Both acute hospitals have a 12 hour breach process in place; anyone in the ED who has waited over 12 hours requires external reporting.

The ED Nurse in charge will alert the designated gold commander/ site manager at 4 hours wait time, AMHP to alert DSN & AMHP Lead/ EDT Manager.

Hourly huddles will commence after 4 hours, at 6 hours wait acute trust gold commander will escalate to ELFT & CCG executive.

AMHP to escalate to AMHP manager/ service manager/ EDT on-call manager.

Acute Trust to report waits over 12 hours externally to NHSE, following executive approval. ELFT to use datix to report & escalate to Borough Director/ on-call Director, EDT to escalate to Head of Service.

**Acute Hospital 12 Hour Breach**

**Triage of referral & Information gathering** - AMHP Lead/EDT Manager will review & if required allocate AMHP to consider assessment under the MHA if required. Disputes regarding the outcome of referral are to be escalated to AMHP Lead/ Operational Manager (**working hours**) or EDT Team Manager/ On-Call Manager/ Service Manager (**out of hours**).

**AMHP Availability –** The AMHP Service provides cross county cover, therefore all team members are expected to provide cover to both teams to ensure MHAAs are conducted in a timely manner. Escalation to AMHP Lead/ EDT Manager/ Service Manager /On-Call Manager if disagreement occurs regarding allocation of work. Booking of additional resources (casual or locum) must be authorised by AMHP Lead/ Manager/ EDT on-call manager in the first instance, options via trust bank/ LA additional hours/overtime to be explored before booking locums.

**Section 12 doctor availability -** AMHP Service to use section 12 rota, cross county cover is expected as above. S12 solutions App to be used to secure independent doctors. Issues with section 12 rota to be escalated to AMHP Operational Manager/ Clinical Director & reported via datix (working hours). Out of hours EDT to make use of ELFT second on-call (section 12 approved) for ELFT based MHAAs (Inc. A & E). Independent doctors to be secured by AMHPs, any issues to be escalated to the EDT on-call manager.

**Section 135 –** Urgent applications that cannot wait until the next online court booking slots to be called through to the Magistrates Court, so the AMHP can arrange to attend court in person to obtain urgent application.

AMHP to email police control room, using jointly agreed form to arrange police to execute warrant, clearly outlining current level of risk and follow up with confirmation phone call. (See 135 practice guidance for full details).

Delay in getting police support to be escalated to Oscar 1 in Police Control room, via AMHP Lead/ Manager.

Once on scene with police, AMHP to book ambulance via EEAST, using the nationally agreed traffic light system to set level of response required (01234-716120).

Delay in ambulance conveyance to be escalated via EEAST Duty Manager, risk assessment decision to be made with AMHP Lead/ EDT Manager re: use of specialist ambulance to ensure timely conveyance to a designated place of safety for MHAA.

**Section 136 –** AMHPs must attend all section 136 MHAAs within 4 hours of the person arriving at the designated place of safety.

Liaison with the DSN is required in instances where section 12 doctor availability may cause delay, so use of ELFT on-call doctor can be arranged.

**Section 135/ 136/ conveyance**

**Bed escalation**

**Summary AMHP Escalation Process**

**Setting up MHAA**