



Leeds Partnerships **NHS**
NHS Foundation Trust

Leeds **NHS**
Primary Care Trust

Care Services Improvement Partnership **CSIP**
National Institute for
Mental Health in England



Mental Health Act 2007 – IMPLEMENTATION SELF ASSESSMENT TOOL (ISAT): A self assessment tool for NHS Trusts, Foundation Trusts, Primary Care Trusts and independent sector (private and voluntary) hospitals and Local Authorities to support implementation of reforms to the mental health legislation.

The ISAT will be of most interest to organizations providing services to patients detained under the legislation plus those providing services for children and young people (CYP) aged under 18 on a voluntary or detained basis. However, it also provides a useful framework for health and social care commissioners and others with an interest in implementation of the new legislation.

RED: The organization does not meet the standard statement.

AMBER: The organization has made progress (50% of the task completed) towards meeting the standard statement but further action is necessary to fully comply. The action required column should indicate the work necessary to achieve full compliance.

GREEN: The organization, following consultation with relevant stakeholders, fully meets the standard statement.

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Statement	Red Amber Green	What evidence did you use to support your rating?	Action required to achieve full compliance	By whom	By when
A. LEADERSHIP					
A1. A Project Sponsor has been identified and a project manager appointed to lead implementation	Green	Key Agencies have sponsored The Project and a Project manager appointed by the LA and in the LPFT	Completed		March 2008
A2. An implementation project plan setting out key milestones, deliverables and accountabilities including project governance arrangements has been drafted and approved (see http://www.mhact.csip.org.uk/silo/files/project-plan-template.doc for more guidance)	Green	Drafted and approved at meeting of MHA Steering Group	Completed		June 2008
A3. The Board (or its equivalent) has been briefed on the main provisions of the Act (see http://www.mhact.csip.org.uk/news/latest-news/summary-of-the-amendments.html for more information) and local arrangements for implementation.	Green	Both the LPFT Trust Board and DMT Adult Social Care Leeds CC have been briefed.	Completed.		March 2008
A4. Non-executive directors and associate managers (Hospital Managers) of NHS Trusts and Foundation Trusts and their equivalents in other service providers have been trained on their new duties and responsibilities.	Amber	Both LPFT and the LA have plans in place to train staff when training materials are published by DoH/CSIP PCT – to be determined in annual plan	Training dates to be set once Trainers have attended CSIP training days The PCT will determine its training requirements in due course	Bill Harland/Maria Warner Tabitha Arulampulam	Oct 2008 TBC



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A5. The Board (or its equivalent) has received and approved an action plan to achieve concordance with all standards in SAT1 and the effective and timely implementation of the plan is being monitored	Green	SAT1 has been reviewed in line with Trust processes and now integrated into city-wide Project Plan	Completed		June 2008
A6. A Project Implementation Group has been formed with members including key partner organizations, service user and carer groups, lead clinicians and information departments	Green	A City Wide MHA steering group was formed on 27 th April 2008. including key partner organisations	Completed		April 2008
A7. The Project Implementation Group is reporting on progress with the implementation project plan to the Board (or its equivalent) and the Local Implementation Team (LIT) and, where CYP under 18 are admitted, to the Children and Young People's Board and the CAMHS partnership no less that quarterly	Green	Project Plan prepared and accepted by the MHA Steering Group Admission returns in CAMHS of all patients admitted to the adolescent in-patient service are returned 6 monthly	Completed		Mar 2008
A8. A stakeholder analysis has been undertaken to identify key partners, groups, organizations, staff, etc who need to be engaged with the local implementation plan	Green	The project mandate incorporates a stakeholder analysis and all relevant stakeholders have been identified			Mar 2008



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A9. The Board (or its equivalent) has agreed a new scheme of delegation which specifies how and which duties and responsibilities under the Act are being delegated, to whom and what the monitoring and reporting arrangements are	Amber	<p>A new Associate Medical Director has been appointed by LPFT and MHA implementation will be supported by the Trust's project implementation manager These appointees will contribute to leading and supporting a review of the Trust's scheme of delegation and establish its own monitoring and reporting arrangements.</p> <p>A written policy on the scheme of delegation is currently being drafted.</p>	<p>Trust: Paper to LGSG and then Board</p> <p>LA: Report to Adult services DMT</p>	<p>Bill Harland</p> <p>Peter Heydon</p>	<p>Sept 2008</p> <p>Sept 2008</p>
B. POLICY AND PLANNING					
B1. The organisation has in place a range of local policies and procedures based on the suggested schedule produced by CSIP (see http://www.mhact.csip.org.uk/silo/files/local-policies-schedule.doc)	Amber	The organisations have reviewed the range of policies and procedures against the CSIP schedule and have identified those that exist and those that are outstanding.	Those outstanding will be referred to policies & procedures workstream	<p>Kwai Mo</p> <p>Lynn Parkinson</p>	Sept 2008



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B2. A new local policy in respect of the supervised community treatment provisions (sections 32-36) has been developed and agreed with appropriate health and social care practitioners (including CAMHS practitioners) and partner organizations. This takes account of the best practice advice developed by MHAC, RCPsych and CSIP (Please take regard of section 36 which deals with the repeal of provisions for after-care under supervision and to the Order requiring transitional arrangements for these patients) (see http://www.mhact.csip.org.uk/workstreams/the-mental-health-act-amendment-workstreams/supervised-community-treatment.html).	Amber	Key LPFT staff will be holding an exploratory meeting to discuss CTO's impact on clinical work. Further engagement with LA colleagues will be necessary to fully scope out the wider policy implications in regard to inter-agency working	All key stakeholders from LPFT, the LA and PCT will need to develop and agree a cross cutting policy.	Dr Branton /Dr Brookes	July 2008
B3. As part of planning for implementation of the Act more widely, but with particular reference to the delivery of supervised community treatment programmes, ensure effective engagement with the local primary health care community is in place	Red	Discussions with PCT have already highlighted this particular issue	This will now form part of their 08/09 action plan with action being co-ordinated with LPFT and the LA where necessary	Carol Cochrane Sinead Gegan Jane Wood	Sept 2008



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B4. The number of patients likely to be affected by the supervised community treatment provisions has been scoped (including under 18 year olds) and an estimate made of the potential costs and savings. (Note: CSIP has developed tools to support this work)	Amber	Little work has been undertaken at this stage to estimate these numbers. However for the under 18 year olds the CAMHS service consider these numbers will be very small.	Referred to the Policies and Procedures workstream	Kwai Mo Lynn Parkinson	July 2008
B5. The organisation has reviewed and revised all its other protocols, policies and procedures to ensure they comply with the Act's new provisions. These have been reviewed with appropriate health and social care practitioners and partner organizations and approved in accordance with the organisation's local arrangements for policy approval (see http://www.mhact.csip.org.uk/silo/files/local-policies-schedule.doc for schedule of proposed policies)	Amber	We are referring this to our policies and procedures workstream in line with the project mandate	Action plan to be produced and worked on leading up to the Act's implementation	Kwai Mo Lynn Parkinson	Sept 2008
B6. The organisation has integrated the requirements of other relevant legislation (Mental Capacity Act, Race Relations Act and other equalities legislation, Human Rights Act, Freedom of Information Act, Children's Act, Data Protection Act etc) into its revised policies (see http://www.mhact.csip.org.uk/silo/files/local-policies-schedule.doc for schedule of proposed policies)	Amber	As above	As above	Kwai Mo Lynn Parkinson	Oct 2008



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B7. The organisation has reviewed and amended its information collection and reporting systems to take account of the new provisions in the Act and is able to provide intelligent information reports and audits for Mental Health Act Scrutiny Committees as specified in section 5 of the ISAT Guidance Notes	Amber	In LPFT and the LA the relevant software applications are in the course of being reviewed and revised to bring then in line with the relevant legislative specifications.	To be referred to the policies and procedures workstream	Kwai Mo Lynn Parkinson	Oct 2008
B8. The organization is reporting to its Strategic Health Authority incidences of children and young people under the age of 16 who are placed on adult wards and are reviewing the serious untoward incident (SUI) reports which arise from such incidents on a quarterly basis	Green	Reports go to Strategic Health Authority (SHA) CAMHS and LPFT are alert to this issue. YP under 16, placed in an adult ward do trigger an SUI report	Completed		
B9. The Board has commissioned a scoping exercise/impact analysis in collaboration with partner organizations so as to assess the impact of the Act including a race and equalities impact assessment and an assessment of needs of under 18s	Red	This requirement needs to be discussed by the MHA Steering Group and actions agreed and ratified by the M H Modernisation Team	To be referred to Commissioning/Advocacy workstream	Sinead Cregan Jane Wood	June 2008
B10. The organization has reviewed its intelligent information reports so they reflect the new provisions and are able to influence strategy, partnership working, service delivery and improvement and clinical practice and inform commissioners.	Amber	Partner organizations have not yet fully completed a review to comply with the conditions of this requirement.	To be referred to the policies and procedures workstream	Kwai Mo Lynn Parkinson	Sept 2008



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B11. Commissioning organizations have agreements in place with providers specifying actions to be taken to achieve implementation of new provisions	Red	No agreement with the PCT in line with these conditions has been reached with LPFT as yet The LA is subject to commissioning reviews The PCT have not indicated their approach at this stage	To discuss and agree actions through the MHA Steering Group	Tim o'Shea Sinead Cregan Tabitha Arulampulam Michele Moran	
B12. Commissioners have planned for the financial impact of implementing the amended legislation	Red	The commissioners plans in regard to this condition are not known at this stage	To discuss and agree actions through the MHA Steering Group	Tim o'Shea Sinead Cregan Tabitha Arulampulam Michele Moran	



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B13. Commissioners have performance management arrangements in place	Red	The commissioners plans in regard to this condition are not known at this stage	To be referred to the Commissioning/Advocacy workstream	Tim o'Shea Sinead Cregan Tabitha Arulampulam Michele Moran	
B14. Commissioners have in place arrangements for informing local authorities and Courts where beds which meet the specific needs of children and young people under the age of 18 have been commissioned. (Please note this section of the Act may be implemented to a slower timetable than other sections)	Amber	Commissioners do have in place arrangements for informing LA and the Courts, but this is not formalised	To be referred to the Commissioning/Advocacy workstream	Tim o'Shea Sinead Cregan Tabitha Arulampulam Michele Moran	Aug 2008
B15. A policy and procedure has been agreed with the Probation Board Victims Liaison officer in respect of victims rights to information about certain unrestricted patients detained under sections 37 and 47 (new schedule 5A)	Amber	Contact already made with the appropriate Probation service and contact names established	To be referred to the Policies and Procedures workstream	Kwai Mo Lynn Parkinson	Sept 2008



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B16. As part of the local implementation project plan a risks and opportunities register has been created and is being proactively managed	Amber	A risk management review on MHA implementation has been completed by LPFT. The LA has completed a similar exercise	The issues identified will be discussed regularly at future MHA Steering Group	Bill Harland/Peter Heydon	ongoing
B17. The organization has reviewed its arrangements for accessing legal advice to ensure this continues to be expert and timely	Green	All statutory organisations have confirmed continued access to legal advice. Discussions between PCT and LA over establishment of a joint post.	Completed		May 2008
C. PATIENTS AND CLIENT CENTRED APPROACHES					
C1. The organization has developed in partnership with commissioners and local service user groups a policy and procedure for implementing the new provisions in respect of advocacy including briefing materials and information. This should also include specialist advocates who have been trained to work with CYP under the age of 18. (Please note timetable for implementation of the advocacy provisions may be slower than for other sections of the Act) (new sections 130A-D)	Red	Awaiting further national guidance and regulations on who commissions this service	Referred to the Commissioning/Advocacy Workstream	Sinead Cregan Jane Wood	Aug 2008



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C2. Information, in a range of formats, for detained patients (and in the case of CYP under the age of 18 voluntary and detained patients) and their representatives regarding status, consent and competence for under 18 year olds, rights and appropriate treatment under the Act has been revised including the advocacy, ECT and nearest relative and supervised community treatment provisions (sections 26-29 and 32-36). Arrangements are in place to ensure this information is easily available to all staff and detained patients.	Amber	This has already been highlighted as part of the project plan and the CAMHS service also recognize the changes that need to be made.	Commissioning/Advocacy workstream	Sinead Cregan Jane Wood	Sept 2008
C3. In the months leading up to implementation of the Act the organization will undertake a programme of briefing sessions for detained patients	Amber	This is part of our 08/09 action plan	Referred to Commissioning/Advocacy Workstream	Sinead Cregan Jane Wood	Oct 2008
C4. The appropriate treatment (under the Act) needs of detained patients from the black and minority ethnic communities (BME) has been reflected and included in information to, and communication with, patients and their representatives	Amber	There is already a BME advisory group chaired by Alison Lowe – reflecting the delivering of the race equality action plan. Proposed that further discussions are held to determine appropriate strategies	Referred to Commissioning/Advocacy Workstream	Sinead Cregan Jane Wood	Aug 2008
C5. An ethnic monitoring system has been put in place to ensure the impact of the Act can be monitored effectively	Green	In existence and operational	Subsume under C4	–	–



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C6. Arrangements are in place for engaging with, and involving, service users and carers (including those from BME communities) in local implementation	Amber	Arrangements exist with organisations working with mental health service users) to engage service users and carers in mental health service developments. Further discussions need to be held with these organizations regarding specific MHA implementation issues	Subsume under C4	—	—
C7. Implementation is linked to the Regional Delivering Race Equality action plan	Amber	None of the agencies are aware of any such action plan	Referred to Commissioning/Advocacy Workstream	Sinead Cregan Jane Wood	-



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C8. Appropriate environments for the care and treatment of those aged under 18 are available which provide for a range of needs including acute and longer term care. There are also arrangements in place to reassess the particular needs of those aged under 18 to ensure the environment continues to meet their needs. Where achieving this standard requires capital development there is an agreed project plan with the necessary resources to achieve this. (Please note this section of the Act may be implemented to a slower timetable than other sections. (section 131A) Please also see recent Department of Health announcement on funding)	Red	Appropriate environments not available within providers services locally CAMHS service confirm that no beds in Yorkshire exist for young people with learning disability	Referred to Commissioning/Advocacy Workstream	Sinead Cregan Jane Wood	Sept 2008
C9. A policy and procedure is in place for consulting with persons that have knowledge or experience of cases involving minors and standards agreed that are in accordance with the requirements of the Code of Practice (Please note this section of the Act may be implemented to a slower timetable than other sections) (section 131A)	Red	No such policies or procedures currently exist	To be referred to the Policies and Procedures workstream	Kwai Mo Lynn Parkinson	Oct 2008



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C10. Where children and young people under the age of 16 are placed as inpatients under parental consent, or aged 16 and 17 are admitted on a voluntary basis, the organization has monitoring systems in place to ensure that consent and competence are assessed and recorded.	Green	CAMHS service confirm that this is done routinely	Completed		
C11. The organization has in place arrangements to ensure that consent for procedures or treatments which are not within the zone of parental responsibility is either sought directly from a competent young person (for 16 and 17 year olds) or in the case of a young person who lacks competence or aged under 16 through a Court Order under the Act	Green	CAMHS service confirm that arrangements currently exist for obtaining consent for 16/17yr olds, competent under 16 yr olds and parents/LA in loco parentis to consent for treatment/procedure under the Act.	Completed	—	—
D. PARTNERSHIP WORKING					
D1. Arrangements have been agreed with the relevant Area Commissioner (or Regional Director) from the Mental Health Act Commission to monitor and report progress on implementation using objective data (e.g. the intelligent information reports)	Green	Arrangements have been agreed with the relevant Area Commissioner for monitoring and reporting on implementation and the ISAT will be submitted to him.	Completed and ongoing		



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D2. The organization has agreed with the Mental Health Act Commission arrangements that support patients subject to Community Treatment Orders meeting with MHA Commissioners if they wish	Red	Awaiting draft guidance	Referred to Policies and Procedure Workstream Imminent meeting planned with the Commission to discuss this matter	Kwai Mo Lynn Parkinson Bill Harland	Aug 2008
D3. The organization has jointly reviewed and agreed protocols with partners such as acute hospitals, children's and older peoples services, ambulance, police, prisons and housing services to ensure the new provisions are covered	Amber	All workstreams will consider as part of their remit the engagement of partners, however lead responsibility will remain with Policies and Procedures workstream	Referred to Policies and Procedure Workstream		Oct 2008
D4. The organization has updated its section 135/136 protocol with local Police, Ambulance and Social Services and have agreed monitoring arrangements based on national good practice guidelines	Green	S 136 protocol has been updated with partner organizations. Discussions taking place with regard to the s 136 suite being made available for s 135 places of safety	Completed		April 2008
E. HUMAN RESOURCE MANAGEMENT					
E1. A local communications strategy is in place to ensure staff are involved in and communicated with about, the local implementation plan	Amber	M Sells from the LA has begun discussions with the PCT to develop an overall communications strategy	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	July 2008



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E2. A training needs analysis has been completed including forecasts of staff numbers required to meet duties and responsibilities under the new provisions	Red	A training needs analysis has not yet been undertaken	Referred to Workforce Development Workstream	Cath Sullivan Steve Griffin	Sept 2008
E3. The numbers of staff affected by the responsible clinician and AMHP provisions (sections 11-19) have been identified including the scope for offering the roles more widely to other health and social care practitioners. An action plan is in place to support staff to manage the change.	Amber	The Trust is seeking expressions of interest from all qualified healthcare staff in each of its service areas in respect of the AMHP role The LA have undertaken a scoping exercise in order to establish the numbers of AMHPs required.	Referred to Workforce Development Workstream	Cath Sullivan Steve Griffin	Aug 2008
E4. A comprehensive training plan (based on the materials being produced by CSIP) has been agreed with key partners (including local authorities) identifying numbers of staff, transition arrangements, levels of training and delivery arrangements (i.e. briefings, training sessions, e-learning, generic training materials etc)	Amber	A training plan between partners exists but is not yet comprehensive in its scope. Further discussions are required through the Workforce Development Workstream.	Refer to Workforce Development workstream	Cath Sullivan Steve Griffin	Aug 2008
E5. The training plan includes the needs of children and young people under the age of 18 who may be placed on a designated adult ward which can offer an appropriate environment	Amber	As above	Refer to Workforce Development workstream	Cath Sullivan Steve Griffin	July 2008



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E6. The local authority has in place plans to fulfill their duty to provide an AMHP service in accordance with the Act	Green	Training from ASWs to AMHP already programmed from August 2008			
E7. Cross cutting support based on the values based practice programme is in place (see http://www.mhact.csip.org.uk/workstreams/the-mental-health-act-amendment-workstreams/training/values-based-practice.html for more information on values based practice)	Red	Not in place	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	Sept 2008
E8. Local competency frameworks and job descriptions for the new professional roles have been amended to include what has been prescribed in Regulations (see the CSIP Workforce Programme for further guidance via http://www.mhact.csip.org.uk/workstreams/the-mental-health-act-amendment-workstreams/workforce.html)	Red	Not yet achieved	Refer to Workforce Development workstream	Cath Sullivan Steve Griffin	Sept 2008
E9. Arrangements have been made to incorporate training on the new provisions of the Act into the ongoing training programmes of health and social care professionals and other staff with responsibilities for patients detained under the Act	Red	Arrangements have not yet been made	Refer to Workforce Development workstream	Cath Sullivan Steve Griffin	Sept 2008
E10. Arrangements have been made for participation in the specific training programme which is being designed by CSIP for local Mental Health Act Administrators and "Hospital Managers"	Red	Dates for these training programmes are not yet available	Refer to Workforce Development workstream		



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E11. In taking forward the local human resource programme account is being taken of the advice and guidance set out in the "Employers Guidance" (http://www.mhact.csip.org.uk/workstreams/the-mental-health-act-amendment-workstreams/workforce.html)	Red	Employers guidance not yet available	Refer to Workforce Development workstream	Cath Sullivan Steve Griffin	Sept 2008
F. CLINICAL SYSTEMS AND PROCESSES FOR QUALITY IMPROVEMENT (informing, training in assessments (including risk assessments), appropriate treatments, report writing, electronic and written care records arrangements, sensitive approaches to going into homes when implementing supervised community treatment)					
F1. The care records system (whether written or electronic) has been reviewed to determine its fitness for purpose for implementation of the new Act (i.e. that it is possible to record mental health status, leave status and review reminders, etc.), that it is accessible to all who require it including visiting MHA Commissioners and Second Opinion Appointed Doctors and confidentiality arrangements have been agreed in accordance with the Information Governance toolkit	Amber	The LPFT care records system has been reviewed with the software developer and the system is to be updated in line with national requirements The LA system can deliver but needs minor adjustments	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	Oct 2008
F2. Assessment training has been provided as part of the Act and Care Programme Approach staff training programme. Staff are familiar with, and have been trained in the use of, risk assessment, management and sharing tools (see http://www.nimhe.csip.org.uk/our-work/risk-management-programme.html for more guidance)	Red	Subsume under E9		—	—



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F3. Home visit protocols have been reviewed to ensure gender and culturally sensitive access to the homes of patients on Supervised Community Treatment provisions under the Act with risk assessment measures agreed with the local police	Amber	Home visit protocols and lone working policies already exist These protocols need updating to ensure compliance with the act and take account of any cross cutting policies	Refer to Workforce Development workstream	Cath Sullivan Steve Griffin	Oct 2008
F4. Arrangements have been made and agreed with the Mental Health Act Commission to ensure delivery of statutory second opinions for patients on Community Treatment Orders	Red	The Commission are currently developing the SOAD service and guidance will be drafted and shared with providers when available	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	Oct 2008
F5. Health and social care practitioners have been briefed on the new provisions in particular the provisions relating to definitions and criteria for compulsion, ECT safeguards and the assessment for consent and competence for under 18s and age-appropriate treatment for under 18s and supervised community treatment	Red	See E9	Subsume under E9	—	—



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F6. The organization, in collaboration with its partners, has formally agreed local evidence based health and social care, race and age flexible "appropriate treatment" regimes tailored to the individual needs of the patient for the common conditions which service users detained under the Act have and processes for monitoring breaches are in place	Red	This has not yet been agreed between the organizations but a forum does exist to take these matters forward.	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	Sept 2008
F7. Health and social care practitioner leaders have been consulted with and signed off local revised Act policies and procedures	Amber	Both main agencies have current systems which can handle these requirements	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	Sept 2008
F8. The organization's annual audit programme cycle has been reviewed and revised to include the new provisions and to provide annual intelligent information reports as specified in the appendix to the SAT 1 guidance (for copies of this go to http://www.symmetricds.co.uk/survey/files/Guide to ISAT Nov2007.doc)	Red	The annual audit cycle has not been reviewed by partner organizations.	Referred to Policies and Procedure Workstream	Kwai Mo Lynn Parkinson	Oct 2008
F9. The organization's CPA system has been amended to take account of the requirements of the new provisions and ward leave policies and leave processes have been reviewed	Red	LPFT: The CPA system has not been amended yet. An action plan to address these issues has been prepared for discussion	Paper to SCSG and CPA Group	Bill Harland Steve Crann	June 2008



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F10. Individual practitioners are using evidence to self assure their own performance against the Act's new provisions compared to other colleagues	Red	Cannot be determined at this point although it is recognized that procedures will be needed	Referred to Workforce Development Workstream	Cath Sullivan Steve Griffin	Oct 2008
F11. A local Mental Health Review Tribunal policy has been produced to comply with the Code of Practice which also outlines how the organization adheres to the re-engineering of the appeals process in line with national review	Red	No policy has been produced to comply with this requirement	Paper to LCSG See F13	MHL & CPA Dept	Oct 2008
F12. The above policy should also ensure that where a CYP under 18 does not have a CAMHs responsible clinician that an independent CAMHs assessment is made available to the Tribunal and that all CYP under the age of 18 are reviewed annually	Red	See F11 above			Oct 2008
F13. Arrangements are in place to ensure effective communication with the MHRT secretariat and these are audited	Amber	Arrangements already exist for effective communication, however these are not as yet audited	Agreement will need to be reached with the MHRT secretariat in respect to the audit format	MHL & CPA Dept	Nov 2008
G. FINANCIAL MANAGEMENT					



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G1. The organization has included plans and targets in respect of the Act's new provisions in its annual business plans for 2007/08 and onwards	Amber	The LPFT annual plan includes references to the requirement to implement the revisions to the MHA. This matter is still outstanding for the local authority	Refer to MHA Steering Group		June 2008
G2. The organization's annual budget to support implementation of the Act has been reviewed and amended in light of the new provisions	Red	This matter is still outstanding	Refer to MHA Steering Group	–	–
G3. The organization has reviewed the resource consequences of the reformed Act in partnership with its local authorities and other key partners and reported the outcome to the Board (or its equivalent)	Red	This matter is still outstanding	Workforce Development workstream	Cath Sullivan Steve Griffin	Sept 2008
G4. The organization has agreed a budget to support local implementation costs in years 2007/08 and 2008/09	Red	This matter is still outstanding	Refer to MHA Steering Group	–	–

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