

Easy read:
section 117
aftercare
support for your
mental health.





Why do you get section 117 aftercare?



You have been in **hospital** on a section 3, 37,45A, 47 or 48 of the **Mental Health Act 1983**.



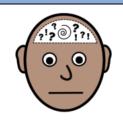


This was to **assess** and/or to **treat** your **mental** health.



Because of this **you** have a **right** to **section 117 aftercare**.

What is section 117 of the mental health act?

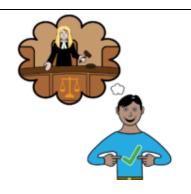


A **mental health disorder** describes people with a mental health illness.

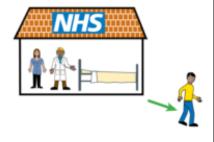




A **mental health illness** can affect the way you think, behave and feel.



The **Mental Health Act** is a **law** that tells people with a **mental health disorder** what **their rights** are.



Section 117 of the Mental Health Act says how you should receive care and support after leaving hospital.

What type of care and support can you get under section 117?



Under sections 3, 37,45A, 47 or 48 of the **Mental Health Act** you have the **right to care** and support when you **leave hospital.**

This is called **aftercare**.



Aftercare is there to help you stay well outside of hospital. Preventing you from needing to go into hospital again.



Health and social care are both responsible for providing the aftercare needed to meet your mental health needs.

They will work with you to understand your needs and plan how to support you. This is called a care plan.



No one has to **pay** for section 117 **aftercare** to keep your mental health well.

It is free as long as needed.

Your care and support plan.



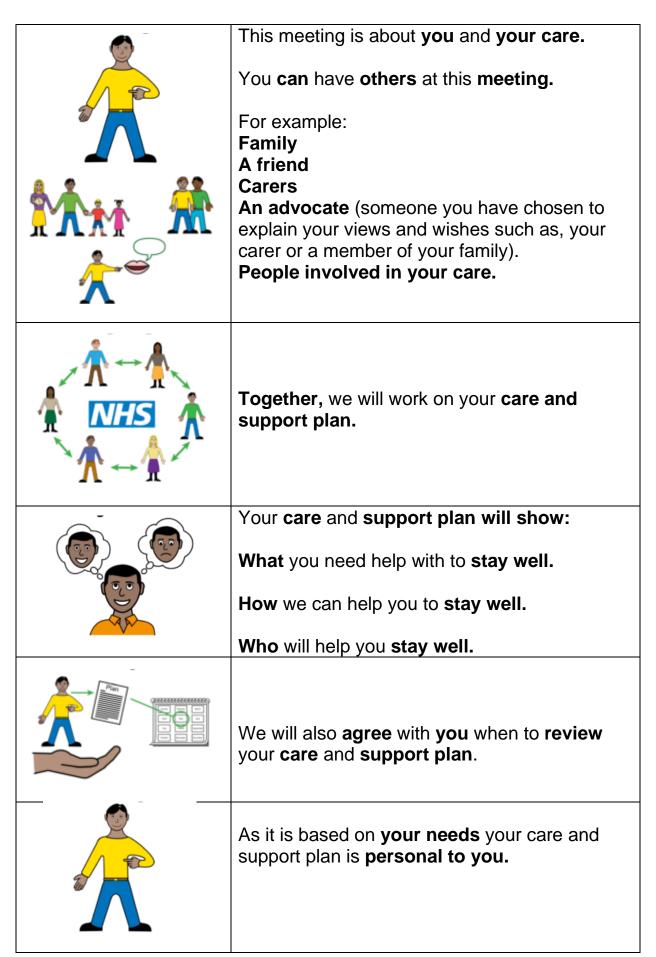
Whilst you are **in hospital** a **care plan** will be made.

This plan will make sure all the care and support you need is ready for you when you leave the hospital.



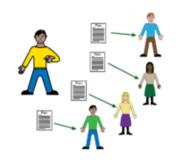
A planning meeting, sometimes called a 117-discharge meeting will be held as soon as possible.

This meeting will make sure everything is ready when you are able to leave hospital.



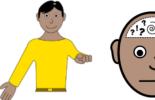


It is important that you are involved in writing your care plan. You should sign the plan, and you should have a copy of it.



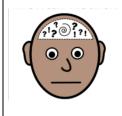
You can **choose who** to **share** your **plan** with.

Your care plan may include:





What **you** can do to **look after** your **mental** health and how health and social care can support you.





Where you live, such as special accommodation to meet your mental health needs.





The treatment you will get, such as medication, talking therapy (like counselling), or professional support from a social worker, nurse or anyone involved in supporting you to stay well in the community.



The structured **activities you can do** during the day.

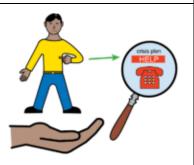


The **help** you can get for things like **managing** your **money**, getting a **job**, or **studying**.

What happens if you start to feel unwell again?



The care plan will tell people how to get extra support for you if you start to feel unwell. This may be called a contingency plan or relapse plan.



Your plan will also say what to do if your mental health changes and you become unwell again.

This may be called a **crisis or emergency** plan.



You **know yourself best**, so it is important that **you are involved** in **writing** your **relapse** or **contingency plan**.

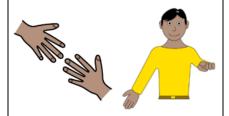
What should your relapse or contingency plan include?



What can make you unwell. This can help us to prevent a crisis.



What you, your family, other care staff and your community support team can do to help with any issues.



What helps you? This could be more support, reviewing your medication, staying with family, having crisis support.



Who **you want** to be **contacted** if you need to **go into hospital**. For example, who you want to look after your pet.

Reviewing your care plan.



Your **Care Plan** must be **reviewed** at least **once a year**.

This should **involve you**, your **carers** and **family**, and the **people involved** in your **care**.



If things **change** and you need to **review your plan sooner**, you can **ask your keyworker** to arrange a review **at any time**.

What will you discuss at your review?



What in your care and support plan is helping you stay well.



What in your care and support plan is not helping you stay well.



Any **changes** that are **needed** in your **care** and **support plan**.



If you **still need** section 117 **aftercare** to keep you **well.**

Does section 117 aftercare end?



Even if you are **doing well**, we know that you **may still need aftercare** to **stay well**.

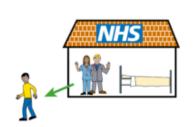


Any decisions to end section 117 aftercare must involve; You, your carers and family, your advocate, the people involved in your care.

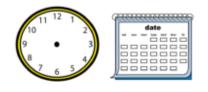


You will be **sent** a **letter** to **explain** any **decisions** that are **made**.

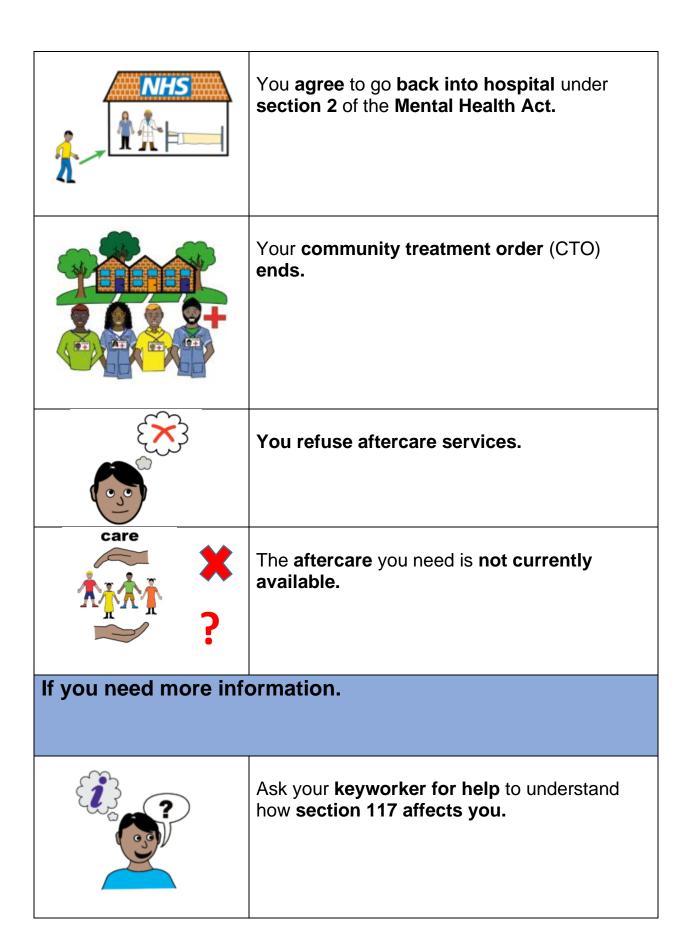
Aftercare CANNOT be ended because:-



You have been **discharged** from **specialist mental health services**, such as a community mental health team (CMHT) or learning disability team.



A certain **length** of **time** has **passed** since you **left hospital.**





These links may also be helpful:

The Mental Health Act and section 117

aftercare – from Mental Health and Money
Advice

Section 117 aftercare – from Mind

Section 117 aftercare – from Rethink

Mental health aftercare – from NHS

<u>Inpatient mental health care: a guide for young people</u> – from YoungMinds

Being sectioned – from The Mix

<u>The Mental Health Act Code of Practice</u> – 'Aftercare planning' section starts at on page 358

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