Appendix E

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

### 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

<table>
<thead>
<tr>
<th>Applicant</th>
<th>Grounds upon which application may be made</th>
<th>Medical recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Nearest relative; or Approved social worker (s. 11(1))</td>
<td>(a) Patient suffering from mental disorder of a nature or degree which warrants detention in hospital for assessment (or for assessment followed by medical treatment) for at least a limited period; and (b) Detention is in the interests of patient's health or safety or for the protection of others.</td>
<td>(a) 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)). (b) Each recommendation must include a statement that in the opinion of the practitioner the grounds set out in col. 2 are complied with (s. 2(3)). (c) 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)). (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 specified persons close to the applicant or to the patient (s. 12(5)).</td>
</tr>
</tbody>
</table>
DIX E

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.

ASSESSMENT—SECTION 2

<table>
<thead>
<tr>
<th>Time during which patient to be seen before application is made and time between medical examinations</th>
<th>When patient to be admitted</th>
<th>Maximum duration of authority for detention</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>(a) By the doctor</td>
<td>(a) Application to be addressed to hospital managers (s. 11(2)).</td>
<td>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)).</td>
<td>(a) by RMO; or</td>
</tr>
<tr>
<td>Patient examined by both together or separately within five days of each other (s. 12(1)).</td>
<td>(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)).</td>
<td></td>
<td>(b) by hospital managers; or</td>
</tr>
<tr>
<td>(b) By the applicant</td>
<td>(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)).</td>
<td></td>
<td>(c) by nearest relative (s. 23) (subject to 72 hours notice during which discharge can be barred by RMO (s. 25)); or</td>
</tr>
<tr>
<td>Applicant must have personally seen the patient within 14 days before the date of application (s. 11(5)).</td>
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<td>(d) by Mental Health Review Tribunal (s. 23(1)):</td>
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<td></td>
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<td>(i) on application by patient — within 14 days of admission (s. 66).</td>
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</tbody>
</table>
### SUMMARY OF PROCEDURAL ADMISSION FOR

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<th>Applicant</th>
<th>Grounds upon which application may be made</th>
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<tbody>
<tr>
<td>1 Nearest relative; or Approved social worker (s. 11(1))</td>
<td>(a) Patient suffering from mental illness, severe mental impairment, psychopathic disorder or mental impairment and his mental disorder is of a nature or degree which makes it appropriate for him to receive medical treatment in a hospital; and (b) In the case of psychopathic disorder or mental impairment, such treatment is likely to alleviate or prevent a 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.</td>
<td>(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. 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 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).</td>
</tr>
</tbody>
</table>

### Special duties for ASWs

(a) The ASW cannot make an 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)).

(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).
## TREATMENT—SECTION 3

<table>
<thead>
<tr>
<th>Time during which patient to be seen before application is made and time between medical examinations</th>
<th>When patient to be admitted</th>
<th>Maximum duration of authority for detention</th>
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</table>

(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)).

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 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)).

Before furnishing a report for renewal of detention the RMO must consult one or more persons professionally concerned with the patient's medical treatment (s. 20(5)).

(e) 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 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 to apply to tribunal is not exercised, managers must refer case to tribunal at expiration of first six months after date of admission; if a period of three years (one for a patient under age of 16) has elapsed since case was last considered by a tribunal, managers must refer case (s. 68).
### SUMMARY OF PROCEDURAL

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<tr>
<td>Nearest relative; or Approved social worker</td>
<td>Application to state that admission for assessment under s. 2 is of urgent necessity, and that compliance with the provisions of s. 2 would involve undesirable delay.</td>
<td>(a) Written recommendation in the prescribed form of one registered medical practitioner given, if practicable, by practitioner with previous acquaintance with the patient.</td>
</tr>
</tbody>
</table>

#### ADMISSION FOR ASSESSMENT IN

(a) 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)).

(b) 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)).

#### 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 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.

#### RECEPTION INTO

(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 under Admission for Treatment, on page E 4.
### REQUIREMENTS (continued)

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<tr>
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### CASES OF EMERGENCY—SECTION 4

<table>
<thead>
<tr>
<th>(a) By the doctor</th>
<th>(b) By the applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signed on or before date of application (s. 12(1)).</td>
<td>Applicant must have personally seen patient within 24 hours before the date of application (s. 4(5)).</td>
</tr>
</tbody>
</table>

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 the earlier arrival of a medical practitioner having power under sub-section (2) above if a first 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

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<thead>
<tr>
<th>(a) By the doctor</th>
<th>(b) By the applicant</th>
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</thead>
<tbody>
<tr>
<td>Patient examined by both together or separately within five days of each other (s. 12(1)).</td>
<td>Applicant must have personally seen the patient within 14 days before the date of application (s. 11(5)).</td>
</tr>
</tbody>
</table>

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 patient—within six months of admission and once in next six month period, and once in every period of one year thereafter (s. 66).