

STANDARD OPERATING PROCEDURE PAYMENT FOR MEDICATION UNDER SECTION 117 AFTERCARE

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VALIDITY – All local SOPS should be accessed via the Trust intranet

CHANGE RECORD

Version	Date	Change details
1.0	July-22	New SOP Approved at MHL Steering Group 20-July-22
1.1	June-23	Full review – no changes
1.2	January 2023	Added regulations information on page 3 and clarified that individuals with S117 entitlement who are not subject to a CTO but who are receiving medication from a Trust will also not be charged for the prescription but that all other patients who are not entitled to free NHS prescriptions (FP10s) will be required to pay the NHS Levy on collection of the medication from the community pharmacy. Approved at Drugs and Therapeutics Group (25 January 2024).

Contents

1. INTRODUCTION	3
2. SCOPE	3
3. DUTIES AND RESPONSIBILITIES.....	3
4. PROCEDURES	4
4.1. Identifying those eligible for free prescriptions	4
4.2. Process for receiving medication cost exemption under section 117.....	5
4.3. Purchasing the Pre-Payment Certificate	5
4.4. Continuing exemption	5
4.5. Ending of Section 117 entitlement.....	6
5. EQUALITY & DIVERSITY	6
6. IMPLEMENTATION	6
7. MONITORING & AUDIT.....	6
8. REFERENCES	6
Appendix 1: Application for medical cost exemption under section 117.....	7
Appendix 2 – Equality and Diversity Impact Assessment	8

1. INTRODUCTION

Some people who have been in hospital under the Mental Health Act can get free aftercare for support relating to their mental health condition when they leave hospital; this is called section 117 aftercare. **Those under section 117 are entitled to free aftercare costs: this may include medication for mental health conditions.**

Those entitled to section 117 aftercare include individuals:

- detained in hospital for treatment (section 3),
- transferred from prison to hospital (section 47 or section 48),
- ordered to go to hospital by a court (section 37 or section 45A).

Anyone who is later discharged from their section is still entitled to section 117 aftercare, even if they stay informally.

The National Health Service (Charges for Drugs and Appliances) Amendment Regulations 2008 amended the 2000 Regulations so that individuals who are subject to a Community Treatment Order (CTO) will not be charged for medication if it is supplied to them by a CCG (now Health and Care Partnership), Trust or a Patient Group Directive. No charge is to be made and recovered under this regulation from a patient who is accepted by the person supplying the drug as being subject to a community treatment order, in respect of any drug supplied to that patient for the treatment of a mental disorder.

Individuals with S117 entitlement who are not subject to a CTO **but who are receiving medication from a Trust** will also not be charged for the prescription.

All other patients who are not entitled to free NHS prescriptions (FP10s) will be required to pay the NHS Levy on collection of the medication from the community pharmacy. This includes those who are administered depot by the Trust but the depot is supplied by the GP via FP10, as the Trust is only administering the depot on behalf of the GP in this case.

Individuals will not be entitled to free aftercare if they have only been in hospital under section 2, 4, 5 or 38 of the Mental Health Act 1983.

Section 117 aftercare will continue as long as the individual needs it. However if, in the future, individuals go back into hospital under the MHA, section 117 aftercare duty ceases if detained under a section that has the aftercare duty as listed above. Otherwise ending section 117 must be agreed by the local Health and Care Partnership and local social services authority (LSSA) who must both decide that the individual no longer need any aftercare services.

2. SCOPE

This procedure covers the provision of medication for any eligible* person covered under section 117 aftercare of the Mental Health Act.

3. DUTIES AND RESPONSIBILITIES

It is the responsibility of mental health, learning disability in-patient and community teams to identify those people who are eligible* and entitled to free aftercare and treatment (including the provision of prescriptions for any on-going treatment with a mental health medication that is needed) and to follow the steps set out in this procedure.

It is the responsibility of the Medicines Optimisation team to purchase pre-payment certificates on behalf of the individual on receipt of the information set out in this procedure.

It is the responsibility of the individual to alert services when their annual renewal is due. For patients who do not have the capacity to understand the need for monitoring the expiry date of the pre-payment certificate, the care co-ordinator would be responsible for this and taking appropriate action.

**For eligibility of non-UK nationals please contact the MHA office.*

4. PROCEDURES

4.1. Identifying those eligible for free prescriptions

The situation where a person is in receipt of services under section 117 of the MHA does not give an automatic entitlement to free prescriptions. However, a person may qualify for free prescriptions for a number of reasons separate from their being in receipt of section 117 after care services.

Before progressing section 117 aftercare for prescription costs, check if the individual is already entitled to free prescriptions. The medical exemptions for entitlement to free NHS prescriptions are as follows:

Those who are entitled to free prescriptions:

- Aged 60 or over.
- Aged under 16.
- Aged 16-18 and in full-time education.
- Pregnant or have had a baby in the previous 12 months and have a valid maternity exemption certificate.
- Have a specified medical condition and have a valid medical exemption certificate (MedEx). This includes people with:
 - *a permanent fistula (e.g. colostomy or ileostomy) requiring continuous surgical dressing or requiring an appliance.*
 - *a form of hypoadrenalism (e.g. Addison's disease) for which specific substitution therapy is essential*
 - *diabetes insipidus or other forms of hypopituitarism*
 - *diabetes mellitus, except where treatment is by diet alone*
 - *hypoparathyroidism*
 - *myasthenia gravis*
 - *hypothyroidism requiring thyroid hormone replacement*
 - *epilepsy requiring continuous anticonvulsive therapy*
 - *undergoing treatment for cancer, including the effects of cancer, or the effects previous cancer treatment*
- Have a continuing physical disability that prevents you from going out without help from another person and have a valid MedEx.
- Hold a valid war pension exemption certificate and the prescription is for an accepted disability.

Individuals are also entitled to free prescriptions if they or their partner – including civil partner – receive, or are under the age of 20 and the dependant of someone receiving:

- Income Support
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance, or
- Pension Credit Guarantee Credit
- Universal Credit and meet the criteria

Finally, if they're entitled to or named on:

- a valid NHS tax credit exemption certificate
- a valid NHS certificate for full help with health costs (HC2)

Others who may be entitled to free NHS prescriptions are those who are on low income, are pregnant or have had a baby within the last 12 months, in receipt of tax credits and those who fall into particular age groups.

Those who are in receipt of section 117 after care and who are not subject to CTO or do not fall into one of the categories above will have to meet the cost of medicines for their mental disorder. However if the medicines are administered personally to the patient by a Health and Care Partnership, and mental health trust (for example in the form of a depot) then there is no charge. **Please note in Humber TFT the majority of our depots are prescribed by the patient's GP so the Trust would NOT be responsible for funding these prescriptions.**

Anyone who meets any criteria above should progress and receive free prescriptions through this process. Anyone who doesn't meet the strict criteria listed above and is under section 117 should follow the process set out below.

4.2. Process for receiving medication cost exemption under section 117

Ward staff should consider the funding of medication for people on 117 aftercare as part of the discharge process. For individuals already in the community, the care co-ordinator for the individual is responsible.

The completed application (appendix 1) containing all the details of the person should be emailed to hnf-tr.pharmacyprocurement@nhs.net

The Medicines Optimisation team will purchase an annual pre-payment certificate on behalf of the individual which will be posted/emailed directly to the address listed on the application.

The individual must show this to the community pharmacy when collecting medication to be exempt from paying the prescription costs.

4.3. Purchasing the Pre-Payment Certificate

On receipt of a completed and approved application, an annual prepayment certificate should be purchased from NHSBA: [Buy an NHS Prescription Prepayment Certificate \(nhsbsa.nhs.uk\)](https://nhsbsa.nhs.uk)

The Medicines Optimisation team will ensure the costs are charged back to the local Community Mental Health or Learning Disability Team listed on the application.

A copy of the completed application will then be uploaded to the individual's electronic notes and details of the application logged on the database: [V:\Corporate\Pharmacy\Section 117 Aftercare\Shared](#)

For lost prepayment certificate, the individual must contact the PPC helpline by either completing the online form: [Contact Us - Customer Self-Service \(nhsbsa.nhs.uk\)](#) or phone 0300 330 1341, Monday to Friday, 8am to 6pm and Saturday, 9am to 3pm.

4.4. Continuing exemption

One month before the annual pre-payment certificate is due to expire, the individual will receive an automatic notification from the NHSBSA.

It is the responsibility of the individual to alert staff that a new certificate is due. For patients who do not have the capacity to understand the need for monitoring the expiry date of the pre-payment certificate, the care co-ordinator would be responsible for this and taking appropriate action.

Care co-ordinator will follow the steps set out in 5.2 to request a new certificate, confirming continued eligibility for free medication under section 117 and checking that no new criteria apply e.g. development of diabetes, jobseekers allowance (see 5.1).

4.5. Ending of Section 117 entitlement

If section 117 aftercare ends or is stopped then prepayment certificate must also be stopped. If the person becomes eligible for free prescriptions (see 5.1) then the certificate must also be stopped. If the person is taken off their CTO and the Trust are not supplying medication then the certificate must also be stopped.

The care co-ordinator is responsible for completing the Z46 Removal Of Section 117 Entitlement Form and submitting it to her-tr.MentalHealthLegislation@nhs.net to inform Mental Health Legislation who will then add the date to the spreadsheet.

5. EQUALITY & DIVERSITY

An Equality and Diversity Impact Assessment has been carried out on this document using the Trust approved EIA, see appendix 2.

6. IMPLEMENTATION

This procedure will be disseminated by the method described in the Trust's Document Control Policy.

The SOP will be approved via the MHL Steering Group. It will also be discussed within Medic meetings and Pharmacy Meetings.

All other stake holders, partners and services to be made aware of the SOP via Mental Health Legislation Steering Group members and distributed via their internal systems

The SOP will be circulated to all in-patient units and community teams.

7. MONITORING & AUDIT

This SOP will be monitored via untoward incidents or PALS/complaints that arise as a result of the use of the SOP and reported to Humber NHS Foundation Trust which will then be processed at the Operation Risk Management Group and dealt with.

There are robust scrutiny processes in place which involve Pharmacy scrutinising eligibility and Pharmacy and Mental Health Legislation Team monitoring the spreadsheet.

8. REFERENCES

Devon Partnership Medication under Section 117 Aftercare SOP
Mental Health Act 1983
NHSBSA website
Section 117 Protocol
Safe and Secure Handling of Medicines Procedure
NATIONAL HEALTH SERVICE, ENGLAND The National Health Service (Charges for Drugs and Appliances) Regulations 2008

Appendix 1: Application for medical cost exemption under section 117

Application for medication cost exception under section 117

Application for annual pre-payment certificate

New application

Continuation application

If continuation, confirm no new exception criteria are applicable

Individual's name:

Date of birth:

NHS number:

e-mail address:

Address:

Telephone number:

Date section 117 started:

Confirmed section 117 recorded on Care notes:

Medication for Mental Disorder:	List of other prescribed Medications:

Community Mental Health or Learning Disability Team:

Care Co-ordinator:

Confirmed individual does not meet any exception criteria:

Medicines Optimisation team only: Approved / Not approved

Date approved:

Date prepayment certificate ordered:

Database Updated:

Form Uploaded to individual's electronic notes:

Appendix 2 – Equality and Diversity Impact Assessment

For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

1. Document or Process or Service Name: **Payment for Medication under Section 117 Aftercare**
2. EIA Reviewer (name, job title, base and contact details): Michelle Nolan, Mental Health Act Clinical Manager
3. Is it a Policy, Strategy, **Procedure**, Process, Tender, Service or Other? **Standard Operating Procedure**

<p>Main Aims of the Document, Process or Service</p> <p>The purpose of this procedure is to provide information for obtaining medication for mental disorder free of charge for those eligible and covered under Section 117 of the Mental Health Act.</p> <p><i>Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma</i></p>
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<p>Equality Target Group</p> <ol style="list-style-type: none"> 1. Age 2. Disability 3. Sex 4. Marriage/Civil Partnership 5. Pregnancy/Maternity 6. Race 7. Religion/Belief 8. Sexual Orientation 9. Gender re-assignment 	<p>Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?</p> <p>Equality Impact Score Low = Little or No evidence or concern (Green) Medium = some evidence or concern (Amber) High = significant evidence or concern (Red)</p>	<p>How have you arrived at the equality impact score?</p> <ol style="list-style-type: none"> a) who have you consulted with b) what have they said c) what information or data have you used d) where are the gaps in your analysis e) how will your document/process or service promote equality and diversity good practice
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Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Age	Including specific ages and age groups: Older people Young people Children Early years	Low	This procedure is consistent in its approach regardless of age.
Disability	Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities: Sensory Physical Learning Mental health (including cancer, HIV, multiple sclerosis)	Low	This procedure is consistent in its approach regardless of disability. For patients who have a communication need or have English as their second language consideration must be given to providing information in an accessible format.
Sex	Men/Male Women/Female	Low	This procedure is consistent in its approach regardless of sex.
Marriage/Civil Partnership		Low	The procedure applies to all irrespective of relationship status.
Pregnancy/ Maternity		Low	This procedure is consistent in its approach regardless of pregnancy/maternity status.

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Race	Colour Nationality Ethnic/national origins	Low	The procedure applies to all irrespective of race. Services must ensure where translator services are provided to ensure 'all practicable steps' are taken to ensure understanding in line with the five key principles of the MCA 2005.
Religion or Belief	All religions Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	The procedure applies to all irrespective of religion or belief
Sexual Orientation	Lesbian Gay men Bisexual	Low	The procedure applies to all irrespective of sexual orientation
Gender Reassignment	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	This procedure is consistent in its approach regardless of the gender the individual identifies as.

Summary

<i>Please describe the main points/actions arising from your assessment that supports your decision.</i>	
This Procedure only applies to those people with S117 Entitlement as outlined in the MHA 1983 and reflects the requirements under this legal framework in terms of free access to medication for mental disorder.	
EIA Reviewer: Michelle Nolan	
Date completed: 25 January 2024	Signature: M Nolan