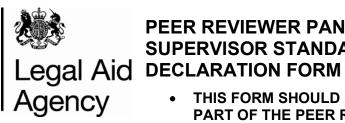
SUPP(MH-2)



PEER REVIEWER PANEL APPOINTMENT **SUPERVISOR STANDARD AND**

- THIS FORM SHOULD BE USED ONLY BY APPLICANTS AS PART OF THE PEER REVIEWER PANEL APPOINTMENT PROCESS.
- Use for **MENTAL HEALTH** only
- This form is for use by Supervisors who supervise a mixture of work under the Mental Health Act 1983 and Mental Capacity Act 2005

2000
1. Details of organisation/supervisor applying
Organisation's name:
Supervisor's forename:
Supervisor's surname:
Continuously qualified as a Supervisor since (date):
Account number(s) (as issued by us) of office(s) supervised:
Postcode(s) of office(s) supervised (if no Account number):
2. Generic Supervisor Requirements
The Supervisor meets the supervisory standards by having:
(i) Supervised in the Mental Health Category of Law and/or relevant Class of Work at least one full-time Caseworker (or equivalent) for at least one year in the five-year period prior to completing this form. ☐; or
(ii) Completed an approved training course covering key supervisory skills no earlier than 12 months prior to the completion of this form ☐; or
(iii) Completed the Level 3 or higher National Vocational Qualification (NVQ) standard (or any replacement from time to time) in supervising in the previous five-year period.

3. Qualifying Criteria						
		File name/ref		Date o	opened/ ed on	
	nvolvement in the delivery of cases where	1.	1.			
	nary issue relates to a matter under the Capacity Act 2005 – 10 cases	2.	2.			
	•	3.	3.			
1. pers	nvolvement in the delivery of a case means: onal conduct of a significant proportion of	4.	4.			
the o	casework; or	5.	5.			
2. direc	t supervision of an individual with conduct of	6.	6.			
the o	case.	7.		7.		
		8.		8.		
		9.		9.		
		10.		10.		
4. Lega	al Competence Standard for Supervisors (sections a), b)	and c) m	nust be	completed)	
i)	Panel Membership Requirement	Give date of admittance and provide documentary proof of membership				
a)	Current membership of the Law Society's Mental Health Accreditation scheme.	Please confirm membership by ticking box Date admitted to panel: Date last reaccredited:				
	Or for non-Solicitor Supervisors only assessed by the Law Society as meeting the Mental Health Accreditation Scheme criteria					
	Note: This alternative is only available to	Or Provide Confirmation of Positive Assessment				
	organisations in the NfP sector.					
		Date of Assessment:				
ii)	Skills/Procedure/Knowledge – examples from the last 12 months	File name/ref	Area o		Date closed/ worked on	
a)	Representation on 5 MHT case files in previous 12 months:	1.	1.		1.	
	•	2.	2.		2.	
	Note: Where the practitioner is unable to demonstrate that they have represented a	3.	3.		3.	
	client at 5 hearings they may, as an alternative, demonstrate the following in	4.	4.		4.	
	meeting the case load requirement:	5.	5.		5.	

	 Representation at 3 hearings; plus 2 further cases in which either the preparation for the hearing had been completed and can be demonstrated on file or where they have had conduct of a case which falls within the scope of the Category of Law. 			
b)	Mental capacity Act 2005– 5 cases, of which at least 2 must have involved an application to the Court of Protection	1. 2. 3. 4.	1. 2. 3. 4.	1. 2. 3. 4.
c)	Non- MHT cases - 2 legal help case files from the list below: 1. Hospital manager's review meeting 2. Care Programme Approach meeting 3. Section 117 aftercare 4. Medical treatment (under the MHA 1983) 5. Section 17 leave 6. Remittance to prison 7. Advice to nearest relative on their role/rights 8. Mental Capacity Act 2005	5.1.2.	5.1.2.	5.1.2.

5. Mental Health Case Involvement

Supervisors that work **full time** must demonstrate case involvement in the category of law (350 hours each year) over the past 3 years (36 months). Please give details in the **first three** columns below.

Supervisors that work **part-time** you must demonstrate case involvement in the category of law (1050 hours in total) over the past 5 years (60 months). Please give details in **all five** columns below.

Type of involvement	Minimum/Maximum hours allowed per year (Refer to guidance regarding part-time Supervisors)	Hours in past 12 months	Hours in months 13 to 24	Hours in months 25 to 36	Hours in months 37 to 48	Hours in months 49 to 60
		All Supervisors			Part-time Supervisors only	
a)	Total minimum 235 hours comprising:					

Personal casework Direct (documented) supervision	i) Personal casework (minimum 115 hours). ii) Direct supervision							
b) File Review (including face-to-face)	Maximum 60 hours (i.e., approx. 50% of 115 hours)							
c) External training delivery (meeting any professional development requirements of your Relevant Professional Body)	Maximum 115 hours							
d) Documented research and the production of publications	Maximum 115 hours							
e) Other supervision	Maximum 115 hours							
TOTAL	Minimum 350 hours							
5. Declaration	5. Declaration							
This Supervisor is either a sole principal, an employee, a director, a partner in or a member of the organisation named at 1 above as at the date of completion of this form.								
Tick box to confirm								
I confirm that the information provided in this form is accurate.								
Name:								
Role:								
Dated:								