

Welcome to the session:



# AMHP Workshop: Section 13 in Practice



**Please be aware this is not a webinar!**

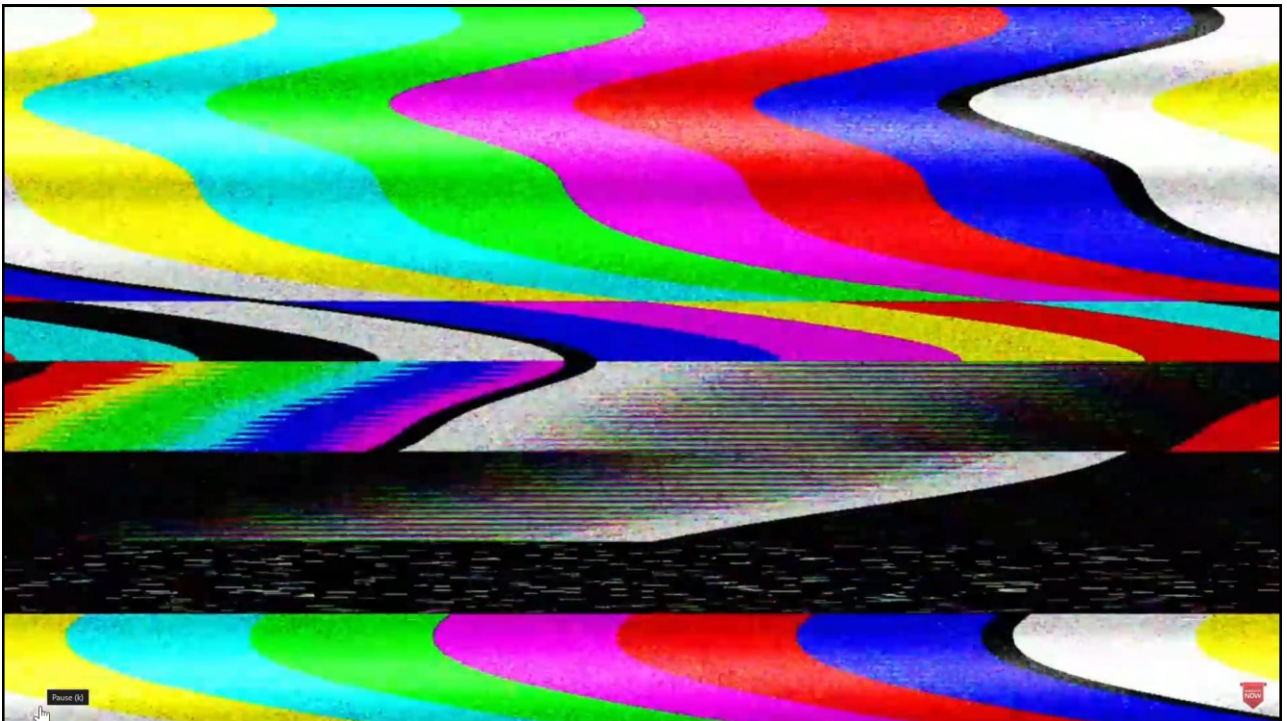
Please check your camera & mic are working and you are in a quiet space without distractions.

Please make sure you have the materials to hand; they are attached to your Outlook Calendar or Teams diary entry for today.

If your Wi-Fi isn't great and struggles when your camera is on – Close down any other Windows or Apps that aren't critical to the session.

Now you can sit back and enjoy the music, or go and grab a brew, we'll make a start at 9.30.

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# AMHP Workshop: Section 13 in Practice



McGill.

Last Updated: *April 2026*



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**This is a peer-led adult learning experience; therefore, you will get out of it what you, and your fellow delegates, put into it.**

If you can't give this the time it needs, please let your facilitator know and come back another time when you can.

- Your Expectations of Us:**  
*Guide, facilitate, inform and educate (on the tech as well as the content).*
- Our Expectations of You:**  
*Take part - both in the room and in the breakout groups. Cameras are not optional; they are a must unless it has been agreed and is for a very good reason.*
- Your Expectation of Fellow Participants:**  
*To engage in the room and the group work and be respectful and professional in interactions.*

*Please don't sabotage the learning for your colleagues, disengaging is disrespectful and impacts on others!*

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- ✓ If you can, please have your **cameras on!** You wouldn't come to training with a bag on your head!
- ✓ Googling answers is fine, doing your shopping isn't!
- ✓ Please **listen, engage and ask a question if you have one** – You can shout out, put your hand up or use the chat. Use the @ to tag one of us directly.
- ✓ **Look after your own health & safety**, as we're not in your house! We have a contact form in case of emergencies (which will be in the chat in 2 ticks).
- ✓ Usual rules apply to confidentiality. If we have any safeguarding or fitness to practice concerns, we will discuss this with you.
- ✓ No smoking on screen – vaping allowed subject to **your** location and organisational rules.
- ✓ **If everything freezes** – breathe, leave, reboot and then come back the way you came in at the start!



**EMERGENCY CONTACT**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

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## Remember, you never know what someone else might be struggling with at work, at home...in their own heads.

- Be kind to yourselves, each other and us.
- Be curious but respectful, be open to feedback & discussion.
- Be mindful of language and terminology you use.
- We play music in the breaks for a reason. If you would like to know why, please ask. If you would prefer not to listen to music during the break, please turn us down.
- The return time is always displayed on the break slide.



**This is intended to be a safe space - if you need a breather, additional support or other self-care – do it!**  
*Just let us know what you need (we have extra rooms / people available if we need them).*

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## Who's Milo?

Milo is our brown-and-white pup with a purple studded collar and a cheeky grin. He's not just adorable—he's part of our training culture.

## Let Milo Out?

When Milo appears near a door, it's your cue to take a break, stretch, or reset.



## Why Milo?

### 🔴 Symbol of Curiosity & Care

Milo reminds us to stay curious, kind, and grounded—especially when things get intense.

### 👁️ Spot Milo Challenge

You'll find him subtly placed in our 3D plasticine visuals. It's a fun way to stay engaged and take a breather when screen time runs long.

How many Milo's can you find?

A mini Mars bar for the closest.



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## It's a Resource Pack!!

*We will not be using all the slides!*

The learning will come from activities and discussion. The pack is there to refer-back to, and to offer further information, links and resources to support today's session.

Rabbit hole warning – wherever you see this icon in the materials there is the opportunity to disappear down a rabbit-hole. *Don't say we didn't warn you!*



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# Learning Outcomes



- ✓ To refresh knowledge of best practice approaches to interviewing and assessment skills and critically reflect on application to AMHP assessments, including application of the social perspective, the ECHR and s13 duties.
- ✓ To refresh and enhance knowledge and skills in considering the least restrictive principle, proportionality, and the Code of Practice guidance and caselaw themes on 'interviewing in a suitable manner' to promote a strengths-based approach in MHAA contexts.
- ✓ Explore the challenges for the AMHP in interviewing in a suitable manner in difficult and complex situations.
- ✓ To explore and reflect on the importance of consultation with the Nearest Relative and the impact / role that they can play in the MHAA process.
- ✓ To develop AMHP practice skills through sharing and examining both one's own and other's practice perspectives.

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# The Session Activity Links

Password:



Click Here

**April 2026 – BCC AMHP Refresher Programme**

Enter your details and the session password to join.

First Name  Last Name

Email Address

Session Password

Ask your trainer for the session password.

**Join Session →**



**SESSION**

**April 2026 – BCC AMHP Refresher Programme**

Welcome, Daisy [Leave session](#)

**YOUR SESSION TOOLS**

<p>Legal Literacy Challenge</p> <p><b>Launch ↗</b></p>	<p>MDT Risk Formulation</p> <p><b>Launch ↗</b></p>
<p>Mental Health Act 2025 Hub</p> <p><b>Launch ↗</b></p>	<p>Section 13 - Felicia's Assessment</p> <p><b>Launch ↗</b></p>
<p>Section 13 - Interviewing Exercise</p> <p><b>Launch ↗</b></p>	<p>Section 13 Exercise - Idris' Assessment</p> <p><b>Launch ↗</b></p>

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# Group Exercise: *The Assumption Trap*

**The Assumption Trap**  
A LearnDash session for reflective, legally literate mental health social work practice

How quickly do we form judgements? What assumptions hide beneath our professional assessments? This activity challenges you to pause, question, and explore alternative explanations — practising **respectful uncertainty** essential to ethical mental health social work.

[Start session →](#)

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[Click Here](#)



Don't forget to nominate someone to feedback (or agree to do it together, but no tumble-weed (aka awkward silences) when we come back together please!)

# Section 13: *What's it All About?*

Risk

Accountability

Values & Ethics  
(Morality)

### Sub-themes from the literature:

- Emotional intelligence & resilience.
- Intuition & analysis.
- Working with uncertainty.
- Coercion.
- Available alternatives.

**Practice Library**  
Browse guides, resources and reference materials

[Click Here](#)

**BU Bournemouth University**  
Faculty of Health and Social Sciences

An Appreciative Inquiry into Approved Mental Health Professional decision-making at the point of referral for a Mental Health Act 1983

In memory of Dr Matt Simpson

'MHA ASSESSMENTS' AND s13(1) MHA 1983:  
'NEW' AMHP PRACTICES WITHIN EXISTING LAW

A discussion paper

Dr Matt Simpson, Robert Lewis & John Mitchell  
2024

## Section 13: Theme 1 - Risk



### What is Risk in AMHP Practice?

- Definition: Risk as perceived in MHA assessments - harm to self / others, risk of deterioration, risk of not intervening.
- The subjective nature of risk: ***“Risk is not objective; it is constructed and interpreted”.***

### Risk Analysis and Thresholds

- How AMHPs analyse risk at the point of referral.
- The importance of ***“buying time”*** and not defaulting to detention.
- The impact of knowledge of the person: Knowing the person raises the risk threshold.
- ***When is it defensible to say “no” to detention?***

### The impact of knowledge of the person:

- Knowing the person raises the risk threshold.

### Risk Aversion and Systemic Pressures:

- How risk aversion in services leads to more detentions.
- The “conveyor belt” of rapid assessments.

### Positive Risk-Taking

- Balancing the risks of intervention vs. non-intervention.
- The concept of ***“risk positivity”*** and therapeutic risk-taking.

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## Section 13: Theme 2 - Accountability



### What Does Accountability Mean for AMHPs?

- Legal and professional accountability - the AMHP's independent statutory role.
- The “weight” of the decision—personal and organisational responsibility.

### Pressures and Defensive Practice

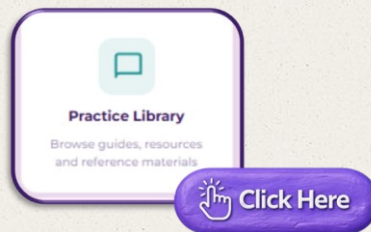
- Fear of adverse outcomes and blame culture
- How accountability can lead to defensive, risk-averse decisions.

### Sharing and Supporting Accountability

- The value of peer / team support and supervision.
- The importance of clear documentation (e.g., s13(1) report).
- Creating a culture of open learning and reflective practice.

### Systemic Accountability

- The need for wider system ownership of referrals (not just AMHPs).
- Multi-agency working and “blue light” meetings as shared accountability.



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## Section 13: Theme 3 – Values & Ethics

### The Role of Values in AMHP Decision-Making

- The “social perspective” and person-centred practice.
- Morality and the “use of self”—how personal and professional values merge (Simpson, 2022).

### Human Rights and Anti-Racist Practice

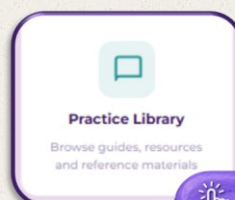
- The AMHP as a human rights safeguard. Addressing structural inequalities and “racist processing” in referrals.

### Transparency and Collaboration

- The importance of transparency with service users and families.
- Co-construction of decisions, working with, not just for, people.

### The Harm of Admission and Least Restriction

- Recognising the potential harm of detention and hospital admission.
- Applying the principle of least restriction and seeking alternatives.



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## Group Activity: Vinny's Section 13 Consideration

AMHP CPD Critical Reflection Activity  
Sections 11, 12 & 13 - Mental Health Act 1983

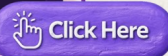
1 Introduction & Scenario

Learning Objectives

- Critically reflect on the application of Sections 11, 12 and 13 of the MHA 1983
- Consider Nearest Relative identification and consultation in complex circumstances
- Apply principles of least restriction and therapeutic benefit
- Navigate cultural considerations, safeguarding concerns and neurodivergent presentations
- Develop comprehensive safety planning in multi-agency contexts

Scenario: Vinny

Referral Source: A&E Department, General Hospital - urgent AMHP assessment requested at 22:45hrs



**Don't forget to nominate someone to feedback (or agree to do it together, but no tumble-weed (aka awkward silences) when we come back together please!)**

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# COFFEE BREAK!



It's time to...

- **Blink!**
- Hydrate.
- Stretch.
- Get yourself another brew.
- Let the dog out.\*
- Let the dog back in.\*

DID WE MENTION HOW IMPORTANT BLINKING IS!



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## Interviewing in a Suitable Manner: *Section 13 Duties*

### Code of Practice (2015)

- Identifying self and purpose / role (para 14.51).
- Opportunity to speak to AMHP alone (para 14.54).
- Attendance of others at patients request (para 14.53).
- **Face-to-Face interview desirable but risk considered** (para 14.55).
- Effective Communication meeting the individual needs of the patient (Chapter 4).

### Reference Guide (2015)

*"Before making an application (whether for admission for assessment or treatment), AMHPs must interview the patient 'in a suitable manner', e.g. taking account of the patient's age and understanding, and any learning disability, autism spectrum disorder or hearing or linguistic difficulties the patient may have."* (para 8.31)

### Section 13(2)

Before making an application for the admission of a patient to hospital an approved mental health professional **shall interview the patient in a suitable manner** and satisfy himself that detention in a hospital is in **all the circumstances of the case** the most appropriate way of providing the care and medical treatment of which the patient stands in need.

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# How Do We Determine What is Suitable?

## What is suitable?

- Location
- Circumstances
- Other People
- Communication
- Providing information
- Obtaining information
- Approach
- No set time for the interview to qualify.
- What is required is a matter of professional judgement for those involved.
- It is a matter of professional judgement whether to proceed with an assessment at any given time or to postpone it.

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## Group Exercise: Assessment Contexts

Click Here



### AMHP Training Exercise

Exploring Assessment Settings: Observation, Interpretation & Analysis

#### About This Exercise

This interactive training exercise explores the challenges of assessing the same individual across three different settings: Police Custody, Prison, and Community settings.

You will assess Ahmed, a 28-year-old British-born Muslim man presenting with extreme emotional volatility, auditory hallucinations, and ADHD. Through observation, interpretation and analysis activities you will identify barriers and challenges unique to each environment, including cultural and religious considerations.

#### Learning Objectives:

- Recognise environmental factors affecting mental health assessment
- Identify barriers to effective communication and engagement
- Develop adaptive strategies for different settings
- Consider the impact of setting on rights and safeguards

Enter Your Group Name/Number:

Group 1 or Team Alpha



Don't forget to nominate someone to feedback (or agree to do it together, but no tumble-weed (aka awkward silences) when we come back together please!)

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## Group Activity: *Section 13 Themes in Practice*



**In small groups,**  
Read the case study for Nkosi and identify the issues that you would need to consider within your section 13 duties.

Consider the discussion prompts provided, for feedback theme your highlights for:

- Risk, Accountability, Values.

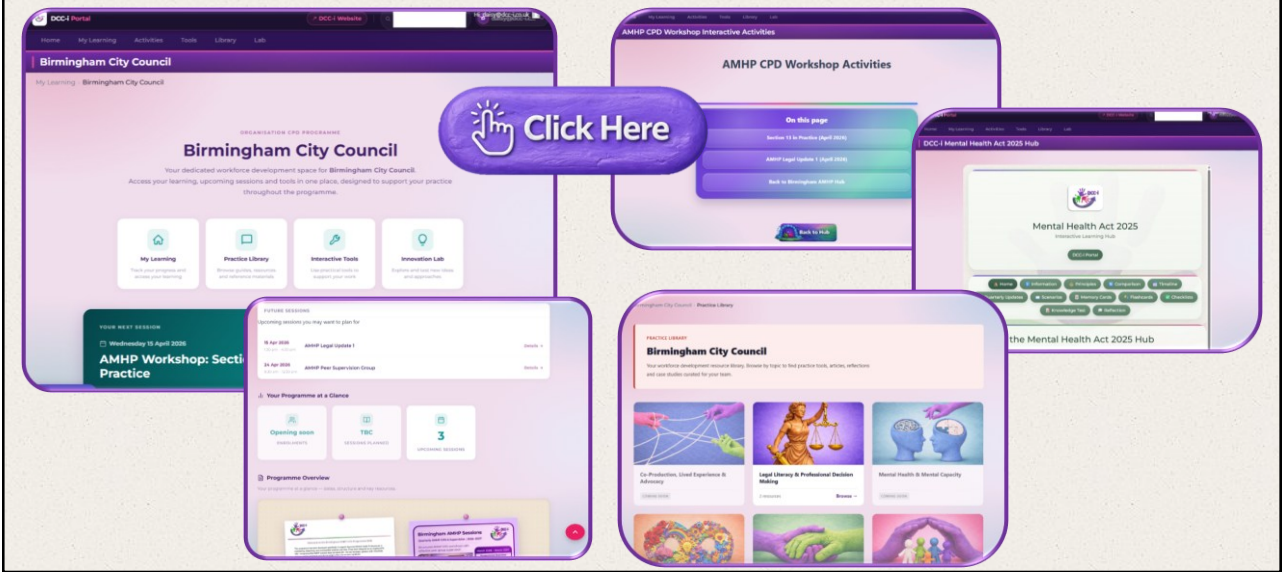


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## Welcome to the Birmingham AMHP CPD Hub




# Welcome to the Birmingham AMHP CPD Hub



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## Post-Session Reflection Points:

*How does what we know inform what we do?*

- What is / are your key learning point(s)?
- What else do you need to find out, and how will you find it out?
- How will you use the learning from today in your practice?

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