AMHP Report Audit Tool

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| Authors of report |
| Name |  |
| Position |  |
| Organisation |  |
| Reports being audited | East London Foundation Trust or EDT |

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| Report Purpose |
| Following the inception of a system wide Strategic Governance Group, established to oversee practice and operational improvements for the AMHP service, cross-team audits of Mental Health Act Assessment Reports has been agreed between EDT and daytime AMHP Service.  The purpose of this report is to provide an audit outcome summary to the strategic governance group including highlighting practice issues of significance. | |

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| **Methodology and Scope of Audit.** | | |
| 1 | a | **Identification of Nearest Relative provided;** | Yes % | | No % |
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| **b** | **clarification of how Nearest Relative was identified** | Yes % | | No % |
|  | |  |
| **c** | **Explanation of why Nearest Relative was not consulted.** | Yes % | | No % |
|  | |  |
| 2 | a | **Record of the reasons for referral** | Yes % | | No % |
|  | |  |
| **b** | **Rationale for carrying out MHAA (e.g, evidence of mental disorder, risk to self and others etc) recorded** | Yes % | | No % |
|  | |  |
| 3 | a | **The views/opinions of the doctors recorded on AMHP report.** | Yes % | | No % |
|  | |  |
| b | **reasons for admission recorded in AMHP report.** | Yes % | | No % |
|  | |  |
| c | **If not detained, is there detailed recommendations for following least restrictive options.** | Yes % | | No % |
|  | |  |
| 4 | a | **Assessment of capacity has been considered and recorded. This will include detailed rationale and links to legal framework.** | Yes % | | No % |
|  | |  |
| b | **Deprivations of liberty consideration recorded in line with legal framework. If required has appropriate action been undertaken and recorded (BIA/urgent DoLS application).** | Yes % | | No % |
|  | |  |
| c | **Safeguarding issues identified, considered and recorded. If required has appropriate safeguarding actions been undertaken, (including Child, adult and Dash).** | Yes % | | No % |
|  | |  |
| 5 | **Indicators of risk have been identified/recorded** | | Yes % | No % | |
|  |  | |
| 6 | **Outcome of assessment and rationale are clearly recorded with supporting evidence for decision –including how the** | | Yes % | No % | |
|  |  | |
| **guiding principles have been promoted** | | Yes % | No % | |
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| 7 | **Date Report was received by MH Admin was this within the 7 days of the actual assessment if not how long after the assessment was it when the Report was received** | | Yes % | No % | |
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| Areas of notable practice |
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| Areas for development |
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| Actions required |
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