

The Role and Duties of an Approved Mental Health Professional

An AMHP is an acronym of “Approved Mental Health Professional”. This title came about following introduction of the Mental Health Act 2007 (which amended the Mental Health Act 1983 when we were known as Approved Social Workers). The Mental Health Act lays down the legal framework in which people can be compulsorily admitted and detained in psychiatric hospitals and the AMHP has a key role to play in this. It covers members of the public who might become mentally disordered, as well as people who have committed criminal offences and who have gone to court, but who may need assessment or treatment for mental disorder.

Except for people who are dealt with through the courts, the involvement of an AMHP is necessary in order to make decisions about whether or not someone needs to be admitted. Assessing doctors can make recommendations that someone should be detained in hospital, but it is up to the AMHP to make the final decision. It is possible for AMHPs to have two medication recommendations from the doctors and choose not to immediately make an application, giving the patient a short period of time to, say, engage with services/comply with medication in an attempt to avoid hospital admission (one of our principles is to practice in the least restrictive manner). It is also the responsibility of the AMHP to ensure that the law is being applied correctly.

An AMHP can be a social worker, a psychiatric nurse, an occupational therapist or a clinical psychologist (but not a medical doctor). We have to comply with statutory requirements including attending 18 hours relevant training per year, and succeed in getting through a re-approval process every 5 years.

The AMHP role is a complex one. It is also unique among the tasks of social workers and other mental health professionals in that the AMHP is acting as an autonomous professional rather than an agent of their employers, whether it be a local authority or an NHS Trust. An AMHP cannot be told by a manager to “go out and section” someone. All they can be asked to do is to conduct an assessment under the MHA and reach their own conclusion based on all the evidence.

AMHPs have to undergo extensive specialist training, and therefore have an in depth knowledge of law and have the responsibility for upholding the law when conducting assessments under the MHA. They can use that knowledge to ensure that the rights of those being assessed are protected, and can provide a counter to the medical model of mental health, introducing a more rounded social perspective to the process. They need to use their knowledge not just of mental health legislation but also the Human Rights Act and other legislation, such as the Mental Capacity Act. This can give them the confidence to disagree with the doctors, and to seek out and suggest alternatives to hospital admission.

The AMHP will draw on all the information available on that individual, not just the medical and clinical factors. This includes their individual social and cultural circumstances, the possible risks and protective factors, as well as their knowledge of mental illness and the legal process, in order to try and reach a just and equitable conclusion which will balance the rights of the patient with their possible need for protection and treatment.

AMHP powers:

- The power to make an application for compulsory admission to hospital under Sec.2, Sec.3 or Sec.4
- The power to make an application for guardianship under Sec.7
- The power to convey the patient to hospital or to authorise others to do so

- The power to enter and inspect premises – other than a hospital -- where someone is not receiving proper care
- The power to apply for a warrant to search for and remove patients or persons living alone in need of care under Sec.135(1)
- The power to remove and return patients within UK, or to take or re-take detained patients absent without leave (S.18 and S.138)

AMHP duties:

- The duty to interview the patient “in a suitable manner” (Sec 13(2).
The duty to respond to a request by a Nearest Relative to assess someone under the MHA (Sec.13(4))
- The duty to consult the patient’s Nearest Relative when considering a Sec.3 (or guardianship)
- The duty to inform the patient’s Nearest Relative when detaining under Sec.2
- The duty to interview a person removed to a "place of safety" by police under S.136
- The duty to consider an application for a patient to be made subject to Supervised Community treatment under Sec.17A