



## JOB DESCRIPTION

<b>Job Title:</b>	Mental Health Legislation Administrator
<b>Band:</b>	5
<b>Reporting to:</b>	Deputy Head of Mental Health Legislation
<b>Accountable to:</b>	Head of Mental Health Legislation
<b>Location:</b>	TBC

### JOB PURPOSE

The role of Administering the Mental Health Act (MHA) has been formally delegated by the Hospital Managers (the Trust) to the MH Legislation Administrator (MHLA).

### JOB SUMMARY

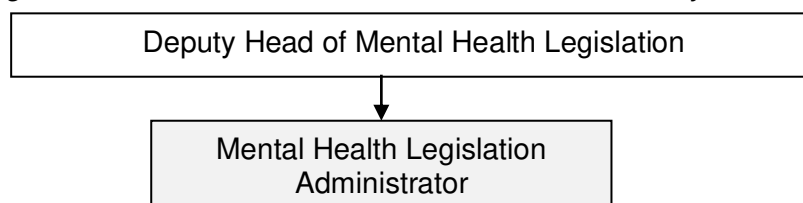
To administer the MHA in accordance with statutory requirements, including MHA Reviews - Tribunals and Lay Manager - within the required timescales and statutory guidelines. To provide assistance for audit and research as required.

To administer the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS) – and any proceeding legislation - on behalf of the Trust.

To ensure the Trust meets all of the requirements of current legislation and best practice guidelines on all MHA issues

### Organisational Chart

*Department organisational chart, which identifies where the vacancy is and reporting relationships*



### Key Communications and Working Relationships:

**Internal:** Head of MHL; Chief MHL Officer; Deputy Medical Director (MHA); Associate Directors; Clinical Directors; Clinical Nurse Managers; Ward/Team Managers; Matrons; Legal Department; Care Records Manager.

**External:** Care Quality Commission; Solicitors; The Tribunal; Lay Managers; Courts; Ministry of Justice; Police; IMHAs; External Hospitals; patients; carers.

### **Principal Duties and Responsibilities**

- Write to patients and their nearest relative (where appropriate) to inform of their detention under the MHA, including CTOs using Trust standard letters.
- Provide patient information leaflets regarding detention under the MHA.
- Include information for patients on their rights to appeal to the Tribunal and / or Lay Managers
- Supply information on gaining a solicitor to the ward staff
- Maintain records of what information has been given out
- Provide information to patients on the role of the Care Quality Commission (CQC)
- Hold a list of s12 approved doctors / Approved Clinicians (ACs)
- Ensure there is a record of when a patient's Responsible Clinician (RC) changes
- Ensure there is a record of internal transfers
- Maintain confidentiality and know when it is appropriate and acceptable to share patient information (CoP ch10)
- There may be occasion where the Trust is contacted by a third party where Fixation or Threat is an issue in relation to a specific patient. If the named patient takes leave, goes AWOL, is discharged onto Community Treatment Order (CTO) or discharged from section the MHL Administrator will co-ordinate and be responsible for liaising with the Fixation and Threat Unit in London, the Trust Secretary and the Head of MHL.
- To consult on and influence the development of policies and procedures relating to the MCA and the MHA.

### **Legal Paperwork**

- The MHLA has overall responsibility on behalf of the Trust for the proper receipt and scrutiny of MHA section papers and all other legal paperwork pertaining to MHA detention.
- To train nurses on receipt of section paperwork as the Trust have to hold a live register of those trained for receipt
- On a day to day basis, take responsibility for DoLS matters, including recording of applications; outcomes; appropriate reminders to clinical staff regarding the expiry of DoLS authorisations; and dealing with other documentation issues such as statutory reporting.
- Maintain accurate records of all steps in both the MHA and DoLS processes, including manual, standalone and NHS database systems, maintenance of accurate diary and filing systems.

- Scrutiny involves a more detailed check for omissions, errors and other defects under section 15 of the MHA and taking action to have the documents rectified following standard trust procedures
- Even if the papers are received by someone else (i.e. ward staff out of hours), the MHLA must scrutinise as soon as possible for accuracy and completeness and check they do not reveal any failure to comply with the statutory requirements of the MHA in respect of applications
- Although there is no provision under the MHA to rectify Community Treatment Order (CTO) paperwork, the MHLA must still scrutinise it to ensure it is correctly completed as significant errors may invalidate the authority to detain the patient.
- Be available to assist / advise the RC with completing the forms where required.
- Maintain an accurate database on DoLS applications made, extracting data as required to provide centralised quarterly and annual reports. Extracting, analysing and interpreting data, as required
- Ensure the standardised process is followed to flag up when a patient's section / CTO renewal/extension is due 2 months prior to section expiry date.
- Ensure the RC is notified of the pending expiry and that they complete the section / CTO renewal / extension within the statutory timescales
- To attend bed management meetings as and when appropriate to keep up to date with patient activity and act on relevant actions including chasing warrants and liaising with prisons, when necessary.
- To receive and distribute MAPPA forms, as appropriate, keeping up to date spread-sheets and attending quarterly meetings, as and when relevant

### **Tribunals**

- Must be familiar with the requirements of the Tribunal and the procedural rules and Practice Directions by which it operates. The rules place a statutory responsibility on the MHLAs to provide the Tribunal with a statement of authority (relevant facts) together with certain reports.
- MHLA must ensure that they follow the standardised Trust systems in place to alert the need for a review
- Refer any patient detained under Part 2 of the MHA to the Tribunal after six months if they haven't appealed
- Refer patients who have not had a Tribunal in three years to the Tribunal or 1 year if under 18.
- Refer all CTO patients to the Tribunal if they have not had a hearing within the previous six months
- Refer all patients who are revoked from CTO to the Tribunal immediately
- Refer all appeals against detention under the MHA to the Tribunal

- Ensure the Tribunal is notified immediately of any events or changes that might have a bearing on Tribunal proceedings
- Ensure that the relevant professionals are aware of the Tribunal
- Ensure that reports, documents and information are provided in accordance with the Tribunal's Practice Directions
- MHLA must send the reports to the appropriate Tribunal office by secure fax or e-mail in good time
- Ensure that suitable accommodation is available and prepared for the Tribunal in accordance with Tribunal Accommodation Practice Directions.

### **Lay Manager Panels**

- Ensure all patients receive the appropriate information regarding their rights to appeal to Lay Managers
- Co-ordinate all requests for a Lay Manager panel for appeals against detention
- Co-ordinate all Lay Manager panels for review of section renewals / CTO extensions
- Inform the nearest relative where appropriate, of the hearing
- Contact Lay Managers to obtain three members to sit on each panel
- Ensure all reports are received in good time and in accordance with Trust standards
- Ensure appropriate accommodation is available and prepared as for Tribunal accommodation.
- Provide Lay Manager panels with the appropriate documentation and collect it back at the end of the hearing to be filed in the patient's care record.
- Arrange Consideration Hearing panels for the barred Nearest Relative requests for discharge
- Arrange a full hearing – when necessary – for a Nearest Relative request for discharge

### **Consent to Treatment Responsibilities**

- Calculate time spans for when consent to treatment regulations apply using standardised Trust procedures.
- MHLAs must ensure that Trust procedures are followed to ensure RCs are reminded and the patient informed at least 4weeks before the expiry of the three month period that authority will be required for treatment to be prescribed and administered.
- MHLAs must ensure that Trust procedures are followed to ensure RCs are reminded for all CTO patients within the first month of Community Treatment Order (CTO) that authority will be required for treatment to be prescribed and administered.
- MHLA will keep a record of the SOAD (Second Opinion Appointed Doctor) request following receipt/advise from RC that a SOAD has been requested
- Ensure all relevant documentation is available for the SOAD visit

- Ensure appropriate professionals aware of the visit so that they can make themselves available if they are to act as Statutory Consultee
- Ensure T3 certificates, once received are scanned and uploaded to the patient's care record and a copy provided to the ward.

### **Education and Training**

- To provide training for all qualified nurses on receipt of section papers.
- Undertake training and development in order to ensure up to date knowledge of case law in relation to the MHA and DoLS, as well as continuing professional development.
- To attend other Mental Health Legislation Offices within the Trust for at least one week during the course of the year, to develop knowledge of wider practice.
- All staff have a responsibility to participate in regular appraisals with their manager to identify training and developmental needs.
- Provide on-going training and support for the Mental Health Legislation Assistants.

### **Responsibility for Staff**

- The post holder, as part of the Mental Health Legislation Team, will be expected to supervise and manage Mental Health Legislation Assistants within their office and assist them with their roles within the team.
- The post holder, as part of the Mental Health Legislation Team, will be expected to carry out regular management supervision and annual development reviews with Mental Health Legislation Assistants
- To be responsible for recruitment and selection, training and development, and managing annual leave of Mental Health Legislation Assistants
- To manage sickness absence and undertake return to work interviews for Mental Health Legislation Assistants following periods of absence, adhering to the Trust's Sickness Absence policy and procedures
- To be responsible for the authorisation and calculation of annual leave / carers leave entitlement, ensuring accurate records are kept on ESR
- The post holder will support local induction of administrative staff into the Mental Health Legislation administration team.

### **General**

- To provide support and cover for other Mental Health Legislation staff across the department, sharing the workload in the event of sickness, annual leave or times of pressure.
- Although you will have a permanent base identified, in the event of a long term absence or service need you may be relocated to another MHL Office within the Trust.
- To assist with any internal audit that may be required by senior management.

- To provide activity reports as and when required by the Mental Health Legislation Management Team.
- Attend monthly Mental Health Legislation Administrators meetings on a regular basis.
- Order and maintain stationery and office equipment required for the team.

### **Organisational**

- To be responsible for ensuring confidentiality of personal data under the Data Protection Act is met in respect of all information held within the Trust
- To be responsible for reading, understanding and complying with all relevant Trust and Statutory Policies and Procedures.
- To be responsible for ensuring the security of both electronic and manual patient information. This information should be kept safe and secure at all times; adhering to the Trust's 'Security of Information Policy'
- To attend Mandatory training and team away days, and actively participate in new developments within the Department and the Trust.
- To be responsible for participation in the Trust's Appraisal / PDP process, identifying your own mandatory, professional and personal development and training needs.
- To undertake any new service improvements / modernisation initiatives.
- To adapt well to change in the light of the developing service.
- The post-holder as an individual is required to understand their responsibility for respecting and promoting issues of equality, diversity and rights in accordance with good practice and legislation.

## **General**

### Confidentiality

It is a condition of employment that staff will not disclose any information obtained in the course of their duties other than to those entitled to receive it. The post holder must ensure that the confidentiality of personal data remains secure and the terms of the Data Protection Act and relevant trust policies are met in respect of information held on the Trust's computerised systems.

### Equal Opportunities

The Trust is committed to equality of opportunity. All staff are required to comply with current legislation, trust policies and guidance good practice and the NHS Executive's Planning & Priorities Guidance 1996/7.

### Conduct

It is expected that all employees will conduct themselves and represent the Trust in a responsible manner and comply with all policies and procedures;

### Risk Management and Health & Safety

The post-holder will ensure compliance with the Trust's Risk Management policies and procedures; these describe the Trust's commitment to risk management, the recognition that our aim is to protect patients, employees and visitors from harm, and stress that all employees have a responsibility to minimise risk. The post-holder will be required to observe local Health & Safety arrangements and take reasonable care of him/herself and the persons that may be affected by his/her work;

### Safeguarding

All members of employees have a duty to safeguard and promote the welfare of vulnerable adults, children and young people in all relevant areas of their work. This will include any timely attendance at relevant training events and compliance with the Safeguarding Procedures;

### Training, Education and Development

All employees have a responsibility to participate in regular appraisal with their manager and to identify performance standards of the post. As part of the appraisal process every employee is responsible for participating in identifying his or her own training and development needs to meet their KSF outline;

### Research and Development

Research and development is at the heart of providing effective treatment and high quality services, supporting a culture of evidence based practice and innovation amongst employees. All employees have a duty to be aware of and comply with their responsibilities for research governance, whether as researchers, as part of the team caring for those participating in research or as research participants themselves;

### Control of Infection

All employees whether clinical or non-clinical are required to comply with the Health and Social Care Act 2008: Code of Practice for health and adult social care on the prevention and control of infections and related guidance;

Therefore the post-holder is expected to keep patients, visitors, themselves and other employees safe by continuously reducing the risk of healthcare associated infections;

As a manager the post holder is required to ensure that infection control responsibilities are clearly identified, allocated and understood within your team and that appropriate resource, training and support is provided to ensure that they are compliant with Trust policies and

procedures on Infection Control and Hygiene;

As a manager the post holder is required to ensure that employees are supported in attending the necessary training and on-going professional development to support their responsibilities and ensure full awareness of infection control and hygiene;

#### Governance Standards

Comply with the relevant Governance Standards applicable to the Trust as communicated to the post-holder from time to time;

#### Records Management

Maintain Trust and patient records (both paper and electronic) in accordance with Trust policies to facilitate clinical care and effective administration;

#### Freedom of Information

Provide advice and assistance to all persons who propose to make, or have made requests for information, and to ensure all requests for information are managed appropriately in accordance with Trust Freedom of Information procedures;

#### Standards of Professional and Business Conduct

The post-holder will be required to comply with the Trust's Standing Orders and Stranding Financial Instructions, and at all times deal honestly with the Trust, with colleagues and all those who have dealings with the Trust, including patients, relatives and suppliers. The post-holder will also be required to comply with the Code of Conduct for NHS Managers and/or the relevant professional Codes of Conduct;

#### Data Protection

Comply with Trust Policies and the Data Protection Act in all respects, with particular relevance to the protection and use of personal and patient information;

#### Security

Comply with Trust policies to ensure there is a safe and secure environment that protects patients, employees and visitors and their property, and the physical assets and the information of the organisation;

#### Smoking

The Trust operates a No Smoking Policy.

#### Mobility

This is a Trust Wide appointment and travel around the Trust may be required;

#### Flexibility

BSMHFT is currently working in a climate of great change within the NHS. It is therefore expected that all employees will develop flexible working practices both within the Trust on a cross-directorate basis, and across Trust's and other organisations to meet the challenges and opportunities of working within the new NHS, which could include taking on new and changing responsibilities, according to the needs of the directorate;

This job description is a reflection of the current position and a summary of the key tasks and may change in light of the developing organisation and in consultation with the post holder.

It is the practice of the Trust to regularly examine employees' job descriptions and to update them to ensure that they relate to the job being performed or to incorporate whatever changes are being proposed. This procedure is jointly conducted by each manager and those working directly to him or her. You will therefore be expected to participate fully in such discussions and in connection with them and to help re-write your job description to



bring it up to date if this is considered necessary or desirable. The aim is to reach agreement on reasonable changes, but if agreement is not possible the Trust reserves the right to insist on changes to your job description after consultation with you;

Work will be managed rather than supervised;

Environment

BSMHFT is a major NHS Trust and we pride ourselves in the unique environment which exists for all employees. An environment where innovation is encouraged, hard work rewarded, and where our employees play an inclusive role in new developments;

Health and Safety

Staff must ensure that they are familiar with the requirements of the Health and Safety at Work Act (1974), the Trust's Health & Safety policies/codes of practice or regulations applicable to the workplace.

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This job description is indicative only, and the post will continue to evolve as the Trust's priorities develop. It will therefore be revised in consultation with the post holder from time to time and not less than annually. You may also be required to provide cover in other areas following appropriate discussion.

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**Job Description Agreement**

Budget Holder ..... **Signature**

..... **Name**

Post Holder ..... **Signature**

..... **Name**

**Date** .....

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Author: XXXX XXXX  
Date: October 2021