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| **STRICTLY PRIVATE & CONFIDENTIAL**  **<<RC NAME >>**  **<<RC ADDRESS>>**  **<<RC ADDRESS>>**  **<<RC ADDRESS>>**  **<<RC ADDRESS>>**  **<<RC ADDRESS>>** | C/O AMHP Service  3rd Floor, Invicta House  County Hall  Sandling Road  Maidstone  Kent, ME14 1XX    Tel: 03000 415762  Ask for: Akua Agyepong  Email: [MHGuardianship@kent.gov.uk](mailto:MHGuardianship@kent.gov.uk)    **<<DATE>>** |

Dear **<<NAME OF RESPONSIBLE CLINICIAN>>**

**RE Discharge of <<NAME OF PERSON>> <<DOB>> from Guardianship**

I understand from **<<NAME OF AMHP>>,** Approved Mental Health Professional that you have discharged **<<NAME OF SERVICE USER>>** from Guardianship. I would appreciate it if you could please confirm this in writing to me by completing the letter enclosed by return post in order that we can amend our records accordingly.

Yours sincerely

**Akua Agyepong**

**Assistant Director, Countywide Services**

CC **<<Name of AMHP>>, Approved Mental Health Professional**

Enc Discharge letter by Responsible Clinician