

Written evidence submitted by Sue Adams, DoLS Practice Manager/AMHP/BIA  
(MCAB20)

QUESTIONS FOR THE PUBLIC BILL COMMITTEE REGARDING THE MENTAL CAPACITY  
(AMENDMENT) BILL 2018

**Please can the Committee make it clear as to whether the Approved Mental Capacity Professional (AMCP) is going to have a signatory responsibility attached to its role.**

Currently, this is not the case for Best Interest Assessor's (BIA's) and if this new responsibility is added to the AMCP role, then it changes that role. If the job role changes, then a local authority will need to consider if this needs to go through a 'job evaluation' process which could result in a different grade being given. This also raises an issue, as to whether the BIA can be 'fast tracked' into the AMCP role if they are different roles, so it would be helpful if this could be clarified.

**Please can the Committee make it clear who monitor's the role of the Approved Mental Capacity Professional (AMCP).**

The role of the Approved Mental Health Professional (AMHP) is monitored and re-approved by the Local Authority. This function has been clearly defined in law as to what is expected from an AMHP and that of the Local Authority.

With regards to the Approved Mental Capacity Professional (AMCP) the role appears to be less structured as it does not say that the AMCP has to be acting on behalf of the Local Authority only that there is enough of them. So does that mean that the local authority trains all AMCP's who can then work for other Responsible Bodies i.e. Hospitals/CCGs?

Within the Bill it provides scope for Independent AMCP's to be employed outside of the Local Authority, however how does Re-approval occur and who monitor's this, as there is nothing in the Bill to say that someone must manage the conduct and performance of AMCP's, nor to report to either the Director of Adult Social Services or another organisation.

**Please can the Committee make it clear how the Mental Health assessment is going to be obtained.**

Currently, s12 Doctors undertake this role and my understanding from reading the new Bill is that this will transfer to GP's or Consultant Psychiatrists. I have reservations about this, purely on a practical basis. S12 Doctors are contactable and once instructed make time available (within days) to go out and assess the relevant person. Admittedly, this is for a fee of approximately £200 per assessment. However, to transfer this role to a GP/Consultant (without a fee) means that this request will not be classed as a 'priority' and could then delay the LPS process.

**Please can the Committee provide guidance on what it means by an 'objection' or a person who is 'objecting'.**

An objection - *'is an expression or feeling of disapproval or opposition; a reason for disagreeing'*. With many vulnerable people, who lack capacity, their objection may not be clearly heard or seen. It requires assessors with knowledge and skills in this area to be able

to interpret the many different ways that a person who lacks capacity, is objecting and this needs to be clearly defined.

Kind regards

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