

## **T. Care Programme Approach Policy**

### **– 3. APPENDIX 2: SECTION 117 AND AFTER-CARE**

**POLICY NUMBER: 07**

<b>DOCUMENT CONTROL</b>
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<b>Title of Policy</b>	<b>Section 117 And After-Care</b>
<b>Application</b>	<b>Devon Partnership Trust and Devon County / Torbay Social Services</b>
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## 1. INTRODUCTION

This policy is based very closely on the Mental Health Act and the Mental Health Act Revised Code of Practice. All people making use of this policy are reminded to take note of the Mental Health Act Revised Code of Practice and the Trust CPA Operational Policy. In the event of a discrepancy between this policy and the Mental Health Act and the Mental Health Act Revised Code of Practice, the latter will take precedence.

## 2. APPLICABILITY

Section 117 of the Mental Health Act 1983 applies to patients who have been detained under section 3, 37, 45A, 47 and 48.

Prior to 1983 no statutory provision was made for the after-care of patients discharged from hospital. Section 117 states that:

*It shall be the duty of the health authority and local authority to provide in conjunction with voluntary agencies, after-care services for any person to whom this section applies, until such time that the health authority and local authority are satisfied that the person concerned is no longer in need of such services.*

## 3. PROCEDURE

### **3.1 RMO Responsibilities**

Before the decision is taken to discharge a patient or grant leave, the RMO is responsible for ensuring that:

- The patient's needs for health and social care are fully assessed and the care plan addresses these needs (in consultation with the **Care Co-ordinator** and other professionals concerned);
- An appropriate assessment is made of the risks to the patient or other people;
- In the case of offender patients, the circumstances of any victim and their families are taken into account; *and*,
- Consideration is given to whether the patient meets the criteria for after-care under supervision, or under guardianship.

### **3.2 Section 117 After-care / CPA Planning Meeting**

**The four key elements of the CPA are:**

- A systematic assessment of health and social care needs.
- A care plan, agreed by the patient, carer, and professionals involved with the care.
- A care Co-ordinator allocated to co-ordinate the care plan and act as main point of contact for the patient and carers.
- A regular review of patient's care plan and progress.

All patients entitled to Section 117 after-care will also be subject to the Care Programme Approach (CPA), which applies to all patients who are receiving treatment from the specialist Mental Health Services. Providing all of the following points are dealt with in the 117 meeting, there should be no reason to have separate CPA and discharge meetings. The Care Co-ordinator should not be appointed unless they are present at the meeting, or they have given prior permission.

Before the decision is taken to discharge or grant leave to a patient, it is the responsibility of the RMO to ensure, *in consultation* with the Care Co-ordinator and other professionals concerned, that the patient's needs for health and social care are fully assessed and the Personal Plan (care plan) addresses them.

Those who must be involved on consideration of the patient's after-care needs include:

- The patient, if he or she wishes and/or a nominated representative/advocate;
- The patient's RMO;
- Named nurse;
- The care co-ordinator (responsible for health and social care);
- GP;
- Carer (with the service users agreement);
- A representative of relevant voluntary organisations, (where applicable).

Those who also can be involved, subject to the patient's consent include:

- Any informal carer who will be involved in looking after the patient outside hospital;
- The patient's nearest relative.

Prior to this meeting taking place, the patient's named nurse should explain to the patient, what the meeting is about, who will be at the meeting, and what will be discussed. The **aim** of the meeting is to draw up an **after-care plan**, based on the most recent multi-disciplinary assessment of the patient's needs.

When the care plan is agreed, the team should ensure that a Care Co-ordinator is identified to monitor the care plan. The Care Co-ordinator should be the person who is best placed to oversee care planning. It is critical that the Care Co-ordinator should have the authority to co-ordinate the delivery of the care plan and that is respected by all that are involved in delivering it, regardless of agency of origin. A detailed record of the Section 117 meeting should be recorded on the Record of After-care arrangements; copies should be circulated to all those involved and to the local Mental Health Act Administrator.

**N.B.** Where the responsible local authority is not the same as the Devon Partnership authorities e.g. Plymouth, that local authority must have representation when considering after-care plans.

### **3.3 Financial Implications Of Section 117**

Where Section 117 entitlement is in place, Local Authorities cannot charge for any after-care service provided. Social Care Services arranged after discharge and not agreed as part of the hospital discharge care plan will be provided under other legislation, such as the National Assistance Act 1948 or the Chronically Sick and Disabled Persons Act 1976. These services would incur a charge in the normal way.

Where a patient is subject to Section 117 those involved should also ensure that the following requirements are met:

- **Joint funding arrangements** for the after-care plan must be agreed before the after-care plan is put in place;
- Details of **all** services that will be provided to the client upon discharge, including volumes, should also be clearly stated in the plan;
- The client should be informed in writing about the financial implications of Section 117 using the letter in Appendix 1;
- If there is to be any change of care plan as a result of a **Section 117 review**, it must be documented clearly that Health and Social Services are in agreement with the change, and is a continuation of the Section 117 arrangements.

### **3.4 Mental Health Review Tribunal And Manager's Hearing**

The courts have ruled<sup>1</sup> that in order to fulfil their obligations under Section 117, Health Authorities and Local Authority Social Services Departments must take reasonable steps to identify appropriate after-care facilities for a patient before his or her actual discharge from hospital. It is good practice, and therefore a requirement, to hold a Section 117/CPA meeting including social services and other relevant professionals and agencies, prior to a Manager's Hearing or a Mental Health Review Tribunal (MHRT). This will enable contingency plans to be put in place if the Hearing discharges the patient. An up to date care plan with a proposal or options as how to it can be implemented must be made available to the Hospital Managers and the MHRT.

### **3.5 Patients Moving To Another Area**

Where a patient, who is subject to section 117 after-care, moves from the area where he or she is being cared for, a joint case conference should be held between – those who are currently providing his/her after-care and those who will be providing his/her after-care in the future. Responsibility will remain with the original multi-disciplinary team unless and until both the health authority and local authority are satisfied that the patient no longer needs any after-care services for his or her mental health needs or upon the patient moving to the new area, that the patient is subsequently admitted under the relevant sections of the Mental Health Act 1983 to which section 117 applies. If the latter situation arises then such an admission would trigger the duty to provide after-care services under section 117 and in turn, this would require the preparation of a new after-care plan by the authorities in the new area.

### **3.6 Termination Of Section 117 After-care**

The decision to terminate section 117 after-care provision is the **joint** responsibility of the health provider **and** the local authority. This decision will usually be made at a **review meeting**, when the RMO and the multi-disciplinary team has recommended that after-care under section 117 is no longer required. This decision can only be reached if the patient's progress has been monitored in the community since discharge. In addition, the joint decision to terminate section 117 after-care should be on the basis that the patient no longer needs **any** after-care service. Consideration should be given to discharging the section if the client has been stable, no longer requires any after-care service to address or treat an assessed mental health need – for instance in residential and/or nursing care – and would not be at risk of being re-admitted to hospital if the after-care plan was no longer in place. However if social care services are provided for reasons other than mental health they can continue to be provided under the NHS and Community Care Act 1990. This may result in the client being required to make an assessed contribution towards the cost of their social care.

The RMO must ensure that all members of the multi-disciplinary/agency team, or their representatives attend the review but in most instances the RMO will delegate this responsibility to the **Care Co-ordinator**. Once a decision is made to discharge a patient from the section the medical records office will be notified using the form at Appendix 3.

All service users discharged with Section 117 after-care arrangements in place should have their care reviewed with in three months from the date of discharge, and following that at least annually.

#### 4. SOURCES / EVIDENCE

- Mental Health Act 1983
- Mental Health Act Revised Code of Practice
- Effective Care Co-ordination in Mental Health Services
- CPA Operational Policy

#### 5. NAMES OF THOSE LEADING THE DEVELOPMENT OF THE POLICY

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#### 6. ACKNOWLEDGEMENTS

Erik Salomonsen, Bond Pearce Solicitors

Tony Sweeney, Devon County Solicitor's Department

## **7. Appendix 1 – Draft Standard Letter** **– Section 117 After-Care**

Dear

Following your period of mental ill health, services have been arranged for you to help with your recovery and to help you settle back into the community.

This service was arranged for you through the Social Services Department who are usually required by law to make a charge towards the service according to your financial situation. As you were detained in hospital under Section \_\_\_\_ of the Mental Health Act 1983, you are entitled to after-care services under Section 117 of the Act. This is a joint responsibility between Social Services and Devon Partnership NHS Trust. This means that whilst this section is in place, you will receive after-care services **free of charge**. (This applies only to after-care services agreed at your Section 117 meeting before you leave hospital and/or services that form part of your agreed care plan upon any subsequent review of your section 117).

Your situation will be kept under regular review with and may result in you being discharged from Section 117 upon a joint decision taken by Social Services and Devon Partnership NHS Trust.

When you are discharged from Section 117, you may become subject to any charging arrangements, which exists at that time towards any service you may need.

If you have any concerns or questions about your status under the Mental Health Act 1983 or your services, please contact your Care Co-ordinator \_\_\_\_\_.

Yours sincerely

## 8. Appendix 2

### RECORD OF SECTION 117 AFTER-CARE ARRANGEMENTS

<b>Name of Patient</b>
<b>Responsible Medical Officer</b>
<b>Date of Meeting</b>
<b>Name of Care Co-ordinator</b>

<b>People invited:</b>			
RMO	<input type="checkbox"/>	Named Nurse	<input type="checkbox"/>
Care Co-ordinator	<input type="checkbox"/>	Patient	<input type="checkbox"/>
GP	<input type="checkbox"/>	Patient Relative/Rep	<input type="checkbox"/>
Other	<input type="checkbox"/>		

<b>People attending (name and function)</b>	
SAMPLE	
RMO	<input type="checkbox"/>
Named Nurse	<input type="checkbox"/>
Care Co-ordinator	<input type="checkbox"/>
Patient	<input type="checkbox"/>
GP	<input type="checkbox"/>
Patient Relative/Rep	<input type="checkbox"/>
Other	<input type="checkbox"/>

<b>Copies of this form have been given/sent to:</b>			
the patient	<input type="checkbox"/>	the Care co-ordinator	<input type="checkbox"/>
the patient's GP	<input type="checkbox"/>	other	<input type="checkbox"/>
medical notes	<input type="checkbox"/>		
MHA Administrator	<input type="checkbox"/>		

This form has been designed to help the RMO fulfil his/her responsibilities under Section 117, Mental Health Act 1983. Further detail may be found in the Trust Policy and Protocol Documents.

Enter details of the arrangements agreed overleaf.

**RECORD OF SECTION 117 AFTER-CARE ARRANGEMENTS**

**NEEDS CHECKLIST**

<b>NEED</b>	<b>ARRANGEMENTS</b>	<b>NAMED RESPONSIBILITY</b>
Accommodation		
Treatments, inc medication	SAMPLE	
Outpatient appointment		
Care Co-ordinator		
Support and counseling		
Finances and welfare		
Day care		
Risk assessment and management		
Contingency plans		
Social and Occupational		
Supervised Discharge Supervision Register		
Expected review date		
Unmet need		
Other		

### Appendix 3

<b>Devon Partnership Trust                  &amp;                  Devon &amp; Torbay Social Services</b>
<b>Care Programme Approach</b>

CPA  
 Termination of  
 After-care (S117)

SS Case No:
NHS No:
Hosp No:

Patient Details	Care Co-ordinator Details
Name:	Name:
Address:	Work Address:
Postcode:	Telephone Number:
After-care requirements under section 117 of the Mental Health Act 1983 are terminated because:- <p style="text-align: center;"><b>SAMPLE</b></p> (Please tick relevant box and complete details)	
<input type="checkbox"/> 1. Death of Client Date of death ____/____/____	
<input type="checkbox"/> 2. After-care no longer required Date of review meeting ____/____/____ Reasons for cessation of requirements:	
<input type="checkbox"/> 3. Patient detained on a Restriction Order Date of Order ____/____/____ Section of 1983 Mental Health Act _____	
Other relevant details:	

All meeting attendees to sign:

Name	Signature	Designation
_____	_____	_____
_____	_____	_____
_____	SAMPLE	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Signed: _____ Care Co-ordinator    Date: ____/____/____		
Distribution:-  RMO Medical Records Social Services Master File		