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| **Ending/Discharge from Eligibility Section 117 Mental Health Act 1983**  |
| **Name**  | James | **DOB** |  |
| **Address** |  | **NHS Number** |  |

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| **S117 review meeting date** |  |

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| **People present at the meeting** |
| **Name** | **Role** | **Agency** | **Contact details** |
| J | Young person receiving s117 aftercare | N/A | J@person.com |
| P and Y | Mother and father | N/A | P@nearestrelative.com |
| SW | Social workerLead Professional | Best local authority | SW@localauthority.gov.uk |
| CP | Consultant Psychologist Approved Clinician | Best NHS Trust  | CP@nhs.nhs.uk |
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| **Summary of the Review** |
| Section 117 aftercare reduced over time because of progress with recovery and rehabilitation.The current care team and the Integrated Care Board and Local Authority at the review held on 16 June 2023 recommended J is discharged from eligibility to section 117 aftercare. Aftercare in place at last review had reduced to having named contact within children and adolescent mental health team (CAMHs team) and social work team just in case any needs arise, appropriate review date agreed.J is content that he has been able to manage for over a year without the need to contact social worker or CAMH staff. He is happy with the progress he has made and is agreeable to being discharged from section 117 aftercare eligibility. Js parents agreed that there has been no concern about Js’ mental health for the last 14 months and do not feel that as a family they need the support of mental health services at all. Neither J nor his parents could envisage the potential for any destabilising factors in the very near future.. |

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| **Outcome** |
| J and his parents have agreed to be discharged from section 117 aftercare. As the Social worker/Lead Professional and NHS health related professional involved in Js’ aftercare review recommended that J be discharged from section 117 aftercare, the Out of Area Treatments panel are in agreement with the recommendation as outlined above and wish J all the very best for thew future. |
| **Statement by responsible authorities** |
| We are satisfied that the above-named individual is no longer in need of section 117 aftercare services. We can confirm that the person and their parents have been involved in the decision to discharge from section117 aftercare. |

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| **Signatories of responsible authorities** |

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| **Signature** |  | **On behalf of Lincolnshire County Council** |
| **Name** |  |
| **Title** |  |
| **Date** |  |

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| **Signature** |  | **On behalf of Lincolnshire Integrated Care Board** |
| **Name** |  |
| **Title** |  |
| **Date** |  |

**Template letter confirming discharge from section 117 aftercare – consider if an easy read version of this letter is required**

Dear [name]

***Re: Mental Health Act 1983 – Aftercare under Section 117 – Notification of discharge***

Our records show that you were detained in hospital under a treatment order of the Mental Health Act [Section] on [date]. At the time of your discharge from hospital section 117 aftercare as set out in the aftercare plan commenced and your name was added to our list of people who are eligible for section 117 aftercare.

Section 117 of the Mental Health Act 1983 places a joint duty on local NHS and adult social services commissioners to provide free aftercare services for people that have previously been sectioned under the treatment sections of the Mental Health Act. Eligibility for section 117 aftercare remains in force until the responsible authorities (the Local Authority and NHS Integrated Care Board) are satisfied that the person concerned is no longer in need of these services.

On [date] you were involved in a review of your circumstances and have received a copy of the documentation associated with that review.

This review concluded that you no longer require aftercare services under section 117 as you no longer have needs arising from or related to a mental disorder.

I am writing to confirm that this recommendation has been accepted by the responsible authorities and that you are now discharged from the Section 117 aftercare. Your name will be removed from the current version of the aftercare list that we maintain as of the date of the review.

Yours sincerely

Out of Area Treatment Panel

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| Signature | **Signature** |
| **Name**  | **Name**  |
| **Position** | **Position** |
| **For Local Authority** | **For NHS Integrated Care Board** |

***Copies to***

* Person
* Parents / carers
* GP
* Social Worker
* NHS file
* ICB file
* MHA Administration Team