

Mental Health (Wales) Measure 2010

2010 nawm 7

PART 2

COORDINATION OF AND CARE PLANNING FOR SECONDARY MENTAL HEALTH SERVICE USERS

VALID FROM 06/06/2012

Definitions

12 Meaning of "relevant patient"

- (1) For the purposes of this Part, an individual is a relevant patient if a mental health service provider is responsible for providing a secondary mental health service for the individual.
- (2) An individual who does not fall within subsection (1) is also a relevant patient if—
 - (a) the individual is under the guardianship of a local authority in Wales; or
 - (b) a mental health service provider has decided that the individual would be provided with a secondary mental health service if the individual cooperated with its provision.

13 Meaning of "mental health service provider"

- (1) For the purposes of this Part, mental health service providers are the following—
 - (a) the Welsh Ministers;
 - (b) a Local Health Board;
 - (c) a local authority in Wales.
- (2) But the Welsh Ministers are not to be treated as being responsible for providing any service that is provided in the exercise of a function to which a direction given under section 12(1) of the National Health Service (Wales) Act 2006 relates.

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Changes to legislation: There are currently no known outstanding effects for the

Mental Health (Wales) Measure 2010, PART 2. (See end of Document for details)

Appointment of care coordinators

VALID FROM 06/06/2012

14 Duty to appoint a care coordinator for a relevant patient

- (1) The relevant mental health service provider for a relevant patient must appoint an individual as care coordinator for the patient to perform in relation to the patient the functions conferred on care coordinators by and under this Part.
- (2) The duty under subsection (1) is to be performed as soon as is reasonably practicable after—
 - (a) an individual becomes a relevant patient; or
 - (b) in a case where an individual permanently ceases to be appointed as a relevant patient's care coordinator, that permanent cessation.
- (3) Where the relevant mental health service provider considers that a patient's care coordinator is for whatever reason temporarily unable to act as such, the provider may appoint an individual to be the patient's temporary care coordinator to perform in relation to the patient the functions referred to in subsection (1).
- (4) A temporary appointment under subsection (3) ceases when the relevant mental health service provider considers that the individual previously appointed as care coordinator has regained the ability to act as such, in which case that individual's appointment shall revive.
- (5) Arrangements may be made between two Local Health Boards for the functions of one of them under subsection (1) or (3) to be exercised by the other.
- (6) Any arrangements under subsection (5) do not affect the responsibility of a Local Health Board as relevant mental health service provider under subsection (1) or (3).
- (7) Section 15 makes provision about the identification of the relevant mental health service provider for a relevant patient.

15 Identification of the relevant mental health service provider for a relevant patient

- (1) This subsection applies where-
 - (a) a Local Health Board is responsible for providing a secondary mental health service for a relevant patient; and
 - (b) a local authority is not responsible for providing such a service.
- (2) Where subsection (1) applies, the Board is the relevant mental health service provider.
- (3) This subsection applies where—
 - (a) a Local Health Board is responsible for providing a secondary mental health service for a relevant patient; and
 - (b) a local authority is also responsible for providing such a service.
- (4) Where subsection (3) applies, the identification of one of the persons referred to in that subsection as the relevant mental health service provider is to be made in accordance with provision in regulations made by the Welsh Ministers.

SERVICE USERS

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- (5) Regulations under subsection (4) may–
 - (a) provide for disputes as to the operation of the regulations to be determined by the Welsh Ministers;
 - (b) provide for the Welsh Ministers to make such determination as they think fit requiring payments to be made by one of the persons referred to in subsection (3) to the other person in the light of a determination referred to in paragraph (a);
 - (c) identify a provider as the relevant mental health service provider pending a determination under paragraph (a).
- (6) Where neither subsection (1) nor subsection (3) apply, the relevant mental health service provider is—
 - (a) if a local authority is responsible for providing the patient with a secondary mental health service, the authority;
 - (b) if the patient is under the guardianship of a local authority, the authority;
 - (c) where neither paragraph (a) nor (b) apply but the Welsh Ministers are responsible for providing a secondary mental health service for the patient, the Welsh Ministers.

Commencement Information

I1 S. 15 partly in force; s. 15 in force at 15.2.2011 in so far as it confers power to make subordinate legislation see s. 55

16 Further provision about the appointment of care coordinators

- (1) A provider must not appoint an individual as a care coordinator under section 14(1) unless the individual is eligible to be appointed as a care coordinator under regulations made under section 47.
- (2) A provider must not appoint an individual as a care coordinator under section 14(1) from amongst the staff of another person without that person's consent.
- (3) Unless regulations made by the Welsh Ministers provide otherwise, an individual's appointment as a care coordinator does not come to an end as a result of a change in a relevant patient's relevant mental health service provider as identified under section 15.
- (4) A relevant mental health service provider may terminate the appointment of an individual appointed as a care coordinator under section 14(1).

Commencement Information

I2 S. 16 partly in force; s. 16 in force at 15.2.2011 in so far as it confers power to make subordinate legislation see s. 55

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Coordination of mental health services

VALID FROM 06/06/2012

17 Duty to coordinate provision of mental health services

- (1) For the purpose of improving the effectiveness of the mental health services provided to a relevant patient, a mental health service provider must take all reasonable steps to ensure that—
 - (a) different mental health services which it is responsible for providing for the patient are coordinated with each other;
 - (b) the mental health services which it is responsible for providing for the patient are coordinated with any other such services the provision of which is the responsibility of any other mental health service provider;
 - (c) the mental health services which it is responsible for providing are coordinated with any services related to mental health provided for the patient by a voluntary organisation.
- (2) A mental health service provider may seek the advice of a patient's care coordinator as to how the provider should discharge its duty under subsection (1).
- (3) A care coordinator may at any time give advice to a mental health service provider as to how the provider should discharge its duty under subsection (1).
- (4) A mental health service provider must have regard to any advice given under subsections (2) and (3) in discharging its duty under subsection (1).
- (5) In this section mental health services are—
 - (a) secondary mental health services;
 - (b) services under Part 1 of this Measure;
 - (c) things done in the exercise of a local authority's powers in section 8 of the Mental Health Act 1983 in respect of a person who is subject to the authority's guardianship.
- (6) In this section "voluntary organisation" means a body whose activities are carried on otherwise than for profit.

18 Functions of the care coordinator

- (1) A relevant patient's care coordinator must work with the relevant patient and the patient's mental health service providers—
 - (a) with a view to agreeing the outcomes which the provision of mental health services for the patient are designed to achieve, including (but not limited to) achievements in one or more of the following areas—
 - (i) finance and money;
 - (ii) accommodation;
 - (iii) personal care and physical well-being;
 - (iv) education and training;
 - (v) work and occupation;
 - (vi) parenting or caring relationships;

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- (vii) social, cultural or spiritual;
- (viii) medical and other forms of treatment including psychological interventions:
- (b) with a view to agreeing a plan ("a care and treatment plan") for achieving those outcomes:
- (c) in connection with the review and revision of a care and treatment plan in accordance with provision in regulations made by the Welsh Ministers.
- (2) Where a care and treatment plan has been agreed, the care coordinator must record the plan in writing.
- (3) Subsections (4) and (5) apply if the outcomes referred to in subsection (1)(a) or the plan referred to in subsection (1)(b) cannot be agreed between the persons mentioned in subsection (1).
- (4) If the relevant patient has a sole mental health service provider, the provider must, having regard to any views expressed by the relevant patient, determine the outcomes which the provision of mental health services for the patient are designed to achieve and determine a plan for achieving those outcomes.
- (5) If the relevant patient has more than one mental health service provider, each provider must, having regard to any views expressed by the patient, determine the outcomes which the provision of mental health services by the provider are designed to achieve and determine a plan for achieving those outcomes.
- (6) The care coordinator must-
 - (a) where a plan has been determined under subsection (4), record the plan in writing;
 - (b) where plans have been determined under subsection (5), record all of them in writing in a single document.
- (7) The records made under subsection (6) are care and treatment plans for the purposes of subsection (1)(c) and (8) to (10).
- (8) The Welsh Ministers may by regulations make provision as to-
 - (a) the form and content of care and treatment plans;
 - (b) any persons whom the care coordinator is to consult in connection with the exercise of the coordinator's functions under subsection (1)(a) or (b);
 - (c) the obligations of persons specified in the regulations in connection with the agreement or determination of care and treatment plans;
 - (d) the persons to whom written copies of a care and treatment plan are to be provided (including in specified cases the provision of copies without the consent of the relevant patient to whom the plan relates);
 - (e) the information to be provided by mental health service providers to an individual who has ceased to be a relevant patient.
- (9) The provision that may be made by regulations under subsection (1)(c) includes (but is not limited to) provision—
 - (a) for care and treatment plans to be reviewed and revised in specified circumstances;
 - (b) conferring a discretion upon the care coordinator as to whether a review or revision is to be carried out;

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- (c) as to any persons whom the care coordinator is to consult in connection with a review or revision;
- (d) imposing obligations upon persons specified in the regulations in connection with a review or revision;
- (e) as to the provision of copies of revised plans to specified persons (including in specified cases the provision of copies without the consent of the relevant patient to whom the plan relates).
- (10) So far as it is reasonably practicable to do so, a mental health service provider must ensure that mental health services for a relevant patient are provided in accordance with the patient's current care and treatment plan.
- (11) In this section "mental health services" has the same meaning as in section 17(5).

Commencement Information

S. 18 partly in force; s. 18 in force at 15.2.2011 in so far as it confers power to make subordinate legislation see s. 55

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