

NHS mental health teams

Mental health teams are part of the NHS. They support people living in the community who have complex or serious mental health problems. This factsheet focusses on secondary mental health teams. What they can do to help you and how you can get referred to them. It also explains what to do if you have problems with your mental health team.

Key Points.

- Mental health teams are there to help you to improve your mental health.
- There are different mental health teams such as community mental health team, crisis team and early intervention team.
- Different mental health professionals such as psychiatrists, psychologists, community psychiatric nurses, social workers, and occupational therapists work in a mental health team.
- You might get help from the whole team, or from 1 or 2 professionals.
- You usually get referred to mental health teams through a health professional.
- If you have complex care needs, you might be placed under the Care Programme Approach (CPA). CPA means you will have a care plan which outlines your needs. And a care coordinator to make sure that your needs are met.
- A new Integrated Care System is being rolled out in parts of England from April 2021 which brings health and care organisations together.

This factsheet covers:

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In this factsheet the term 'mental health teams' refers to the following teams.

- Community mental health teams
- Crisis teams
- Early intervention teams
- Assertive outreach team
- Forensic community mental health team

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1. What is the mental health system?

The mental health system within the NHS is split into 3 tiers: primary, secondary and tertiary care.¹

But from April 2021, the NHS has started rolling out a programme called the Integrated Care System which will change the landscape of the current healthcare system. See the below section of this factsheet, '[What is Integrated Care Systems?](#)' for more information.

Primary care. This is the entry level of care for the NHS. You can get treatment and support from primary care services if you have mild or moderate mental health problems. Primary services include:

- your GP,
- your local link worker through your GP. See the later section of this factsheet for more information, '[What is social prescribing?](#)' and
- talking therapy from your local Improving Access to Psychological Therapies (IAPT) service.

Secondary care. This is the next level of care in the NHS. It covers general community and hospital care.

A mental health team (MHT) is part of community care. Community care means you get treatment outside of a hospital stay. You may be referred to an MHT if you need more support with your mental health. MHT's are staffed with professionals such as a psychiatrist and psychologists.

See section 2 of this factsheet, '[Are there different mental health teams?](#)' for more information.

Hospital care includes inpatient treatment. You are an inpatient in hospital if you stay voluntarily, or if you are detained under the Mental Health Act.

Tertiary care. This is highly specialist care within the NHS. It covers specialist community and hospital care.

Examples of community tertiary care are:

- assertive outreach teams, and
- specialist national services within the Maudsley hospital in London.

The Maudsley is a national service which means that you can access it even if you live outside of London. But you will need a referral.

Specialist hospital care includes secure units.² Patients in secure units are usually detained under the Mental Health Act and present a level of risk greater than general mental health services could safely deal with.

What is the Integrated Care System?

Integrated care is about removing traditional divisions between different tiers of care such as primary and secondary care. This is so that people can get the support that they need. It aims to remove divisions such as those between:³

- hospitals and GPs
- physical and mental health and
- NHS and the local authority.

These divisions have meant that lots of people have had disjointed care.

Integrated Care Systems are new partnerships between the NHS and other health and care organisations. Such as the local authority, voluntary sector and social enterprise sector. By working together and putting you

and your needs at the centre, your care will have a more collaborative approach. This means that you are likely to get better mental health care and support.

You can check to see if ICS rollout has started in your local area by clicking the following link: www.england.nhs.uk/integratedcare/integrated-care-in-your-area/.

You can find more information on www.rethink.org about:

- GP, what to expect from your doctor
- Talking therapies
- NHS know your rights
- Mental Health Act

Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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2. Are there different types of mental health team?

There are different types of mental health teams (MHT) that support different mental health needs. But there is some overlap between the services.

Common MHTs are the following.

- Community mental health team
- Crisis team
- Early intervention team
- Assertive outreach team
- Forensic community mental health team

What is a community mental health team?

A community mental health team (CMHT) can support you to recover from mental health issues. They can give you short or long-term care and treatment if you are in the community.

Health professionals from different backgrounds work in the CMHT. They work together to help you get better.

A team may have one main clinic or office. Or they may work in different places, like GP surgeries or health centers. You may be offered home visits. This will depend on your local NHS Trust. CMHTs are for people aged between 18 and 65.

There are different mental health teams for other age groups. They are:

- child and adolescent mental health services (CAMHS), for people under 18 years old, and
- older adult mental health teams, for people who are over 65.

What is a crisis team?

A crisis team can support you if you are having a mental health crisis in the community. They offer short term support to help prevent hospital admission. They can arrange for you to go to hospital if you are very unwell.

Having a mental health crisis can mean different things. It can include:

- thinking about suicide or acting on suicidal thoughts,
- severely self-harming,
- experiencing psychosis, where you are out of touch with your normal reality, or
- doing something that could put you or other people at risk.

A crisis team can also support you when you are discharged from a short stay in hospital.

The team may:

- offer medication,
- arrange regular visits, and
- make sure you are in touch with other services to get long-term support, such as the CMHT or social services.

Crisis teams are sometimes called:

- home treatment teams,
- crisis resolution teams,
- intensive teams,
- crisis and assessment teams, and
- rapid response teams.

You can get crisis support by:

- looking on your local NHS trust's website for information,
- calling your local NHS urgent mental health helpline. Follow this link: www.nhs.uk/service-search/mental-health/find-an-urgent-mental-health-helpline
- calling NHS 111, or
- talking to your GP.

What is an early intervention team?

Early intervention in psychosis team (EIT) services can support you if you experience psychosis for the first time.⁴ You might get help from an EIT service if you have psychosis and have used drugs.⁵

Psychosis is a medical term. If you have psychosis, you will process the world around you differently to other people. This can include how you experience, believe or view things.⁶

You might see or hear things that others do not. Or believe things other people do not. Some people describe it as a "break from reality". It is common symptom for people who have a diagnosis of schizophrenia, schizoaffective disorder and bipolar disorder.

The National Institute for Health and Care Excellence (NICE) recommends that early intervention services should be open to people of all ages.⁷

You should be referred to the EIT without delay. You should be referred to a crisis team if EIT can't provide urgent support for you in a crisis. But you should still be supported by the EIT at the same time.⁸

You can find more information about '**Psychosis**' at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy.

What is an assertive outreach team?

An assertive outreach team (AOT) may work with you if you are 18 or over and you need intensive support because of complex mental health needs.⁹ The team aim to give you support, so that you are able to get the treatment or care that you need from other services.

This support can help you to manage your condition better. And reduce your chances of going back to hospital.¹⁰ The AOT is also known as the complex care team (CCT) or programme of assertive community treatment (PACT).

However, AOT's no longer exist in most areas. You will be able to get support from the community mental health team if there is not an AOT in your area.

You may need the AOT if you have:¹¹

- a severe long-term mental illness that affects you every day,
- been in hospital many times and have often used crisis services,
- problems working with mental health services, or
- complex needs such as:
 - violent behaviour,
 - serious self-harming,
 - not responding to treatment,
 - drug or alcohol use and mental illness. This is known as dual diagnosis,

- being detained in hospital under the Mental Health Act in the last 2 years, or
- unstable accommodation or homelessness.

AOTs should review your care plan every 6 months.¹² See section 8 of this factsheet for more information, '[What is the care programme approach \(CPA\)](#)'

Why don't AOT's exist in most areas?¹³

Studies have shown that although AOT's can improve people's engagement with appointments, they haven't largely changed:

- hospital bed use,
- people's need for crisis support, or
- the patient experience.

What is a forensic community mental health team?

A forensic community mental health team (FCMHT) is a specialist team that can support you if:¹⁴

- you have a mental illness or personality disorder,
- you have a history of committing crime, or you may be a risk to others, and
- you are in the community or are secure hospital setting and working towards discharge.

Being in a secure hospital setting means you are detained in hospital under a forensic section of the Mental Health Act. This means you have committed a crime but have been sentence to a hospital order instead of a prison sentence.

The aims of FCMHTs are:¹⁵

- to help you in your mental health recovery,
- improve your access to community rehabilitation, and
- offer you a different choice to hospital care.

Is a drug and alcohol team a mental health team?

Drug and alcohol teams are not usually specifically for people with mental health needs. They support people with an alcohol or drug addiction. They are sometimes called 'addiction services.'

If you have an alcohol or drug addiction and a mental health condition this is called having a 'dual diagnosis.'

You may need to work with both the substance abuse team and community mental health team to manage your symptoms. In some areas of the country the NHS will have a dual diagnosis team to support recovery. They will usually work as part of the community mental health team.¹⁶

If you have complex mental health needs and a substance abuse issue you may be supported under a package of care called the care programme approach (CPA). See section 8 of this factsheet for more information, '[What is the care programme approach \(CPA\)](#).'

Providers of mental health and alcohol and drug use services have a joint responsibility to work together to meet the needs of people with dual diagnosis.¹⁷

You can find more information about '**Drugs alcohol and mental health**' at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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3. Who makes up a mental health team?

Most staff in a mental health team will have a mental health or social care background. Staff can include psychiatrists, social workers, mental health nurses, psychologists, occupational therapists, and support workers.¹⁸

All staff work together and have meetings to discuss the progress of anyone they support. These meetings are called 'multi-disciplinary meetings.'

Psychiatrists

A psychiatrist is a medical doctor who has specialist training in mental health. They can diagnose mental illness, prescribe medication, and recommend treatment.

Social workers

A social worker is trained to give practical help with your social needs. Such as housing problems, financial issues, or by giving general support and advice.

Community psychiatric nurses (CPNs)

A CPN is a mental health nurse who works in the community. They can give you medication and help you to manage your health in the community.

Psychologists

A psychologist specialises in how your mind works. They will ask you questions to try to understand how your thoughts and feelings affect your behaviour. They can offer advice and therapy. They don't normally prescribe medication.¹⁹

Occupational therapists

An occupational therapist will give practical support to help you to do activities that you find difficult. They will help you to think about different

ways of doing the activity. They will often give support in your home to help you to be as independent as possible.

Care Coordinators

A care coordinator is responsible for organising and monitoring your care if you are under the care programme approach (CPA). Normally, you will see your care coordinator more often than other NHS staff. Care coordinators can be nurses, social workers, community psychiatric nurses (CPN) or occupational therapists.

See section 8 of this factsheet for more information, '[What is the care programme approach \(CPA\)](#)'

Approved Mental Health Professionals (AMHP)

An AMHP is a mental health professional who is trained to use the Mental Health Act. They can be a psychologist, nurse, social worker, or occupational therapist. They help to decide if you should be detained under the Mental Health Act along with 2 doctors. The role of the AMHP is to give a social, rather than a medical opinion.²⁰ Even if they have a medical background. An AMHP can help to bring you to hospital.

Other professionals

Other people will also make up the team. For example, managers, psychotherapists, support workers and administrators.

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4. How can I access a mental health team?

A health professional will usually need to refer you to a mental health team. If the team accept the referral, they will book an appointment for you. A referral is when a health professional asks a different service to support you.

How can I access the community mental health team, crisis team or early intervention team?

Community mental health teams, crisis teams and early intervention teams can accept referrals from:

- NHS local urgent helplines. www.nhs.uk/service-search/mental-health/find-an-urgent-mental-health-helpline.
- GPs,
- Other primary care services, such as Improving Access to Psychological Therapies (IAPT),
- Psychiatric Liaison Teams in A&E,
- other mental health teams, and
- social services.

Sometimes these teams will accept referrals from:

- the police,
- you, or
- your family.

Early intervention teams and crisis teams are more likely to accept a self or family referral.

It is more unusual for CMHTs to accept referrals from you or your family.

If you would like to know if a self-referral is possible in your area, you can ask your local service for more information. Sometimes you can find information from looking online.

How can I access the assertive outreach team? ^{21,22}

The assertive outreach team can accept referrals from:

- NHS local urgent helplines. www.nhs.uk/service-search/mental-health/find-an-urgent-mental-health-helpline.
- other mental health teams, and
- sometimes the police.

AOTs will not usually accept referrals from:

- your GP,
- you, or
- your friends and family

What can I do if the referral isn't accepted?

Mental health teams may not accept a referral from a professional, you or your family member.

If your referral has not been accepted, ask the service to explain the reason why.

If you disagree with their reason for not accepting your referral you can:

- talk to the professional who referred you to see if they can help, or
- ask the service to see their policy. A service should have a policy to explain which patients will be accepted by the service. You have a right to request this information under the Freedom of Information Act.

See section 11 of this factsheet, '[What if I have problems with my mental health team](#)' for more information about what you can do if your referral is not accepted.

What can I do if there isn't a service in my area that will meet my mental health needs?

If there are no services for your needs in your area you can talk to your doctor or healthcare team and ask them to make an individual funding request (IFR). An individual funding request means that you are asking the NHS to give you funding for treatment that exists in a different area. Or you are asking them to fund treatment which is not usually available on the NHS. IFR are only approved in exceptional circumstances.

You can find more information about:

- Advocacy
- Complaints
- NHS Treatment: your rights

at www.rethink.org. Or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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5. Can I choose which mental health team I go to?

You have a legal right to choose your mental health provider and team in some situations. These rights apply when:²³

- you are referred by a GP,
- you have an elective referral for a first outpatient appointment,
- the referral is suitable for your mental health needs,
- the service and team are led by a consultant or a mental healthcare professional, and
- the provider has a commissioning contract with any Clinical Commissioning Group (CCG) or NHS England for the required service.

An elective referral means that you wish to be referred for treatment that is not urgent or crisis care.²⁴ This means if you need urgent care or crisis support you will not be able to pick your provider or care team.

First outpatient appointment means your first appointment with your chosen provider at the start of a new episode of care. For example, if you start treatment with a mental health team, you don't have a right to swap your team halfway through your treatment.

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6. How long do I have to wait for my appointment?

If the mental health team accept your referral, someone will call or write to you and give you an appointment. If you are worried about waiting times, talk to the professional who referred you for support.

Community mental health team. You shouldn't have to wait more than 18 weeks for an appointment.²⁵

Early intervention team (EIT). You should start getting treatment for psychosis 2 weeks after your referral.²⁶ Treatment may include antipsychotic medication and talking therapy like Cognitive Behavioural Therapy.²⁷

If EIT can't provide urgent support for you in a crisis, you should be referred to a crisis team. But you should still be supported by the early intervention in psychosis services at the same time.²⁸

Crisis team. Most areas have a crisis team that are open 24/7. You should get support quickly if you need this service. The NHS have said that every area in England will have a 24/7 mental health crisis service by 2021.²⁹

You can call your local NHS urgent mental health helpline to find out what support is available. Click on the below link to find your local number or call NHS 111. www.nhs.uk/service-search/mental-health/find-an-urgent-mental-health-helpline.

Assertive outreach team. You shouldn't have to wait more than 18 weeks for an appointment.³⁰

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7. What can I do to help my mental health whilst I wait for my appointment?

Whilst you wait for your appointment it may be helpful for you to try other ways to support your mental health, such as making social connections with people, exercising or focusing on sleep. Click the below link for more information on how to look after your mental wellbeing

www.rethink.org/advice-and-information/living-with-mental-illness/wellbeing-physical-health/

You could also ask your GP if there is a social prescribing link worker in your area to offer support to help with your mental health.

What is social prescribing?³¹

Social prescribing is a non-medical option to help improve your wellbeing. You can talk to your GP about a link worker. GPs will be able to make a referral to a social prescribing link worker. In some areas other health and care providers can make a referral, such as social services.

Social prescribing link workers aren't yet available in all areas of the country. The NHS have committed to having more than 1,000 link workers in place by 2024. There are many different names for link workers locally, such as community connector, wellbeing navigator or wellbeing advisor.

A link worker will work with you to find out what is important to you. They will help you to unpick complicated areas in your life and offer support to help your mental wellbeing. They can connect you with local support such as:

- activity groups,
- support groups,
- services, such as charities, and
- social services.

You can find more information about different ways to manage your mental health in our factsheet '**Recovery**' at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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8. What will happen during my first appointment with the mental health team?

At your first appointment you will have a mental health assessment with at least 1 health professional. Your assessment may take a few appointments to complete.

The reason for the assessment is to find out what support and treatment you need to help you recover.

You will be asked about things such as the following.³²

- Your thoughts, feelings and actions
- Your symptoms and experiences
- Support you already have
- If you care for anyone
- Your housing and financial needs
- Your employment and training needs
- Your relationships
- Cultural or religious needs
- Drug or alcohol use
- Your current coping techniques
- What you want to achieve in the future

You might be asked about things that have happened in your past. Some people find this difficult. Don't be afraid to say if you don't feel comfortable to talk about something.

Give the team any information that you think is important to help them to understand your needs. The team will only be able to support you with things that you tell them about. If you find certain topics hard to discuss you could write down what you want to say before the appointment and hand the paper to the professional to read.

Your treatment or care plan should meet your mental health needs. You should be involved in the planning of your care. Your wishes for support and treatment should be listened to.³³ You should be at the centre of your

care. This is called a person-centred approach. Talk to your care team if you feel as though you are not being involved enough with your care. You can also involve any carers, friends or family in your care planning. They should be encouraged to share their views. You should be asked on different occasions if you would like your family to be involved with your care.³⁴

Your care might involve help from 1 team member. Or you might work with different members of the team.

If you have complex care needs, you may be assessed under the care programme approach (CPA). This means you will have a care coordinator to support you. Some people have a preference for a male or female care coordinator. Tell the assessor if this is important to you. But be aware that you may not be given your preference.

See section 8 of this factsheet for more information, '[What is the care programme approach \(CPA\)?](#)'

Are the mental health team responsible for all of my healthcare needs?

A mental health team will generally only support with your mental health needs. Such as medication or talking therapy.

Your GP will still be responsible for the rest of your medical care, such as physical health needs.

However, even if you are under the care of the mental health team your GP may be responsible for prescribing your mental health medication. This will depend on shared care arrangements. Shared care is when your GP prescribes medication under guidance from another team.

Shared care may work for you if you prefer your medication to be prescribed by a GP rather than a psychiatrist. For example, your GP may be closer to your home than the MHT. But your GP needs to make sure that they are clinically able to prescribe your medication before agreeing to shared care.³⁵

What if I have psychosis or a severe mental illness?

A mental health team will support with both your mental health needs and monitor your physical health needs if you have psychosis. Your physical health monitoring will be transferred to your GP after 12 months. Or until your symptoms have become stable.³⁶

Your GP should offer you a regular physical health check if you have a severe mental illness. This is because you are a higher risk of developing certain physical health conditions.^{37,38} Your GP have a register that should remind them when this is due.³⁹

As part of your health monitoring, a doctor or nurse may check your:

- blood pressure,
- pulse,
- urine,
- blood, and
- weight.

You can find more information about '**Severe Mental Illness and Physical Health Checks**' at www.rethink.org.

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9. What is the Care Programme Approach (CPA)?

The Care Programme Approach (CPA) is a package of care that is used by mental health services. CPA should be available if you have a wide range of needs from different services or you are thought to be a high risk of harm.⁴⁰ This is known as having complex care needs.

You will have a care plan and a professional to coordinate your care if you are under CPA. All care plans must include a crisis plan.⁴¹

CPA aims to support your mental health recovery by helping you to understand your:

- strengths,
- goals,
- support needs, and
- difficulties.

Not everyone who is supported by a mental health team will be under CPA.

You can find more information about '**Care Programme Approach (CPA)**' at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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10. What will happen to my care if I move area?

Your mental health team (MHT) should make sure that your care is transferred to a local MHT if you move to a different area.⁴² Tell your team as early as you can when you are due to move. Your care is unlikely to be transferred to a different MHT if you remain local to the area.

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11. When will I stop seeing the mental health team?

As a general rule you should continue to get support from the mental health team until you no longer need it. But usually you will only get 3 years support from an early intervention team. This can be extended if you have not made a stable recovery.⁴³

When you no longer receive support from a service, you are 'discharged' from their care. Mental health teams should make sure that you have the right support to stay well before they discharge you.

As part of your discharge, you may be referred or signposted to a more appropriate service.⁴⁴ For example, if you need longer term support to stay well, a crisis team may refer you to the community mental health team (CMHT). Crisis teams only tend to offer short term support. Or the assertive outreach team may refer you to the CMHT if you no longer need intensive support.

They should give you information on what to do, or who to contact, if your mental health gets worse. A 24-hour helpline should be available to service users so that they can discuss any problems arising after discharge.⁴⁵ You could ask the team how you can be referred back to them if you need their support.

Who should be involved in the discharge process?

Your mental health team should involve you in the discharge process.⁴⁶

Mental health teams should also check if you have support from people close to you. This can include family members, friends or your partner.⁴⁷ They should be involved in your discharge if you would like them to be.

What should I do if I don't think I should be discharged?

Ask the service to explain the reason why you were discharged.

If you disagree with their reason for discharge, you can:

- talk to the professional who referred you to see if they can help, and
- ask the service if you can see their policy. A service should have a policy to explain when patients will be discharged from the service. You have a right to request this information under the Freedom of Information Act.

See section 11 of this factsheet, '[What if I have problems with my mental health team](#)' for more information about your options.

Will my benefits be affected if I am discharged from a mental health team?

The Department for Work and Pensions (DWP) won't stop or reduce your benefits if you are discharged from a mental health team.

But your entitlement to certain benefits might be affected. This is because your health may have improved. Benefits such as Employment and Support Allowance (ESA), certain components of Universal Credit (UC) and Personal Independence Payment (PIP) are based on how your illness affects you.

You are responsible for telling the DWP if your health has improved. Health professionals are unlikely to do this for you.

You can find more information about 'Employment and support allowance' and 'Personal Independence Payment' at:

www.rethink.org/advice-and-information/living-with-mental-illness/moneybenefits-and-mental-health/

What other services may support me if I am discharged from a mental health team?

When you are discharged from a mental health team you might get support from:

- your GP,
- a link worker through your GP,
- a different mental health team,
- social services, or
- charities such as Rethink Mental Illness.

You can find more information about:

- GP what to expect from your doctor
- Social Care Assessment under the Care Act 2014

at www.rethink.org. Or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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12. What if I have problems with my mental health team?

You can try the following to try to solve any problems you have with the mental health team.

Contact your care coordinator

Not everyone will have a care coordinator.

If you have an issue with your care or treatment your care coordinator should be a good person to talk to. They are responsible for making sure that your care needs are met.

See section 8 of this factsheet, '[What is the care programme approach \(CPA\)](#)' for more information.

Contact PALS

If you are unhappy with your care or treatment you can contact the Patient Advice and Liaison Service (PALS). PALS are a service within the NHS. They can try to help you with any problems or questions you have. There is more information on finding your local PALS in the 'useful contacts' section at the end of this factsheet.

Contact an advocacy service

Advocates are not part of the NHS. They are a free service that can help you to make your voice heard and help deal with problems with services.

There are different types of advocacy services who may be able to help.

- A community advocate may be able to help you talk to professionals, help you write letters, or attend appointments or meetings with you.
- An NHS complaints advocate can help you to make a complaint.

Make a complaint

You can make a formal complaint if you are unhappy with care, treatment or facilities that the NHS provide. You can find details about how to make a complaint on the website of your local NHS Trust.

You can find more information about:

- Advocacy
- Complaints

at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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13. What about confidentiality?

The mental health team needs your permission to share information with other professionals, or your family or friends.⁴⁸ But they can share information with any health professionals that need to be involved in your care, such as your GP. They can do this without your consent. This is known as implied consent.⁴⁹

They can share information with other professionals if they are worried about your safety, or the safety of other people. They can do this without your consent.⁵⁰

You can find more information about ‘**Confidentiality**’ at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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14. What can I expect from the mental health team as a carer, friend or relative?

The mental health team (MHT) should do the following to support you.⁵¹

- Give you information about how to care and support someone with a mental illness. This is sometimes called ‘psychoeducation.’

- Tell you about support available for carers.
- Offer family intervention if you support someone who has psychosis.⁵²
- Offer an assessment of your own needs if you care for someone with psychosis. They should give a copy to your GP. This is a different assessment to a 'carer's assessment.'
- Tell you about your right to have a carer's assessment from social services. This will be available to you if you need your own support to continue to support someone. It is free to have an assessment

Do I have a right to know information about someone's care and treatment?

An MHT can only share information about someone's care if the person it concerns agrees to have their information shared.⁵³

You should talk to the person you care for about what information they are happy for you to know. This information should be written in their records.⁵⁴

The MHT should involve you in care planning if the person you care for would like you to be involved.⁵⁵

How can I look after my own mental health?

As a carer it is important to look after your own mental wellbeing. Don't be afraid to ask for help if you need it. If you need support to care for someone, you could try the following:

- Talk to friends and family
- Talk to your doctor
- Join a carers service. They are free and available in most areas
- Join a support group for carers, friends and family.
- Look after your mental wellbeing. Click this link for more information www.rethink.org/advice-and-information/living-with-mental-illness/wellbeing-physical-health/

You can find more information about:

- Confidentiality and information sharing – for carers, friends and relatives
- Supporting someone with a mental illness
- Carers Assessment
- Respite care - breaks for carers

at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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Patient Advice and Liaison Service

You can find your local Patient Advice and Liaison Service (PALS) by using the search facility on the NHS choices website.

Website: [www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-\(PALS\)/LocationSearch/363](http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-(PALS)/LocationSearch/363)

NHS Urgent Mental Health Helpline

Call for 24-hour advice and support - for you or someone you care for. You can speak to a mental health professional. They will help decide the best course of care.

Website: www.nhs.uk/service-search/mental-health/find-an-urgent-mental-health-helpline

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