

Preparation for Service Improvement Project / Service Improvement Project

My academic journey to completing a Masters in Advanced Mental Health Practice began five years ago, and along with the current Preparation for Service Improvement Project (PSIP) and Service Improvement Project (SIP) modules, it has included a five-module value and practice based course, in order to fulfill my passion of becoming an Approved Mental Health Professional (AMHP).

Firstly, I would like to extend a heartfelt thank you to the Foundation for Professionals in Services for Adolescents for awarding me the majority of funding required in order for me to complete this professional journey. Given the duration of the academic programme, the number of associated modules and their related cost, it would not have been possible to complete without their sustained financial support.

I have a 12-year history of working with children and young people (CYP) in mental health crisis, in various CAMHS settings, including community and inpatient. More latterly, in the CAMHS Assertive Outreach team, which is a specialist team who work with complex and challenging CYP, who are at the interface of intensive home intervention and hospital admission, due to significant decline in their mental health and associated escalation in risk profile. My drive to become an AMHP (specifically with CAMHS experience) is attributed to the understanding that all AMHPs in my local area are from a social work background with professional experience predominantly in adult mental health, thus limited experience of working therapeutically with CYP with mental health difficulties. Therefore, I considered it imperative, that this be established in order that CYP receive an appropriate and equitable service, in order to achieve the best overall outcomes for them.

After successfully completing the course and becoming an AMHP, I have undertaken two further modules, the PSIP and SIP, in order to complete my master's in advanced Mental Health Practice. Since these are two research-based modules, I have been able to use the opportunity to focus on the interface between the AMHP role and CAMHS and explore the challenges that AMHPs face when assessing this age group. This was with a view to better understand the obstacles faced in order to overcome them and improve the experience of the AMHP and CYP, when they are being considered for assessment under the Act, with a view to improving their overall outcomes.

Having now completed this professional and academic journey, not only am I the only nurse trained AMHP in my local area (there are not many nationwide either), but the only AMHP with a professional background in CAMHS. All of which has been greatly received within the team and wider agencies, as it has broadened the skills, knowledge and experience available within the team.

What is more, I have raised the profile of CYP's mental health, the specific challenges AMHPs face when considering this age group for assessment under the Act and of being the only AMHP with a professional background and specialist interest in CAMHS. In doing so, I have been increasingly approached by AMHP colleagues, for specialist advice in relation to CYP's mental health and CAMHS infrastructure, when they are considering CYP for assessment under the Act.

Furthermore, I have been more frequently approached by CAMHS teams, in relation to CYP in mental health crisis, for specialist advice and consultation. This has included clarifying statutory duties and responsibilities and legislation; including legal criteria for detention, the ever-changing legal

frameworks governing 'deprivation of liberty' and the admission to hospital and treatment of CYP; and identifying least restrictive and legally viable options. I have also been increasingly invited to join psychiatric outpatient appointments/reviews/assessments prior to consideration of a MHA assessment, which has often prevented the need to progress to MHA assessment, and admission, as it has either not been appropriate or has enabled a less restrictive option to be implemented.

Having now completed the AMHP course, and subsequently undertaken an enquiry-led service improvement project in order to explore the challenges AMHPs face when assessing this age group under the Act, not only have I greatly enhanced my professional practice, but I believe, I have also improved the service offered to CYP who are experiencing a mental health crisis and their families for the reasons outlined.

I would like to say a huge thank you again to the FPSA; your financial support has made my professional aspirations possible and now a reality. What's more, it will continue to be lucrative for CYP in mental health crisis, in as much as it has once again, reinforced my passion for this avenue of work, and my commitment to continue striving for improved service provision for this age group.