

Getting help in a crisis

For carers, friends and relatives

If your relative has a mental illness, you may find that there are times when their mental illness gets worse. This factsheet gives you information on who to contact if you feel that the situation has reached crisis and they need urgent help.

Key Points.

- A mental health crisis can mean different things. It generally means when someone's health worsens to the point where they need urgent help from professional services.
- You and your relative may notice early warning signs that their mental health is getting worse. If possible, try to get help early.
- Different services can help your relative in a crisis, such as the Community Mental Health Team (CMHT) or crisis team.
- In some circumstances, the Mental Health Act might be needed. The 'nearest relative' can ask social services to think about assessing your relative under the Mental Health Act.

This factsheet covers:

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2. [How do I get help from professional services?](#)
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In this factsheet, we refer to the person you know or care for as your relative, though we understand that you may not be related.

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1. What do we mean by crisis?

Having a mental health crisis can mean different things to different people, but can include:

- thinking about suicide or acting on suicidal thoughts
- having an episode of psychosis (where you might experience or believe things that others do not), or
- doing something that could put yourself or other people at risk.

You may know better than most when your relative is having a mental health crisis. Both you and your relative might notice early warning signs that their mental health is getting worse. It is good to try and get help at this stage to prevent a crisis.

Someone's support network (such as the people closest to them) can help in a crisis. But in some cases it is still important to try and get help from professional services.

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2. How do I get help from professional services?

Professional services can help people with mental health problems and offer care and treatment. If your relative is already in touch with mental health services, these services may already know about some of their problems.

Professional services include:

Crisis teams¹

Crisis teams are part of mental health services. They can support people who are having a mental health crisis in the community (for example, in their own home). There should be a crisis team in every area which is available 24 hours a day, seven days a week. They may not be able to get to your relative straight away if they are very busy.

The team should make a care plan. This helps to make sure your relative has the right treatment and support to get through the crisis. They may:

- offer medication,
- arrange regular visits to check they are okay, and
- make sure they are in touch with other services to get long-term support.

This is to try and stop them needing to go into hospital. But your relative might still need to go to hospital if they are very unwell.

Accident and emergency (A&E)²

You could take your relative to the accident and emergency (A&E) or casualty department of the local hospital. You can also do this if they need help for physical injuries (such as self harm, injury or overdose).

A&E can assess your relative and may arrange for a duty psychiatrist to see them. The psychiatrist can do a more thorough assessment. Your relative could get admitted to a mental health ward in hospital. A&E departments often have long waiting times. The waiting areas can be stressful.

Emergency services (999)³

If your relative is at risk of harming themselves or others then you can contact the emergency services on 999. They may contact mental health services such as the crisis team. If an ambulance is called but the staff may be at risk, then the police might come with them.

Community mental health teams (CMHTs)

Community mental health teams (CMHTs) support people who have complex or serious mental health problems in the community. They are usually only available during office hours on weekdays.

Your relative may already be in touch with the CMHT. If so, they may have a care coordinator who you can contact if the crisis develops during office hours.⁴ If this person is not available, then you can ask to speak to the duty worker. They will be responsible for responding to urgent needs that cannot wait.

If your relative is under the Care Programme Approach (CPA), they should have a crisis plan. This should say who to get in touch with or a list of numbers to contact in crisis. If you don't already have a copy of your relative's care plan, it might help to ask them for one. This could help if they go into crisis again in the future.

A CMHT may only help if your relative's GP has already passed their details to them. This is called a referral. If your relative has never been referred to a CMHT you can try asking their GP for help. We have explained this below.

If you are not sure of your relative's local CMHT details, you can ask your relative's GP surgery. You can also check the website of the local NHS trust.

GPs

You could take your relative to their GP. A GP won't be able to offer direct help, but they may be able to contact other teams such as the crisis team.

Most GPs have a 24 hour 'out of hours' telephone number that you can contact.

Some GPs will not help unless your relative asks for help themselves. This can cause problems if your relative does not realise they are unwell or does not want professional help. If this happens, then you might have to try other options for getting professional help.

NHS 111

You can call NHS 111 when you need medical help but it's not a 999 emergency.⁵ Call 111 if:

- you think your relative needs to go to accident and emergency (A&E) or needs help from a crisis team,
- you don't know who to call or you don't have a GP to call, or
- you need health information or reassurance about what to do next.

You can find out more information about:

- Crisis teams
- Community Mental Health Teams (CMHTs)
- Care Programme Approach (CPA)
- GPs

at www.rethink.org or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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3. The Mental Health Act

The Mental Health Act 1983 is the law which says when someone can be admitted, kept and treated in hospital against their wishes. It is commonly known as being 'sectioned' or being detained under the Mental Health Act. It only happens if the person is very unwell or is putting their own safety or someone else's at risk. It is sometimes used in crisis situations.⁶

How do I use the Mental Health Act?

You might feel that your needs to be taken to hospital under the Mental Health Act. If so, you need to contact the community mental health team (CMHT) or local adult social care team. You must ask to speak to a duty Approved Mental Health Professional (AMHP). The AMHP has had specialist training on the Mental Health Act.⁷ They are usually a mental health professional such as a social worker, psychologist or nurse.

If they agree to carry out an assessment, the AMHP and two doctors must agree that your relative needs to be admitted to hospital.⁸ They would need to be sure that they meet the criteria for this, which is set out in the Mental Health Act.

Anyone can ask for a Mental Health Act assessment. However, the 'nearest relative' has certain rights under the act. The nearest relative is not the same as the next of kin. There are rules in the Mental Health Act that say who the nearest relative is.⁹

You can find out more about ‘**nearest relative**’ at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

The nearest relative can ask for an assessment to decide if their relative should be detained under the Mental Health Act. They can use this right more than once if they need to. If the AMHP decides that admission to hospital is not necessary, they must give their reasons in writing to the nearest relative.¹⁰

Sometimes the team carrying out the assessment will ask the police to attend to make sure everyone is safe.

Should I use the Mental Health Act?

Most people would only use the Mental Health Act as a last resort. You may decide that this is the only option to get your relative help. You might find that talking to your relative about their options first might be helpful. For example, they might agree that they need to go into hospital. This is known as being a ‘voluntary’ patient (meaning they would not be detained under the Mental Health Act).

Using the Mental Health Act could have a negative effect on your future relationship. It can also be a stressful experience. However, under certain circumstances it may be the best thing to do and get your relative the help they need.

You can find out more about the ‘**Nearest Relative**’ at www.rethink.org. Or call our General Enquiries Team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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4. What if I have problems getting help?

Getting help can sometimes be difficult. It is important to keep trying if you had problems the first time. You may find that you need to try different services before getting the right support for your relative. This can especially be the case if they don’t want to get help.

You could put your concerns in writing, and send these to professionals as well as sharing them in person or over the phone. This can make it easier for professionals to understand your concerns. It also gives you a record of what you have said and when. You could send the concerns in a letter or email. Sometimes it can be helpful to send copies to other professionals too. For example, if you send a letter to the community mental health team, you could send a copy to your relative’s GP too.

Try to include clear and specific examples of the concerns you have. You could tell them about thoughts or behaviour that you are worried about. If there is any risk to the person themselves or to other people then make this clear.

If you are still finding it difficult to get help, or you are not happy with the help you have got, you can make a formal complaint. All GP surgeries, hospitals and mental health services have a complaints procedure.¹¹

If you share concerns about your relative, professionals may tell your relative that you did this.¹² This can affect relationships and trust. When sharing your concerns verbally or in writing, try asking for any information you share to be kept confidential and used as sensitively as possible. You could explain that this is necessary to protect your relationship.

Sometimes, you may have information that professional services will not have. For example, if your relative will not share how they are feeling with mental health services. If this is the case, you could highlight that there is a risk that your relative would stop talking to you if your information is not used as sensitively as possible.

You can find out more about:

- Complaints
- Confidentiality and information sharing for carers, friends and relative

at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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5. How do I get help for myself?

Caring for someone with a mental illness can be difficult. There will be times when you will need support for yourself, especially if your relative is going through a crisis or emergency.

You may find carer support groups helpful. You can go to them to meet others for support and to share information and suggestions. Many people consider other carers the real experts who can offer tips and ideas on how to deal with situations.

You could also ask your local council's social services department for a 'carer's assessment'. You would then be assessed to see if you need services for yourself to help you with your caring responsibilities.

You can read more about:

- Are you worried about someone's mental health?
- Carers assessments
- Dealing with unusual thoughts and behaviours
- Supporting someone with a mental illness
- Suicidal thoughts – how to support someone

at www.rethink.org. Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

References

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- ¹ Johnson S. Crisis resolution and home treatment teams: an evolving model. *BJPsych Advances* 2013; 19(2): 115-123. DOI: 10.1192/apt.bp.107.004192 (accessed 24 November 2016)
- ² NHS Choices. *A guide to mental health services in England: crisis and emergencies*.
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- ³ As note 2.
- ⁴ As note 2.
- ⁵ As note 2.
- ⁶ NHS Choices. *A guide to mental health services in England: the Mental Health Act*.
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- ⁷ s114, Mental Health Act 1983 c20.
- ⁸ As note 7 (MHA 1983), s2-3.
- ⁹ As note 7 (MHA 1983), s26.
- ¹⁰ As note 7 (MHA 1983), s13(4).
- ¹¹ NHS Choices. *Feedback and complaints about the NHS in England*.
<http://www.nhs.uk/NHSEngland/complaints-and-feedback/Pages/nhs-complaints.aspx> (accessed 13 December 2016).
- ¹² General Medical Council (GMC). *Confidentiality*. Manchester: General Medical Council; 2009. Para 66.

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This factsheet is available in large print.

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