

Policy for Payment of Section 12 Mental Health Act Assessments

November 2025 - November 2028

CONTROL RECORD	
Title	Policy for Payment of S12 Mental Health Act Assessments
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Status	Final
Author	Deputy Head of Mental Health Commissioning
Sponsor	Executive Director of Delivery and Operations
Team	Mental Health Commissioning
Amendments	Not applicable as this is a new policy
Purpose	To ensure that there is a process and guidance in place for the approval and payment of claims made for Mental Health Act assessments made by Section 12 (2) approved Doctors
Superseded Documents	Not applicable
Audience	Clinicians who are S12(2) approved to carry out Mental Health Act assessments, finance, commissioning managers, mental health trusts, social care Approved Mental Health Professionals (AMHPs)
Consulted with	Section 12 Review Task and Finish Group Section 12 Review Oversight Group
Equality Impact Assessment	July 2025, no impact
Approving Body	Strategic Planning and Integration Committee
Date approved	2 October 2025
Date of Issue	November 2025
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1. Introduction

- 1.1 This policy applies to the NHS Nottingham and Nottinghamshire Integrated Care System.
- 1.2 The **Mental Health Act (MHA) 1983** (c.20) is an Act of the Parliament of the United Kingdom which applies to people in England and Wales. It covers the reception, care and treatment of mentally disordered persons, the management of their property and other related matters. In particular, it provides the legislation by which people diagnosed with a mental disorder can be detained in hospital or police custody and have their disorder assessed or treated against their wishes, informally known as "sectioning". An application for detention must be supported by two medical recommendations given in accordance with the Act.
- 1.3 A section 12 approved doctor is a medically qualified doctor who has been recognised under section 12(2) of the Act. They have specific expertise in mental disorder and have additionally received training in the application of the Act. They are usually psychiatrists, although some are general practitioners (GPs) and other doctors (such as forensic medical examiners, etc.) who have a special interest in psychiatry.
- 1.4 The NHS Act 2006 (Section 236) clearly states that under certain terms, the Secretary of State must pay a fee to a medical practitioner who undertakes a medical examination of any person with a view to applying to admit him or her to hospital for assessment, or for treatment under Part 2 of the Mental Health Act 1983.
- 1.5 This includes the work undertaken including the examination, the report and any expenses reasonably incurred in doing the work.
- 1.6 Medical examination by doctors as part of the assessment must involve:
 - Direct personal examination of the patient and their mental state, and
 - Consideration of all available relevant clinical information, including that in the possession of others, professional or non-professional.
- 1.7 If direct physical access to the patient is not immediately possible and it is not desirable to postpone the examination in order to negotiate access, consideration should be given to requesting that an AMHP apply for a warrant under section 135 of the Act.
- 1.8 Where practicable, at least one of the medical recommendations must be provided by a doctor with a previous acquaintance with the patient. Preferably, this should be a doctor who has personally treated the patient. It is sufficient for the doctor to have had some previous knowledge of the patient's case.
- 1.9 It is preferable that a doctor who does not have previous acquaintance with the patient be approved under section 12 of the Act. The Act requires that at least one of the doctors must be so approved.

- 1.10 Local arrangements should, as far as possible, ensure that assessments are carried out by the most appropriate AMHP and doctors in the particular circumstances.

2. Purpose and Scope

- 2.1. The purpose of this policy is to ensure that there are standard and fair rules for the payment of medical examinations undertaken under the Mental Health Act 1983 by doctors approved under Section 12 of the same Act and that patients are examined and assessed promptly. This policy applies to the provision of all Mental Health Act assessments for Nottingham and Nottinghamshire patients.

3. Definitions

Term	Definition
“Section 12(2) Doctor”	A Registered Medical Practitioner who has expertise in the diagnosis of mental disorder within the meaning of the Mental Health Act 1983 and who has been approved under Section 12(2) of the Mental Health Act by the Secretary of State for Health and Social Care.
“Section 12 Payment”	Is the payment made to a doctor approved under Section 12 of the Mental Health Act 1983 after a medical examination has been carried out under the same Act.
“Section 12 Work”	Is the medical examination undertaken by a doctor approved under Section 12 of the Mental Health Act 1983 as part of a statutory assessment under the same Act.

4. Roles and Responsibilities

Role	Responsibilities
Integrated Care Board (ICB)	The Board has overall accountability to ensure adequate section 12 responsibilities as part of their wider duty to provide services considered appropriate to improving people’s physical or mental health within their local population.
Strategic Planning and Integration Committee	The Strategic Planning and Integration Committee provides the Board with assurance of the effectiveness of the implementation of this policy.

Role	Responsibilities
Nottinghamshire Healthcare Foundation Trust	Provide secondary care mental health services for the Nottingham and Nottinghamshire population.
Approved Mental Health Professional (AMHP)	AMHPs have a statutory role to organise and undertake assessments under the Mental Health Act and authorise detention under the act where legal definitions are met. An AMHP is a multi-professional role, the majority of whom are registered social workers or nurses, and they require medical recommendations from two doctors in non-emergency situations, at least one of whom is Section 12 approved (s12 doctor), to implement detention under the MHA.
S12 Doctors	A Registered Medical Practitioner who has expertise in the diagnosis of mental disorder within the meaning of the Mental Health Act 1983 and who has been approved under Section 12(2) of the Mental Health Act by the Secretary of State for Health and Social Care.
Executive Director of Delivery and Operations	The Executive Director of Delivery and Operations is the executive lead for the implementation of this policy.

5. Principles

- 5.1 A doctor cannot claim payment for Section 12 work which is carried out on patients for whom they have direct responsibility (e.g. designated Responsible Clinician) except outside normal contracted working hours.
- 5.2 A Consultant cannot be paid twice for one activity. This is described in the Terms and Conditions of Service - Consultants (England) 2003 Schedule 11.1. Work undertaken during Programmed Activities (PAs) will not attract additional fees. This principle applies in equal measure when remunerated by an on-call supplement as part of PA work. The doctor undertaking fee-paying work can keep the fee owed if they are doing the work in their own time or have a specific agreement in their job plan, for example time shifting.
- 5.3 A doctor cannot undertake independent paid section 12 work (on patients unconnected to the Trust) during their normal contracted working hours. The only exception to this is where time-shifting arrangements have been agreed and no overtime is claimed.

6. Fees

- 6.1 Fees for section 12 work for Section 12 approved doctors are currently as set out below:
- For completed assessments £177.70
 - For completed assessments undertaken by doctors who are not Section 12 approved £55.10
 - Call out fee for cancelled or failed assessments (e.g. unable to complete assessment - patient is not at the address) – £177.70
 - Mileage – 0.23p per mile
- 6.2 Where an assessment is cancelled prior to travel, no claim can be made.
- 6.3 Fees will be reviewed annually and revised where necessary in line with new national guidance / legislation.
- 6.4 Fees will only be paid on receipt of the Claim form for Medical Fees for Mental Health Act Assessment for Section 12 Approved Doctors (Appendix A) **OR** Claim form for Medical Fees for Mental Health Act Assessment for non- Section 12 Approved Doctors (Appendix B).
- 6.5 All claims must be submitted within 3 months of the Mental Health Act assessment taking place. Claims will be checked and processed and paid within 30 days from the date of the claim.
- 6.6 Claims made after 3 months will not be accepted.
- 6.7 Claim forms should be submitted to nnicb-nn.section12notts@nhs.net

7. Equality and Diversity Statement

- 7.1 NHS Nottingham and Nottinghamshire ICB pays due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation, as a commissioner and provider of services, as well as an employer.
- 7.2 The ICB is committed to ensuring that the way it provides services to the public and the experiences of its staff does not discriminate against any individuals or groups on the basis of their age, disability, gender identity (trans, non-binary) marriage or civil partnership status, pregnancy or maternity, race, religion or belief, gender or sexual orientation.
- 7.3 The ICB is committed to ensuring that its activities also consider the disadvantages that some people in the ICB's diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, gypsies, Roma and travellers.

- 7.4 As an employer, the ICB is committed to promoting equality of opportunity in recruitment, training and career progression and to valuing and increasing diversity within the ICB workforce.
- 7.5 To help ensure that these commitments are embedded in the ICB's day-to-day working practices, an Equality Impact Assessment has been completed and is included within this policy.

8. Communication, Monitoring and Review

- 8.1 The ICB will establish effective arrangements for communicating the requirements of this policy and will provide guidance and support to any stakeholders in relation to their responsibilities.
- 8.2 Nottinghamshire Healthcare Foundation Trust will be expected to conduct regular audits to ensure payments are being requested appropriately in line with the policy. Other mental health trusts may be asked to verify that claims that are made on behalf of doctors employed by their trust are being requested appropriately in line with the policy.
- 8.3 Any individual who has queries regarding the content of this policy, or has difficulty understanding how this policy relates to their role, should contact the Mental Health Commissioning Team at nnicb-nn.mentalhealth@nhs.net.

The effectiveness of the implementation of this policy will be reviewed every 3 years and reported to the Strategic Planning and Integration Committee.

9. Interaction with other Policies

- [Fraud, Bribery and Corruption Policy](#)

10. References

- Mental Health Act 1983
- Mental Health Act 1983 Code of Practice: [Code of practice: Mental Health Act 1983 - GOV.UK](#)
- Mental Health Act 1983 Reference Guide [Mental Health Act 1983: reference guide - GOV.UK](#)
- Terms of conditions and Service – Consultant, speciality doctors
 - [Consultant contract in England \(bma.org.uk\)](#)
 - [Terms and conditions of service for specialty doctors \(England\) 2021 | NHS Employers](#)
- NHS England (2024) Reducing delays in accessing Section 12 approved doctors for Mental Health Act assessments: A good practice guide.

11. Equality Impact Assessment for this Policy

Name of Policy	Policy for Payment of S12 Mental Health Act Assessments
Date of Completion	July 2025
EIA Responsible Person Include name, job role and contact details.	Deputy Head of Mental Health Commissioning nnicb-nn.mentalhealth@nhs.net

For the policy, please answer the following questions against each of the protected characteristics, human rights and health groups:	What are the actual, expected or potential positive impacts of the policy, process, strategy or service change?	What are the actual, expected or potential negative impacts of the policy, process, strategy or service change?	What actions have been taken to address the actual or potential positive and negative impacts of the policy, process, strategy or service change?
Age	There are no actual or expected positive impacts on the characteristic of Age.	There are no actual or expected negative impacts on the characteristic of Age.	None.
Disability¹ (Including: mental, physical, learning, intellectual and neurodivergent)	There are no actual or expected positive impacts on the characteristic of Disability.	There are no actual or expected negative impacts on the characteristic of Disability.	None.

Gender² (Including: trans, non-binary and gender reassignment)	There are no actual or expected positive impacts on the characteristic of Gender.	There are no actual or expected negative impacts on the characteristic of Gender.	None.
Marriage and Civil Partnership	There are no actual or expected positive impacts on the characteristic of Marriage and Civil Partnership.	There are no actual or expected negative impacts on the characteristic of Marriage and Civil Partnership.	None.
Pregnancy and Maternity	There are no actual or expected positive impacts on the characteristic of Pregnancy and Maternity Status.	There are no actual or expected negative impacts on the characteristic of Pregnancy and Maternity Status.	None.
Race³	There are no actual or expected positive impacts on the characteristic of Race.	There are no actual or expected negative impacts on the characteristic of Race.	None.
Religion and Belief⁴	There are no actual or expected positive impacts on the characteristic of Religion or Belief.	There are no actual or expected negative impacts on the characteristic of Religion or Belief.	None.
Sex⁵	There are no actual or expected positive impacts on the characteristic of Sex.	There are no actual or expected negative impacts on the characteristic of Sex.	None.
Sexual Orientation⁶	There are no actual or expected positive impacts on the characteristic of Sexual Orientation.	There are no actual or expected negative impacts on the characteristic of Sexual Orientation.	None.

Human Rights⁷	There are no actual or expected positive impacts on the characteristic of Human Rights.	There are no actual or expected negative impacts on the characteristic of Human Rights.	None.
Community Cohesion and Social Inclusion⁸	There are no actual or expected positive impacts on the characteristic of Community Cohesion and Social Inclusion.	There are no actual or expected negative impacts on the characteristic of Community Cohesion and Social Inclusion.	None.
Safeguarding⁹	There are no actual or expected positive impacts on the characteristic of Safeguarding.	There are no actual or expected negative impacts on the characteristic of Safeguarding.	None.
Socioeconomic and other 'at risk' groups¹⁰ (Including carers, homeless, Looked After Children, living in poverty, asylum seekers, rural communities, victims of abuse, ex-offenders)	There are no actual or expected positive impacts on the characteristic of Other Groups at Risk.	There are no actual or expected negative impacts on the characteristic of Other Groups at Risk.	None.

Additional Equality Impact Assessment Supporting Information

1. **Disability** refers to anyone who has: "...a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities..." (Equality Act 2010 definition). This includes, but is not limited to: mental health conditions, learning disabilities, intellectual disabilities, neurodivergent conditions (such as dyslexia, dyspraxia and dyscalculia), autism, many physical conditions (including HIV, AIDS and cancer), and communication difficulties (including d/Deaf and blind people).
2. **Gender**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: "A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex."
3. **Race**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: A person's colour, nationality, or ethnic or national origins. This also includes people whose first spoken language is not English, and/or those who have a limited understanding of written and spoken English due to English not being their first language.
4. **Religion and Belief**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: Religion means any religion and a reference to religion includes a reference to a lack of religion. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief.
5. **Sex**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: A reference to a person who has a particular protected characteristic and is a reference to a man or to a woman.
6. **Sexual Orientation**, in terms of a Protected Characteristic within the Equality Act 2010, refers to: Sexual orientation means a person's sexual orientation towards persons of the same sex, persons of the opposite sex or persons of either sex.
7. The **Human Rights Act 1998** sets out the fundamental areas that everyone and every organisation must adhere to. In relation to health and care, the most commonly applicable of the Articles within the Human Rights Act 1998 include: Article 2 Right to Life, Article 5 Right to Liberty and Security, Article 8 Right to Respect of Private and Family Life, and Article 9 Freedom of Thought, Conscience and Religion.
8. **Community Cohesion** is having a shared sense of belonging for all groups in society. It relies on criteria such as: the presence of a shared vision, inclusion of those with diverse backgrounds, equal opportunity, and supportive relationships between individuals. **Social Inclusion** is defined as the process of improving the terms of participation in society, particularly for people who are disadvantaged, through enhancing opportunities, access to resources, voice and respect for rights (United Nations definition). For the EQIA process, we

should note any positive or negative impacts on certain groups being excluded or not included within a community or societal area. For example, people who are homeless, those from different socioeconomic groups, people of colour or those from certain age groups.

9. **Safeguarding** means: "...protecting a citizen's health, wellbeing and human rights; enabling them to live free from harm, abuse and neglect. It is an integral part of providing high-quality health care. Safeguarding children, young people and adults is a collective responsibility" (NHS England definition). Those most in need of protection are children, looked after children, and adults at risk (such as those receiving care, those under a DoLS or LPS Order, and those with a mental, intellectual or physical disability). In addition to the ten types of abuse set out in the Health and Care Act 2022, this section of the EQIA should also consider PREVENT, radicalisation and counterterrorism.

10. **Other Groups** refers to anyone else that could be positively or negatively impacted by the policy, process, strategy or service change. This could include, but is not limited to: carers, refugees and asylum seekers, people who are homeless, gypsy, Roma and traveller communities, people living with an addiction (e.g., alcohol, drugs or gambling), people experiencing social or economic deprivation, and people in stigmatised occupations (e.g., sex workers).

Appendix A: Claim form for Medical Fees for Mental Health Act Assessment for Section 12 Approved Doctors



S12 APPROVED DOCTORS

CLAIM BY MEDICAL PRACTITIONER FOR SECTION 12 MENTAL HEALTH ACT EXAMINATION FEES

*****PLEASE COMPLETE THIS FORM IF AN APPROVED ASSESSOR IN BLOCK CAPITALS*****

Assessor/Assessment	
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Name of Medical Practitioner GMC No

Claim to be paid to (Individual GP name* / Practice name*)

Payee Address

..... Contact Tel No

Place of employment

Job Title

In respect of a Medical Examination (and Recommendation*) under Section
of the Mental Health Act, 1983. **(*delete if inappropriate)**

GP / Practice Name (in full) Date of Assessment

GP Practice Code

GP / Practice Address (in full) Time of Assessment.....

Patient Assessed At on

Patient Admitted To on

Approved Assessor
Fee £ **177.70**

Total Miles @ **£0.23** per mile £

From To
(* and return)

TOTAL £

Authorisation

I confirm that:

1. I have conducted this work outside my normal contract of employment
2. All Income Tax and National Insurance Contributions (NICs) associated with this claim are my responsibility and will be paid to HMRC
3. I accept NHS Nottingham and Nottinghamshire ICB's rates payable for the assessment
4. I understand that these assessments are subject to Post Payment Verification checks.

Further, I declare that I have not made any other claim for the work detailed on this form. I understand that if I knowingly provide false information, this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form for the purposes of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

I certify that this information is accurate and I claim the above fee under the Collaborative Arrangements.

Signed Medical Practitioner

Counter Signed Social Worker

Date

Please send this completed form to:-

Email: nnicb-nn.section12notts@nhs.net

Appendix B: Claim form for Medical Fees for Mental Health Act Assessment for Non-Section 12 Approved Doctors



Non- S12 APPROVED DOCTORS

CLAIM BY MEDICAL PRACTITIONER FOR SECTION 12 MENTAL HEALTH ACT EXAMINATION FEES

PLEASE COMPLETE THIS FORM IF A NON- APPROVED ASSESSOR IN BLOCK CAPITALS

Assessor/Assessment	
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Name of Medical Practitioner GMC No

Claim to be paid to (Individual GP name* / Practice name*)

Payee Address

..... Contact Tel No

Place of employment

Job Title

In respect of a Medical Examination (and Recommendation*) under Section
of the Mental Health Act, 1983. **(*delete if inappropriate)**

GP / Practice Name (in full) Date of Assessment

GP Practice Code

GP / Practice Address (in full) Time of Assessment.....

Patient Assessed At on

Patient Admitted To on

Approved Assessor
Fee £ 55.10

Total Miles @ £0.23 per mile £

From To
(* and return)

TOTAL £

Authorisation

I confirm that:

1. I have conducted this work outside my normal contract of employment
2. All Income Tax and National Insurance Contributions (NICs) associated with this claim are my responsibility and will be paid to HMRC

3. I accept NHS Nottingham and Nottinghamshire ICB's rates payable for the assessment
4. I understand that these assessments are subject to Post Payment Verification checks.

Further, I declare that I have not made any other claim for the work detailed on this form. I understand that if I knowingly provide false information, this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form for the purposes of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

I certify that this information is accurate and I claim the above fee under the Collaborative Arrangements.

Signed Medical Practitioner

Counter Signed Social Worker

Date

Please send this completed form to:-

Email: nnicb-nn.section12notts@nhs.net