

**Application for a Market Factor Supplement Payment**

<b>Department:</b>	Adult Social Community care
<b>Business Unit:</b>	Mental Health
<b>Service Director:</b>	David Dunkley
<b>Application Authorised by:</b>	Alison Elliott
<b>Post(s) for which a payment is required:</b>	Approved Mental Health Professional (AMHP)
<b>Date job description was last reviewed:</b>	2002
<b>Current job evaluated grade of post:</b>	PO3 Spinal Point 40- 43
<b>Annual value of the proposed payment:</b>	£1542
<b>Method of payment (e.g. yearly lump sum, monthly payment, etc.):</b>	Monthly
<b>Date payments will commence:</b>	To be backdated to November 2011

**Has this post been advertised previously unsuccessfully?**

**Yes**

[if yes, provide details of number of adverts, applicants, short-listed, appointed]

At least 8 adverts for AMHPs in the last 2 years-often up to 6 vacancies needing to be filled at any one time. Only on one occasion was an AMHP able to be shortlisted (and subsequently appointed) and this person had previously worked in Brent and was returning to work in this borough after a period away.

Otherwise social workers are recruited and we will train them ourselves to be AMHPs. However on 2 rounds of adverts the posts were not able to be filled even by a social worker whom we could have trained-up after 3 years, let alone an AMHP.

There is a national shortage of AMHPs, due to being a more highly-qualified role which requires considerable experience as a social worker before training as an AMHP. Nationally, the majority of AMHPs are above 45 years and tend to remain in posts – they are less available in the job-market.

This is of particular concern as there has been an increase in AMHP assessments of 30% nationally since the new Mental Health Act 2007. In Brent we have seen a significant increase in MH Act assessments and AMHP work -particularly through increased use of Community Treatment Orders, Guardianship and revisions to the Code of Practice which has led to an increase in Section 2. We therefore require more AMHPs to do this work.

The London Council Survey shows that AMHPs are in the extreme difficulty category for both recruitment and retention,

**Has this post experienced high turnover over the last twelve months?**

**Yes**

[If yes, attach turnover and any exit interviews details]

Over the last 4 years since July 2007 we have lost 13 permanent AMHPs. We have only been able to recruit 2, one of which was returning from previously having worked with us.

We have had to use 9 locum AMHPs across the last 4 years. This was very costly as the agency rates are often 1 ½ times the normal salary, they tend to move on rapidly to more lucrative opportunities with other boroughs and are time-consuming to induct.

Over the At least 4 permanent AMHPs have left to go to become locums as the pay was better.

Due to this high turnover it would be cost-effective for Brent council to retain the allowance for AMHPs.

**Is the Brent salary for this post below the market rate for equivalent jobs?**

**Yes**

(if yes, attach evidence of salary/benefits packages in comparable organisations. If no see next box)

**London Borough of Brent – up to £35000**

London Borough of Richmond – up to £42,466

London Borough of Hounslow – up to £41,000

London Borough of Hillingdon – up to £40,961

London Borough of Enfield – up to £42,000

London Borough of Harrow – up to £41,610

Neighbouring boroughs pay higher for the substantive posts. Additionally neighbouring boroughs of Westminster, Camden, Kensington and Chelsea pay Inner London Weighting whereas Brent pays OLW. Locum work through agencies is more highly paid in neighbouring boroughs.

The Market Supplement requested is not a new allowance but is being requested in order to re-instate the allowance which has been withdrawn through the current pay harmonisation.

**If the Brent salary for this post is comparable with the market for equivalent jobs, what is the basis for paying a supplement?**

[e.g. If non-pay benefits/conditions of employment offered by other boroughs are better than those of Brent provide details to support this]

Brent is not comparable with the market for equivalent jobs.

**Are there any other posts in the service and/or department which may be affected by the award of the payment?**

No

**What benefit to the service/department will result from application of the market supplement?**

[Include details of any proposals to reduce use of agency staff and overtime payments]

Brent would be able to retain existing AMHPs and more-easily attract new AMHPs. Without the market supplement, Brent would not be able to fulfil its statutory responsibilities and meet the current increase in statutory work.

**What are the financial implications of making the payment?**

£1542 Market Pay Supplement would be payable for each of the AMHPs (currently 24) – a total of £37,008 on current AMHP staffing level.

It would be cost effective to pay this supplement to ensure that we retain the existing experienced AMHP workforce and improve recruitment to vacant posts. The loss of the allowance will have a negative impact on both recruitment and retention, increasing operational costs as a result since we would need to recruit temporary locum staff to ensure the Council's statutory MHA obligations continue to be met.

We would have to spend more money on recruiting and training staff- who would for the most part be inexperienced and newly-qualified.

We would also have to train more of our existing social workers to become AMHPs, though the current workforce is such that only one person might be ready for training in this role starting in the next academic year (Sept 2012) as there are currently virtually no existing social workers with the required experience or length of employment needed. An AMPH course costs approximately £4,000 and lasts 26 weeks on average due to it being a very comprehensive training programme taking up to half a year with subsequent probationary period for development support during the following year. Backfill in the team would be required for the length of the training which can cost upwards of £18000 as is usually by locums who are more expensive.

Many of the AMHPs are close to retirement - we do not want to lose them prematurely through the loss of the allowance as they are the most experienced- and it would leave a much less experienced, skilled or legally knowledgeable workforce, who may also be more susceptible to legal challenges arising from their practice which would also be costly.

There would also be fewer experienced AMHPs to train-up the AMHP trainees to provide the essential placement facility during training.

**What arrangements are proposed for reviewing the payment?**

Payment would be reviewed after 18 months.

**How will you measure the success of any improvements that are put into place?  
Who will be responsible for measuring the success?**

We would measure the service's ability respond to our statutory obligations in supplying sufficient numbers of AMHPs to maintain the service.

The Lead Social Worker will review progress regarding retention, maintaining delivery of the statutory responsibilities and the filling of vacancies.

**Signed: (Not applicable) .....**

**Date: 11/11/11**

**Job Title: Approved Mental Health Professional (AMHP)**

**Application for a Market Factor Supplement Payment**  
**Equality Impact Assessment**

The impact of the proposed market supplement should be assessed with reference to the relevant target groups:

- Gender
- Disability
- Religion or Belief
- Main Occupational Groups
- Race
- Sexual Orientation
- Age
- Part time staff

<b>Department and Division:</b>	Adult Social Care – Mental health services
<b>Head of Service:</b>	David Dunkley
<b>Officer completing assessment:</b>	Irfan Khan
<b>Details of others involved in the assessment - auditing team/peer review:</b>	John Young/Judy Jones
<b>Date:</b>	11 <sup>th</sup> November

<b>Brief description of market supplement</b>
Market Supplement would be a monthly allowance equivalent to the difference between the Outer and Inner London Weighting allowances.

<b>Aims</b>
Aim is to reduce turnover in the AMHP role and attract new AMHPs.

<b>Objectives</b>
The objective is to have a fully staff-resourced AMPH service in order to meet Brent Council's statutory requirements and responsibilities under the Mental Health Act.

**What is the justification for taking these measures?**

Other local boroughs pay more. Brent needs to be competitive in order to retain AMHPs and be able to recruit new staff in order to maintain the service.

AMHPs previously received an allowance due to the additional training and levels of responsibility they undertake as part of their role, usually involving highly volatile situations involving a high level of client-risk and extended-hours work. The allowance had been considered a due recognition of their commitment to maintaining a service to high standards and of their loyalty to Brent.

**Are the aims consistent with the council's Comprehensive Equality Policy?**

Yes.

**Does a third party provide the function or service?**

We have to rely on agency cover as we cannot retain or recruit AMHP-qualified staff.

**Is there an adverse impact around race/gender/disability/faith/sexual orientation/health etc? Could the proposals affect people differently so that some groups may not have equal and fair access to rewards? What are the reasons for this adverse impact?**

None. AMHPs come from all sectors of the community and our aim is to continue to ensure we maintain the current staff levels.

We also may lose current AMHPs from specific sectors that may leave to go to other boroughs or agencies so active recruitment of AMHPs from all sectors of the community is essential.

**Describe the evidence (qualitative or quantitative) you have used to make your judgement. Please supply us with the evidence separately by race, gender, disability etc?**

AMHPs come from all sectors of the community. Our AMHP service includes people who are male and female, and are from all groups including different cultures and backgrounds, religions, sexualities orientations, ages and disabilities.

**How do the proposals take into account what might be different needs across different groups of people?**

Not applicable. See above.

**Have you conducted consultations/satisfaction surveys with employees?**

Yes. Current staff have stated that they will leave or retire early if they lose the previous allowance and it is not replaced by a Market Supplement. AMHPs consider they will be impacted if they do not retain the current allowance, as they would experience it as an effectual 'pay loss' of £1542.

They also consider they will feel the loss of the allowance would amount to a 'downgrade' as already they will have experienced the public sector's 'no inflationary adjustment', and other boroughs are paying more.

This loss is additionally difficult as the previous allowance gave due recognition of the complexity of the task, and of their commitment to Brent. The lure of enhanced pay through locum AMHP work with other boroughs who pay more, would be more pressing

**Have you analysed the result of these consultations/surveys to identify any trends across different groups of people? If not, why was the consultation/survey undertaken?**

AMHPs across the board feel this way as the Market Supplement application is based on a positive retention, recruitment and -role-recognition issue, not on an equalities issue.

.

**If number of responses to consultation/survey has been low, what steps have you taken to ensure a reasonable sample size e.g. taking results over a longer period or conducting surveys over the telephone?**

Not applicable.

**Who will be responsible for monitoring the impact and success of the scheme?**

Lead Social Worker