

Sent by email 22.10.24

Dear Sir/Madam,

RE: National Mental Health Act Assessment Fee Guidance from the British Medical Association Consultants Committee

We are writing to share our recently published guidance for consultants regarding the completion of Mental Health Act assessments (MHAAs). The BMA Consultants Committee is aware that the responsibility for the provision of MHA services falls to the relevant local authority. Our guidance aims to encourage consultants who are conducting these assessments to consider whether the compensation provided by a local authority adequately reflects the time and expertise required to perform such assessments and thus inform their decision-making when choosing to undertake such work.

Currently, fees offered by local authorities for MHAAs demonstrate significant regional and local variation, creating unnecessary confusion and complexity for both the doctors conducting the assessments and those responsible for arranging them (approved mental health practitioner services). In certain cases, fees have remained the same for many years despite inflation and cost of living pressures and no longer reflect appropriate compensation for a consultant's time and skill level. Our view is that this geographical inconsistency and failure to reflect the economic climate renders existing fee structures unfit for purpose. For example, it is unreasonable to expect a consultant to be away from home for up to three hours in the middle of the night for a payment of £175, much of which will be allocated to tax.

In the NHS Consultant Contract for England (2003), MHAA fees are listed under Fee Paying Services. These are services that are not part of 'Contractual or Consequential Services' and not reasonably incidental to them. They include examinations and recommendations under Part II of the Mental Health Act 1983 (except where the patient is an in-patient), where it follows examination at an out-patient clinic, or where given as a result of a domiciliary consultation:

- if given by a doctor who is not on the staff of the hospital where the patient is examined; or
- if the recommendation is given as a result of a special examination carried out at the request of a local authority officer at a place other than a hospital or clinic administered by an NHS organisation.

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While we acknowledge that MHAAs may be performed by doctors other than consultants, such as trainee psychiatrists and general practitioners, we have developed this guidance specifically for those consultant psychiatrists conducting MHAAs on an ad-hoc and discretionary basis as extra-contractual work.

Our recommended fees reflect the different levels of impact undertaking these assessments has upon consultants' work and personal lives. Fees are banded according to the time of day and day of the week, with higher fees recommended for more antisocial time periods as is common in most workplaces.

We have also added in a consideration for travel. Four bands of travel have been set, with additional fees recommended for the higher three categories. The approach in setting these additional fees was to compensate those who will be required to travel without inappropriately incentivising people to travel excessive distances to perform these assessments.

The BMA Consultants Committee is aware of the considerable shortages of doctors willing to do this crucial work. Ensuring there are doctors available is a vital consideration in ensuring timely MHAAs, which has a significant impact on the experiences of people being assessed and those who care about them. The limited availability of doctors to undertake these assessments independently is a direct consequence of the fact that the remuneration for MHAAs is not adequate and relies on doctors electing to do this work in spite of the fees offered. It is essential that the fees for such extra contractual work appropriately value the time and expertise required to perform such assessments.

Our intervention and the publication of these clear guidelines will, we hope, encourage more consultants to volunteer for this work with the confidence they are being paid fairly. This in turn will enable more patients to be seen in a timely way, and for there to be more choice of suitably qualified doctors.

We ask you as the national membership body for local authorities to encourage your member authorities to review this guidance and to be aware that consultants may well increasingly decline to undertake MHAAs unless the fees offered are acceptable to them.

We hope that we can move forwards together to improve this challenging area of health and social care provision.

Should you have any queries with the regards to this guidance, please contact info.cc@bma.org.uk.

Yours faithfully,



Dr A Molodynski



Dr S Datta

Psychiatry Specialty Lead
BMA Consultants Committee

Co-chair, BMA Consultants Committee