessing someone for Community Treatment Orders, making applications to bring someone into Guardianship, applying for warrants to remove someone to a place of safety or to return them back to hospital, displacing Nearest Relatives where necessary.

Requests for MHAA can come from anyone who has concerns about someone's MH this can be a relative, The Police, A&E, Doctors on both Physical and Mental Health Wards, GP's, Care homes, Mental Health Crisis Teams, and home care support agencies.

Day in the life of an AMHP:

AMHPs work with highly emotive content on a daily basis, they come into constant contact with acutely unwell individuals in their most vulnerable moments and have to navigate often dangerous situations where risks are posed to the individual and others. They often have to work very quickly to build a rapport with the individual who is unwell and likely to be mistrusting of professionals and ensure that the individual is empowered to express their voice. AMHPs have to balance this building of trust with the honesty about their role and powers they have under the MHA and all of this needs to be completed in a time-limited intervention.

In Nottinghamshire County Council, The AMHP team work 12 hour shifts covering Mental Health Act Assessments 24/7 and across the whole of Nottinghamshire from the North of Bassetlaw to the south of Broxtowe. They are on call during the night and cover weekends and bank holidays. In any 12 hour period an AMHP could be doing anything from 1 – 4 assessments, this does not sound like much when broken down but each assessment can take anywhere from 3 hours to 6 plus hours depending on the circumstances of the individual and the availability of external resources such as Mental Health beds, transport and support from emergency services like the Police or Ambulance.

On average the AMHP team receive around 200 referrals a month and complete around 200 plus assessments a month, these stats show an increase of 19% since last year (2022). In addition to this the team are receiving a higher than ever number of children referrals.

Total number of MHA assessments:

	2019	2020	2021	2022	2023
January	168	145	138	123	160
February	139	139	152	136	180
March	143	133	183	182	202
April	129	135	130	168	230
May	157	152	144	193	246
June	142	140	162	145	223
July	180	137	188	177	216
August	180	138	170	206	202
September	151	149	150	181	215
October	150	156	149	173	228
November	146	153	140	223	181
December	159	145	132	179	195
Total	1844	1722	1838	2086	2478

Comparison of data over the last 12mth period reflects a 9% increase in referrals for Mental Health Act assessments, and a 19% increase in the completion of Mental Health Act assessments from 2022. Over the past 5 years the AMHP team have averaged just under 2000 mental health act assessments each year. This increase is echoed across the system partners data in terms of demand and resource pressures. The acuity and complexity of individuals is noted, however it has been difficult to quantify this – people appear more unwell at the point of assessment than in previous years.