Appendix E

SUMMARY OF
PROCEDURAL REQUIREMENTS
in respect of
COMPULSORY ADMISSION
TO HOSPITAL
AND GUARDIANSHIP

APPEN

COMPULSORY ADMISSION TO SUMMARY OF PROCEDURAL REQUIREMENTS

The following summary is in general outline only for easy reference. Forms and Consent to Treatment) Regulations 1983, and printed copies of these are should be used and reference made to the provisions of Part II of the Act,

Additional copies of this summary printed on

ADMISSION FOR

Approved social worker (s. 11 (1)) Special duties for ASWs (a) Before or within a reasonable time after application is made, ASW must take practicable steps to inform the person (if any) appearing to be the nearest relative that the application is to be or	Medical
Approved social worker (s. 11 (1)) Special duties for ASWs (a) Before or within a reasonable time after application is made, ASW must take practicable steps to inform the person (if any) appearing to be the nearest relative that the application is to be on has been made and of power of nearest relative to exercise a discharge order under	recommendations 3
in need (s. 13(2)). (c) Social services authority must, if requested by nearest relative, direct ASW to consider the patient's case with a view to making an application; and if ASW decides not to make application he must inform nearest relative of the reasons in writing (s. 13(4)).	written recommendations in the prescribed form of two registered medical practitioners given either as separate recommendations or as a joint recommendation signed by each on or before date of application (s. 11(7), 12(1)). Each recommendation must incude a statement that in the opinion of the practitioner the grounds set out in col. 2 are complied with (s. 2(3)). Of the two recommendations, one must be by a practitioner approved under section 12 as having special experience in the diagnosis or treatment of mental disorder; unless the approved practitioner has previous acquaintance with the patient, the other practitioner, if practicable, must have such previous acquaintance (s. 12(2)). Situations where a practitioner on the staff of the hospital to which the patient is to be admitted can give a recommendation: (i) no recommendation from practitioner on staff of private hospital or mental nursing home (s. 12(5)(e)); (ii) one recommendation from practitioner on staff of Health Service hospital (s. 12(3)); (iii) both recommendations from practitioners on staff of Health Service hospital only if compliance with (ii) would result in delay involving serious risk to the health and safety of the patient, etc. (s. 12(4)). Recommendation may not be given by the applicant or specified persons close to the applicant or to the patient (s. 12(5)).

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HOSPITAL AND GUARDIANSHIP

UNDER MENTAL HEALTH ACT 1983, PART II

of application are to be found in the Mental Health (Hospital, Guardianship available from the Publishers of this book (see App. D ante). These forms and the Regulations as necessary.

thin card may be obtained from the Publishers.

Time during which			
Time during which patient to be seen before application is made and time between medical examinations 4	When patient to be admitted	Maximum duration of authority for detention 6	Discharge 7
a) By the doctor Patient examined by both together or separately within five days of each other (s. 12(1)). b) By the applicant Applicant must have personally seen the patient within 14 days before the date of application (s. 11(5)).	(a) Application to be addressed to hospital managers (s. 11(2)). (b) Patient must be conveyed, and admitted to hospital within 14 days beginning with the date on which patient was last examined by a medical practitioner for purposes of col. 3 (s. 6(1)(a)). (c) Application duly completed is sufficient authority for applicant, or any person authorised by him, to convey patient to hospital within foregoing period of time (s. 6(1)).	28 days beginning with date patient admitted, unless before it expires he becomes liable to be detained by virtue of a subsequent application, order or direction under the Act (s. 2(4)).	(a) by RMO; or (b) by hospital margers; or (c) by nearest relati (s. 23) (subject to hours notice duri which discharge of the barred by RM (s. 25)); or (d) by Mental Hea Review Tribunal 23(1)): (i) on application patient — with 14 days of a mission (s. 66)

ADMISSION FOR

		ADMISSION FOR
Applicant 1 Nearest relative; or Approved social worker (s. 11(1)) Special duties for ASWs (a) The ASW cannot make an	Grounds upon which application may be made 2 (a) Patient suffering from mental illness, severe mental impairment, psychopathic disorder or mental impairment and his mental disorder is of a	Medical recommendations 3 (a) Written recommendations in the prescribed form of two registered practitioners given either as separate recommendations or as a joint recommendation signed by each on or before date of application (s.
application: (i) if nearest relative has notified ASW or the local social services authority that he objects to application being made; (ii) until he has consulted with person (if any) appearing to be nearest relative unless consultation is not reasonably practicable or would involve unreasonable delay (s. 11(4)). (b) ASW must interview patient in suitable manner and satisfy himself that detention in hospital is the most appropriate way of providing care and medical treatment of which patient stands in need (s. 13(2)). (c) Social services authority must, if requested by nearest relative, direct ASW to consider the patient's case with a view to making an application; and if ASW decides not to make application he must inform nearest relative of the reasons in writing (s. 13(4)).	nature or degree which makes it appropriate for him to receive medical treatment in a hospital; and (b) In the case of psy- chopathic disorder or mental impairment, such treatment is likely to alleviate or prevent a	 11(7), 12(1)). (b) Each recommendation must include particulars of the grounds for opinion relating to col. 2(a), (b); and statement of reasons for opinion relating to col. 2(c), specifying whether other methods of dealing with the patient are available and, if so, why they are not appropriate (s. 3(3)). (c) Of the two recommendations, one
	deterioration of his condition; and (c) It is necessary for patient's health or safety or the protection of others and treatment cannot be provided unless he is detained under s. 3. NOTE: Application and any medical recommendation may describe patient as suffering from more than one form of mental disorder, but application of no effect unless patient described in each recommendation as suffering from the same one of those forms of mental disorder whatever other form of mental disorder he may also be described as suffering from (s. 11(6)).	must be by a practitioner approved under Section 12 as having special experience in the diagnosis or treatment of mental disorder; unless the approved practitioner has previous acquaintance with the patient, the other practitioner, if practicable, must have such previous acquaintance (s. 12(2)).
		 (d) Situations where a practitioner on the staff of the hospital to which the patient is to be admitted can give a recommendation: (i) no recommendation from practitioner on staff of private hospital or mental nursing home (s. 12(5)(e)); (ii) one recommendation from practitioner on staff of Health Service hospital (s. 12(3)); (iii) both recommendations from practitioners on staff of Health Service hospital only if compliance with (ii) would result in delay involving serious risk to the
		health and safety of the patient, etc. (s. 12(4)). (e) Recommendation may not be given by the applicant or persons close to the applicant or patient specified in s. 12(5).
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TREATMENT—SECTION 3

Time during which patient to be seen before application is made and time between medical examinations 4 (a) By the doctor Patient examined by both together or separately within five days of each other (s. 12(1)). (b) By the applicant Applicant must have personally seen the patient within 14 days before the date of application (s. 11(5)).	When patient to be admitted 5 (a) Application to be addressed to hospital managers (s. 11(2)). (b) Patient must be conveyed, and admitted to hospital within 14 days beginning with the date on which patient was last examined by a medical practitioner for purposes of col. 3 (s. 6(1)(a)). (c) Application duly completed is sufficient authority for applicant, or any person authorised by him, to convey patient to hospital within foregoing period of time (s. 6(1)).	Maximum duration of authority for detention 6 Six months beginning with the date patient admitted, unless the authority for detention is renewed (s. 20(1)). Authority for detention can be renewed for further period of six months; and for further period of six months; and for further periods of one year at a time (s. 20(2)). For purposes of renewal of authority to detain; RMO must, within two months before authority expires, examine patient and if the following criteria are satisfied he must furnish a report in the prescribed form to the hospital managers. The managers must then ensure that the patient is informed (s. 20(3)). The criteria referred to above are as in col. 2(a) and (c); and treatment is likely to alleviate or prevent a deterioration of his condition, but, in the case of mental illness or severe mental impairment, detention can be renewed if the patient would, if discharged, be unlikely to be able to care for himself, to obtain the care which he needs or guard against serious exploitation (s. 20(4)).	(a) by RMO; or (b) by hospital managers; or (c) by nearest relative (s. 23) (subject to 72 hours notice during which discharge can be barred by RMO (s. 25); or (d) by Mental Health Review Tribunal: (i) application by patient—within six months of admission and in any period of renewal of the authority to detain (i.e. within the next six months, and for periods of one year there- after) (s. 66); (ii) application by nearest rela- tive—within 28 days beginning with the day on which he is informed that the RMO has barred his dis- charge of the patient (s. 66); (iii) automatic re- ferral—if right to apply to tri-
	person authorised by him, to convey patient to hospital within foregoing period of time (s.	form to the hospital managers. The managers must then ensure that the patient is informed (s. 20(3)). The criteria referred to above are as in col. 2(a) and (c); and treatment is likely to alleviate or prevent a deterioration of his condition, but, in the case of mental illness or severe mental impairment, detention can be renewed if the patient would, if discharged, be unlikely to be able to care for himself, to obtain the care which he needs or guard against serious exploitation (s.	authority to detain (i.e. within the next six months, and for periods of one year thereafter) (s. 66); (ii) application by nearest relative—within 28 days beginning with the day on which he is informed that the RMO has barred his discharge of the patient (s. 66); (iii) automatic referral—if right

Grounds upon Medical recommendations Applicant which application may be made 3 1 ADMISSION FOR ASSESSMENT IN (a) Written recommendation in the pre-Nearest relative; or Application to state that admission for assessment under s. 2 is of urgent scribed form of one registered medi-Approved social worker cal practitioner given, if practicable, by practitioner with previous acquaintance with the patient. Special duties of ASWs necessity, and that com-pliance with the provisions (a) ASW must interview patient in suitable manner and satisfy himself that detenof s. 2 would involve unde-(b) Recommendation must verify statesirable delay. ment in the application referred to in tion in hospital is the most appropriate way of providing care and medical treat-(c) Recommendation may not be given by the applicant or specified persons close to the applicant or to the patient ment of which patient stands in need (s. 13(2)). (s. 12(5)). (b) Social services authority must, if requested by nearest relative, direct ASW to consider the patient's case with a view to making an applica-tion; and if ASW decides not to make application he must inform nearest relative of the reasons in writing (s. 13(4)).

PATIENT ALREADY

Sub-section (1): An application for admission of a patient to hospital can be made under Part II of the Act, notwithstanding the fact that the patient is already in the hospital. The procedures required in respect of an application for assessment (s. 2) or treatment (s. 3) are the same as for any other patient (see above). The patient is treated as if he were admitted at the time when the application, duly completed, is received by the managers.

Sub-section (2): Informal patient may be detained for 72 hours if managers are furnished with a report in writing doctor's by the registered medical practitioner in charge of patient's treatment (or the practitioner nominated by him) stating that an application for admission under Part II of the Act ought to be made

Nearest relative; or Approved social worker

Special duties for ASWs As for admission for treatment col. 1(a).

NOTE: The person named as guardian may be either a local social services authority or any other person (including the applicant himself). If the person named as guardian is not a local authority, application of no effect unless accepted by local authority. Applicant other than local authority must state in writing that he is willing to act as guardian (s. 7(5)). The application must state the age of patient or, if exact age not known, that the patient is believed to be aged 16 or older.

- (a) Patient suffering from mental illness, severe mental impairment, psychopathic disorder or mental impairment of a nature or degree which warrants his reception into guardianship; and
- (b) It is necessary in the interests of the welfare of patient or for protection of others that he should be received into guardianship

NOTE: A person under age 16 cannot be received into guardianship. See also Note in column 2

See also Note in column 2 under Admission for Treatment, on page E 4.

RECEPTION INTO

As for admission for treatment (see s. 12(7)).

Time during which patient to be seen before application is made and time between medical examinations	When patient to be admitted	Maximum duration of authority for detention 6	Discharge
CASES OF EME	RGENCY—SECTION	ON 4	
(a) By the doctor Signed on or before date of application (s. 12(1)). (b) By the applicant Applicant must have personally seen patient within 24 hours before the date of application (s. 4(5)).	Patient must be conveyed, and admitted to, hospital within 24 hours beginning with the date on which patient was examined by medical practitioner referred to in col. 3 or the date of application, whichever is earlier (s. 6(1)(b)). Application to be addressed to hospital managers (s. 11(2)). Application duly completed is sufficient authority for applicant, or any person authorised by him, to convey patient to hospital within foregoing period of time (s. 6(1)).	72 hours beginning with date patient admitted unless the second medical recommendation required by s. 2 is given and received by managers within that period (s. 4(4)).	(a) by RMO; or (b) hospital managers (s. 23(2)).

IN HOSPITAL—SECTION 5

Sub-section (4): Informal patient receiving treatment for mental disorder may be detained for six hours or until (nurse's holding power) the earlier arrival of a medical practitioner having power under sub-section (2) above if a first holding power) level nurse trained in nursing mentally ill or mentally handicapped people records in writing that: patient appears to be suffering from mental disorder to such a degree that it is necessary for his health and safety or for the protection of others for him to be immediately restrained from leaving the hospital; and it is not practicable to secure the immediate attendance of a doctor under sub-section (2).

GUARDIANSHIP—SECTION 7

- (a) By the doctor
 Patient examined
 by both together
 or separately
 within five days of
 each other (s.
 12(1)).
- (b) By the applicant
 Applicant must
 have personally
 seen the patient
 within 14 days
 before the date of
 application (s.
 11(5)).
- Application to be forwarded to local authority within 14 days of date on which patient last examined by a medical practitioner (s. 8(2)).
- As for an admission for treatment.
- NOTE: The effect of a guardianship application, duly completed, is to confer on guardian the following specific powers (s. 8):
 - (a) to require the patient to reside in a specified place;
 - (b) to require the patient to attend at specified places and times for the purpose of medical treatment, occupation, education or training. (But the person cannot be compelled to received treatment without his consent (s. 56));
 - (c) to require access to the patient to be given, at any place where the patient is residing, to any registered medical practitioner, ASW or other specified person.

- (a) by RMO; or
- (b) by responsible social services authority; or
- (c) by nearest relative s. 23); or
- (d) by Mental Health Review Tribunal: (i) application by
 - (1) application by patient—within six months of admission and once in next six month period, and once in every period of one year thereafter (s. 66).

