The individual is alleged to have committed GBH, Attempt Murder, Murder.

L&DS (or HCP or FME in their absence) assess the detained person and confirm concerns that alleged offending behaviour may relate to a learning disability, autism spectrum disorder, mental illness, or other mental disorder.

*The nature of the offending behaviour means the detained person cannot be managed under Part II of the Mental Health Act under S.2 or S.3 on an acute psychiatric ward or Psychiatric Intensive Care Unit.*

The nature of the offending behaviour means the detained person cannot be managed under the Mental Health Act on an acute psychiatric ward or Psychiatric Intensive Care Unit (PICU). Consider referral for diversion under Part 2 MHA to a secure unit, refer using referral form.



Or

**Or,** the detained person has not been charged and consideration is therefore given for management under Part II of the Mental Health Act under S.2 or S.3 on the PICU or acute ward.

Following MHA assessment if the person is liable to be detained under S.2 or S.3 the assessing team need to liaise with the DSN at the earliest opportunity, so that a decision can be made about whether the presenting level of risk can be safely managed on the PICU/ acute ward. **The admissions from Police custody protocol should be followed if admission under Part II of the MHA is being considered.** second on-call doctor as a minimum.

L&DS complete a report for court requesting consideration for a psychiatric report to better inform a mental health diagnosis, management of risks, sentencing options and a fair criminal justice process and outcome, etc.

The court and/or solicitor will consider commissioning a psychiatric report (about a 6-week process) which could later lead to the court requesting S.35/36/37/38 admission to a secure unit under Part III of the Mental Health Act.

On some occasions, prison can support a transfer to a secure unit under S.47 or 48.

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If no secure unit is available, the Detained Person proceeds with the criminal justice process.

If there are concerns for fitness to interview, etc, and/or which pathway under the MHA, then it may be that a Forensic Consultant Psychiatrist is required to attend to support this decision-making. This may take the form of a MHA assessment.

The court is likely to remand the Detained Person to prison to manage risks to self and others whilst this process is being undertaken. The L&DS will refer to Prison in Reach and Reception and liaise with forensic mental health for urgent assessment in prison.