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University Health Board

# Information to Patients Procedure Mental Health Act, 1983

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Brief Summary of Document:	Section 132/132A of the Mental Health Act 1983 (the Act) places a responsibility upon the hospital managers to take practicable steps to ensure that all detained patients and those subject to Community Treatment Orders (CTO) are given information about their rights upon admission. The procedure aims to standardise practice of providing information and clarify and provide guidance to staff responsible for delivering the information.
Scope:	The content of this procedure applies to all clinical staff working within the Health Board who are involved in the care and treatment of patients detained under the Act and those in the community involved in the care of patients subject to Community Treatment Orders.
To be read in conjunction with:	625 - Community Treatment Order Policy 596 - Section 5(2) Doctors Holding Power Policy 626 - Section 5(4) Nurses Holding Power Policy (draft) Hospital Managers Scheme of Delegation Policy 214 - Independent Mental Health Advocacy Policy (IMHA) 367 – In Patient Visiting policy
Owning Committee	Mental Health Legislation <del>Assurance</del> Committee

## HYWEL DDA UNIVERSITY HEALTH BOARD

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Reviews and updates		
Version no:	Summary of Amendments:	Date Approved:
1	New procedure	13/09/2018
<u>2</u>	<u>Three year review of procedure</u>	

### Glossary of terms

Term	Definition
The Act	The Mental Health Act 1983 (as amended, including by the Mental Health Act 2007, the Health and Social Care Act 2012 and the Care Act 2014).
Nearest Relative	The NR is the person who is informed (unless the patient objects) or consulted with about the patient becoming subject to the provisions of the Act, which includes the right to order discharge of the patient and to object to some provisions of the Act.
Responsible Clinician	The Responsible Clinician is the approved clinician with overall responsibility for a patient's case. Certain decisions (such as renewing a patient's detention or placing a patient on a Community Treatment Order (CTO)) can only be taken by the responsible clinician.
Mental Health Review Tribunal for Wales	An independent judicial body. Its main purpose is to review the cases of detained, conditionally discharged, and CTO patients under the Act and to direct the discharge of any patients where it thinks it appropriate. The Tribunal provides a significant safeguard for patients who have had their liberty curtailed under the Act.
Section 130A Independent Mental Health Advocate (IMHA)	An advocate independent of the team involved in patient care available to offer support to patients. The IMHA is not the same as an ordinary advocate.
Section 130D	Duty to give information about Independent Mental Health Advocacy (IMHA) to a qualifying patient
Section 132A	Duty of managers of hospitals to give information to community patients
Section 133	Duty of managers of hospitals to inform nearest relatives of discharge from detention

Keywords	Mental Health Act, Patients Rights, Section 132, Section 133, Section 130D, Section 132A
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# HYWEL DDA UNIVERSITY HEALTH BOARD

## CONTENTS

1. INTRODUCTION .....	4
2. SCOPE .....	4
3.. AIM .....	4
4. OBJECTIVES .....	4
5. PROCEDURE.....	4
5.1 AVAILABILITY OF INFORMATION .....	4
5.2 INFORMATION TO INFORMAL PATIENTS .....	5
5.3 INFORMATION TO DETAINED PATIENTS – SECTION 132, 132A AND 133.....	5
5.4 INFORMATION TO CONDITIONALLY DISCHARGED PATIENTS FOLLOWING RECALL TO HOSPITAL .....	6
5.5 INFORMATION ON CONSENT TO TREATMENT.....	6
5.6INFORMATION ON RIGHTS TO VOTE.....	6
5.7 INFORMATION TO THE NEAREST RELATIVE OF DETAINED PATIENTS .....	6
5.8 EXPLAINING AND UNDERSTANDING PATIENT RIGHTS .....	6
5.9 COMMUNICATION WITH PATIENTS.....	7
5.10 EXPLANATION OF LEGAL RIGHTS TO A CHILD/YOUNG PERSON.....	8
5.11 CONFIDENTIALITY AND SHARING INFORMATION IN RELATION TO A CHILD/YOUNG PERSON:.....	8
5.12 RECORDING THE READING OF RIGHTS TO A PATIENT .....	9
5.13 COPIES OF DETENTION PAPERS.....	10
5.14 DISCHARGE FROM DETENTION .....	10
6. RESPONSIBILITIES.....	10
6.1 THE CHIEF EXECUTIVE .....	10
6.2 MENTAL HEALTH & LEARNING DISABILITY LEAD EXECUTIVE .....	10
6.3 SERVICE MANAGERS .....	10
6.4 HOSPITAL MANAGERS UNDER THE ACT .....	10
6.5 INDEPENDENT MENTAL HEALTH ADVOCATES (IMHA).....	11
6.6 CLINICAL STAFF .....	11
6.7 CARE CO-ORDINATORS .....	11
6.8 NON-REGISTERED CLINICAL STAFF.....	12
6.9 MENTAL HEALTH ACT ADMINISTRATION TEAM .....	12
6.10 MENTAL HEALTH LEGISLATION <b>ASSURANCE</b> COMMITTEE .....	12
7. REFERENCES .....	12
APPENDIX 1 – PATIENTS RIGHTS FORM– MEDICATION/ECT .....	13
APPENDIX 2 – PATIENTS RIGHT FORM .....	15

# HYWEL DDA UNIVERSITY HEALTH BOARD

## 1. Introduction

Section 132 of the Mental Health Act 1983 (the Act) places a responsibility upon the hospital managers to take practicable steps to ensure that all detained patients are given information about their rights upon detention. Section 132A places a responsibility upon the hospital managers to take practicable steps to ensure that Community Treatment Order (CTO) patients are given information about their rights. Section 130D places a responsibility on the responsible person to ensure that qualifying patients are given information about Independent Mental Health Advocates (IMHAs). Section 133 places a responsibility upon the hospital managers to inform the nearest relatives (NR) of a patient's discharge from detention including being discharged from a CTO.

Although the Act does not impose any duties to give information to an informal patient they should be given an explanation of their legal position and rights. It is important that they are aware that should they wish to leave the hospital they are advised to discuss this with their doctor along with the nurse in charge of the ward, so that appropriate arrangements can be made for their safe discharge.

It must also be remembered that explaining patient's rights to them is not a one-off event but needs to be ongoing throughout their detention as a person's level of understanding can fluctuate. This procedure must be read in conjunction with MHA Code of Practice for Wales, Chapter 4 (MHA COP).

## 2. Scope

The contents of this procedure apply to all clinical staff working within the Health Board who are involved in the care and treatment of patients detained under the Act and those in the community involved in the care of patients subject to Community Treatment Orders (CTO). It does not cover the responsibility for the provision of information to those subject to Guardianship (s7 or s37 of the Act) as this is the responsibility of the Local Authority.

## 3. Aim

The aim of this procedure is to ensure that those detained in hospital under the Mental Health Act or are subject to compulsion in the community are given information in accordance with Section 132 & Section 132A Mental Health Act 1983(amended 2007) and that information is given in a way in which the patient is able to understand, taking into account language, gender, religion, age, cultural background and any disability which may inhibit the patient's understanding.

## 4. Objectives

The aim of the procedure will be achieved by:

- Standardising practices and processes of providing information
- Clarifying and providing guidance to staff responsible for delivering the information
- Providing a framework to staff on the information that should be given to detained patients and their nearest relative
- Identifying who should deliver this information and the expected frequency of the delivery of information

## 5. Procedure

### 5.1 Availability of Information

For all patients, relevant information must be given to them as soon as is practicable, following:

- Admission to Hospital;

## HYWEL DDA UNIVERSITY HEALTH BOARD

- Commencement of a period of detention under the Act;
- Detention under another section of the Act
- Renewal of any period of detention or extension of CTO

The information must be given both verbally and in writing, and detained patients must be given a copy of the statutory information leaflet relating to their section of the Mental Health Act which is provided by Welsh Government. Copies of any available information can also be displayed on the ward notice boards/leaflet racks and can be obtained via the link on the Mental Health Act administration team page. <http://howis.wales.nhs.uk/sitesplus/862/page/73945>

### 5.2 Information to Informal Patients

Though section 132 is specific to detained patients, information regarding their legal rights and treatment should also be provided on an ongoing basis to informal patients. Information on advocacy services must also be made available to them and information is displayed on ward notice board. They must also be made aware of the fact that if they wish to leave hospital but it is felt that they need to remain for a period of assessment and/or treatment, they could be assessed for possible detention under the Act. Where discussions take place staff must ensure this is documented on Care Partner.

### 5.3 Information to Detained Patients – Section 132, 132A and 133

Any detained patient must be informed as soon as possible both verbally and in writing of the following:

- Of the provisions of the Act under which they are being detained or subject to CTO and the effect of those provisions;
- Of the rights (if any) of their NR to discharge them (and what can happen if their Responsible Clinician does not agree with that decision);
- For community patients, of the effect of the CTO, including the conditions which they are required to keep and the circumstances in which their Responsible Clinician may recall them to hospital; and
- That help is available to them from an IMHA, and how to obtain that help;
- The reasons for their detention or CTO;
- The maximum length of the current period of detention or CTO;
- That their detention or CTO may be extended at any time if it is no longer required or the criteria for it are no longer met;
- That they will not automatically be discharged when the current period of detention or CTO ends;
- That their detention or CTO will not automatically be renewed or extended when the current period of detention or CTO ends;
- The reasons for a CTO being revoked;
- Their rights of appeal to both the Hospital Managers and the Mental Health Review Tribunal (MHRT). Appropriate details of address/telephone numbers must also be given along with guidance on how to make an application and a list of solicitors;
- That if they are detained on a treatment order (including a CTO) should it be extended for a further 6-month period and they do not appeal to the MHRT in the first period of detention, then the Health Board will automatically refer their case;
- That they have the right of legal representation at the MHRT and are given a list of solicitors who are specifically trained in mental health law;
- The nature and likely effects of any treatment which is planned;
- The role and powers of the Healthcare Inspectorate Wales (HIW) and how to make a complaint to them. The address and telephone number must also be supplied;

## HYWEL DDA UNIVERSITY HEALTH BOARD

- Their right to receive or send correspondence and whether there are any constraints on this;
- The procedure for making a formal complaint to the Health Board;
- The patient's financial entitlements whilst in hospital and how to secure them;
- Details of the visiting policy for the ward and in particular any restrictions around the visiting of children;
- After care entitlement under section 117 (if applicable) and the implications of this.

### 5.4 Information to conditionally discharged patients following recall to hospital

Where a conditionally discharged patient is to be recalled to hospital, a brief verbal explanation of the Secretary of State's reasons for recall must be provided to the patient at the time of recall unless there are exceptional reasons why this is not possible eg; the patient is violent or too distressed. The Secretary of State's warrant will detail the reasons. The patient must also receive a full explanation of the reasons for his or her recall within 72 hours after admission, and both written and oral explanations must be provided. Conditionally discharged patients recalled to hospital, must be told that their cases will be referred automatically to the Mental Health Review Tribunal.

### 5.5 Information on consent to treatment

All patients, regardless of their legal status, must be informed of:

- The nature, purpose and likely effects of any treatment which is planned;
- The circumstances (if any) in which they can be treated without their consent and the circumstances in which they have the right to refuse treatment;
- The role of the second opinion appointed doctors (SOADs) and the circumstances in which they may be involved; and
- (Where relevant) the rules on electro-convulsive therapy (ECT) and medication administered as part of ECT, in line with Hywel Dda UHB Procedure 039 - ECT.

### 5.6 Information on rights to vote

The Representation of the People Act 2000 makes it clear that in most circumstances, detained patients can still exercise their right to vote in general or other elections. To allow patients to exercise this right the Health Board should give information to them about their voting rights.

### 5.7 Information to the nearest relative of detained patients

On admission or as soon as practical thereafter, the patient must be made aware of the fact that their NR, within the meaning of the Act, will be supplied with a copy of the written information of their rights, unless the patient objects.

Staff must also ascertain if the patient has an advance statement in place giving details of any other person they wish to be notified of their detention under the Act. If there is, the Mental Health Act administration team is to be notified so that arrangements can be made for the necessary information to be sent.

A copy of the letter sent by the Mental Health Act administration team to the patient's NR will be held in the patient's legal file. If the patient does not wish their NR to be informed of their detention this is to be recorded on the appropriate section 132 patient's rights) form (Appendix B at the earliest convenience.

### 5.8 Explaining and understanding patient rights

The explaining of a patient's rights is an ongoing process throughout their stay in hospital or period of detention on a CTO and must be done both verbally and in writing.



## HYWEL DDA UNIVERSITY HEALTH BOARD

It must be done in a suitable manner, at a suitable time, taking into account the patient's mental state and capacity to retain information. Staff must not rush through the process but give it their full attention, spending as much time as necessary with the patient in a private area free from interruption allowing time for questions to be asked. Carers and advocates should be involved where the patient wishes or if the patient lacks capacity to understand.

Consideration also needs to be given to the fact that there are some patients who have difficulties relating to their capacity to understand or the ability to retain the information given to them for any length of time. Whilst these patients are detained under the Act, the MHA COP advocates good practice in relation to detained patients who lack capacity or have fluctuating capacity. In these situations staff need to comply with the principles of the Mental Capacity Act (2005) and take all reasonable steps to provide information in a suitable format, i.e. easy word version large print version or pictorially in order to facilitate capacity to understand if at all possible. Staff need to be aware that they may have to explain their rights to such individuals on more than one occasion in the first instance and on a more frequent and ongoing basis. For alternative versions please contact the Mental Health Act administration team.

The Welsh Assembly Government has produced a series of Mental Health Act patient information leaflets. These are designed to assist hospitals to meet their legal obligations under the Act to provide written information to patients subject to detention and other compulsory measures under the Act; they can be accessed via the Mental Health Act administration teams page <http://howis.wales.nhs.uk/sitesplus/862/page/73945>

Once an explanation of their legal rights has been given to the patient staff must take steps to ascertain their level of understanding. If it is identified that a patient lacks the capacity to understand even after all attempts to assist them have been undertaken, their lack of capacity must be documented on Care Partner. However, staff need to be aware that in the majority of cases any lack of capacity will not be permanent and in view of this staff must continue in their attempts to facilitate the patients understanding.

### **5.9 Communication with patients**

Effective communication is essential in ensuring appropriate care and respect for patients' rights. It is important that the language used is clear and unambiguous and that people giving information check that the information that has been communicated has been understood.

Everything possible should be done to overcome barriers to effective communication, which may be caused by any of a number of reasons – for example, if the patient's first language is not English. Patients may have difficulty in understanding technical terms and jargon or in maintaining attention for extended periods. They may have a hearing or visual impairment or have difficulty in reading or writing. A patient's cultural background may also be very different from that of the person speaking to them.

Those with responsibility for the care of patients need to identify how communication difficulties affect each patient individually, so that they can assess the needs of each patient and address them in the most appropriate way. Hospitals and other organisations should make people with specialist expertise (e.g. in sign language or Makaton) available as required.

Where an interpreter is needed, every effort should be made to identify who is appropriate to the patient, given the patients gender, religion, language, dialect, cultural background and age. The patients' relatives and friends should only exceptionally be used as intermediaries or

## HYWEL DDA UNIVERSITY HEALTH BOARD

interpreters. Interpreters (both professional and nonprofessional) must respect the confidentiality of any personal information they learn about the patient through their involvement.

Access to interpreters to foreign language and sign language interpreters is via WITS (Welsh Interpretation and Language Services) and a purchase order must be generated via Oracle prior to any bookings.

**NB: It is not desirable that relatives or friends be asked to act as interpreters and this should only be done in exceptional circumstances and at the express wish of the patient.**

MHA patient information leaflets are available from the Mental Health Act administration team in languages other than English and Welsh, and arrangements can be made for them to be provided in Braille and audio format.

### 5.10 Explanation of legal rights to a child/young person

#### For a child:

A child aged under 16 and anyone under this age who is admitted must have their legal rights under section 132 explained to them in the presence of their parent(s) (or others with parental responsibility) who will also be given a copy of the appropriate rights form.

#### For a young person:

A young person is a person aged 16–17 and the usual procedure with regard to reading a person their legal rights under this procedure must apply.

However, consideration must be given to completing this in the presence of their parent(s), if the patient agrees.

### 5.11 Confidentiality and sharing information in relation to a child/young person:

As with adults, children and young people have a right to confidentiality. Where children are competent, and young people have the capacity to make decisions about the use and disclosure of information they have provided in confidence, their views must be respected. (Chapter 19 MHA COP).

However, as with adults, in certain circumstances confidential information may be disclosed without the child or young person's consent, e.g. if there is reasonable cause to believe that the child or young person is suffering, or is at risk of suffering, significant harm.

The same principles of confidentiality apply if a child who is competent or a young person who has capacity to make a decision regarding the information does not wish their parent (or others with parental responsibility) to be involved in decision making about their care and treatment. Their decision must be respected unless the disclosure can be justified, e.g. if there is cause to suspect that the child or young person is suffering or is likely to suffer serious harm. Practitioners must encourage the child or young person to involve their parents (unless it is considered to do so would not be in the best interests of the child or young person). They must also be proactive in discussing with the child or young person the consequences of their parents not being involved.

Where a child or young person does not wish their parents to be involved, every effort must be made to understand the child or young person's reasons with a view to establishing whether the child or young person's concerns can be addressed.



# HYWEL DDA UNIVERSITY HEALTH BOARD

## 5.12 Recording the reading of rights to a patient

- An entry is to be made in on Care Partner to the effect that an oral and written explanation has been given with an indication of the patient’s level of comprehension;
- A patient’s rights form (see appendix 2) is to be completed and forwarded to the Mental Health Act administration team indicating if the patient had the capacity to understand their legal rights or not;
- If the patient did not understand, all further attempts will be recorded onto the patients rights form. Once a patient initially lacking capacity has understood their rights, a further patient’s rights form will be completed and forwarded to the Mental Health Act administration team. Staff will then continue to record on the patient’s rights form the on-going explanation to the patient of their legal rights.
- If at the time of admission the patient is clearly lacking the capacity to understand all or any of the oral and written information regarding their detention, this is to be recorded on Care Partner along with a date for when it will be repeated.
- If a patient continues to lack the capacity to understand all or any of the verbal and written information regarding this detention a record of this must be made within Care Partner.
- The reading of rights must be undertaken to reflect the individual needs of the patient but it is recommended that, as a minimum, staff must adhere to the guidance as detailed below:

Section	Frequency	Who By	Initial Frequency Ongoing
Section 2	At the time of the section being applied then twice weekly for the first two weeks of detention	Weekly for the remaining period of detention	Named nurse or other nominated clinical staff
Section 3	At the time of the section being applied then once a week for the first month of detention	Monthly for the remaining period of detention	Named nurse, Care Coordinator or other nominated clinical Staff
Section 37	At the time of the section being applied then once a week for the first month of detention	Monthly for the remaining period of detention	Named nurse, Care Coordinator or other nominated clinical staff
Community Treatment Order	At the time of the section being applied then once a week for the first month of detention.	To reflect the individual needs of the patient	Care Coordinator or other nominated clinical staff

The patient **MUST** also have their legal rights explained to them if their period of detention is renewed. This is to be recorded on a patient’s rights form, which must then be forwarded to the Mental Health Act administration team.

These minimum requirements do not prevent a member of the clinical team from using their professional judgement to decide how frequently individual patient’s legal rights have to be explained to them.

For a patient who has a good understanding of their rights, it may not be necessary to renew their rights at such frequent intervals.

# HYWEL DDA UNIVERSITY HEALTH BOARD

For any subsequent explanation of legal rights under section 132, staff must document this on a patient's rights form.

## 5.13 Copies of detention papers

A copy of the detention or CTO documentation will be made available to the patient as soon as practicable unless, based on the advice of the appropriate professional who will usually be the author of the documents, that the information disclosed would be likely to seriously harm the physical or mental health or condition of the patient or any other person. It may be necessary to remove any personal information about third parties from the documentation prior to making this available to the patient.

## 5.14 Discharge from detention

When the patient is discharged from detention or if the authority for detention expires, the section's end date/time and the patient's right to leave hospital must be made known to them.

Section 133 provides a duty for the 'hospital managers' to inform the NR of discharge from detention including CTO patients and this is to be given at least seven days before the discharge if practicable. To facilitate this it will be necessary for the patient's Responsible Clinician to inform the MHA administration team of the planned discharge.

The requirement to inform the NR does not apply if the patient requests that information is not sent. The NR may also request that information is not sent to them regarding their relative.

## 6. Responsibilities

### 6.1 The Chief Executive

Is responsible for ensuring that responsibility for management of the legal and appropriate admission and care of patients is delegated to an appropriate executive lead and assuring this procedure is implemented within the Health Board.

### 6.2 Mental Health & Learning Disability Lead Executive

Is the Executive Director who has overall responsibility for the effective delivery of MHA and related legislation and policies, ensuring that there are appropriate quality assurance mechanisms in place in relation to the guidance in this procedure.

### 6.3 Service Managers

Have responsibility ensuring that teams implement MHA legislation and guidance observing the MHA Code of Practice. They are also responsible for ensuring systems are in place and monitoring of implementation within their area of responsibility, ensuring that all regulatory authority inspector reports are action planned and acted upon.

### 6.4 Hospital Managers under the Act

Whilst the MHA 1983 uses the term "Hospital Managers", in NHS Foundation Trusts and Health Boards they are defined as the "Hospital Managers". They have certain statutory duties they must fulfil under the Act and some of these duties including the explaining of legal rights under section 132 can be delegated by the hospital managers but in delegating this responsibility they must be satisfied that:

- The correct information is given to the patient/NR (with the patient's consent);
- The information is given in a suitable manner and at a suitable time, and, in accordance with the law;

## HYWEL DDA UNIVERSITY HEALTH BOARD

- The member of staff who is to give the information has received sufficient guidance and is aware of the key issues regarding the information to be given;
- A record is kept of the information given, including how, when and by whom it was given;
- A regular check is made that the information has been properly given to each detained patient and understood by ~~him or her~~them;
- There are processes in place to monitor the explanation to patients of their legal rights under section 132.

### 6.5 Independent Mental Health Advocates (IMHA)

The role of the IMHA is to help qualifying patients (those detained under the Act, conditionally discharged, subject to guardianship or a CTO understand the legal provision to which they are subject under the Act and the rights and safeguards to which they are entitled. This could include assistance in obtaining information about any of the following:

The provisions of the legislation under which she/he qualifies for an IMHA;

- Any conditions or restrictions she/he is subject to, for example; any arrangements made for section 17 leave;
- The medical treatment being given, proposed or being discussed and the legal authority under which this would be given;
- The requirements that would apply in connection with the giving of the treatment;
- Their rights under the Act and how those rights can be exercised.

### 6.6 Clinical Staff

In relation to this policy all clinical staff must be aware of and comply with the contents of this procedure by providing inpatients with information about:

- Any conditions or restrictions ~~she/he~~they are is subject to, for example, any arrangements made for section 17 leave;
- The medical treatment being given, proposed or being discussed and the legal authority under which this would be given;
- The requirements that would apply in connection with the giving of the treatment;
- Their rights under the Act and how those rights can be exercised;
- The rights of qualifying patients to the services of an IMHA and how to obtain one.

Clinical staff must also:

- Complete all the necessary documentation required;

### 6.7 Care Co-ordinators

Care Co-ordinators are responsible for ensuring patients who are on a CTO are provided with information about:

- Any conditions or restrictions she/he is subject to for example any specific requirements around residency;
- The medical treatment being given, proposed, or being discussed and the legal authority under which this would be given;
- The requirements that would apply in connection with the giving of the treatment;
- Their rights under the Act and how those rights can be exercised;
- The rights of qualifying patients to the services of an IMHA and how to obtain one.
- Care Co-ordinators must also complete all the necessary documentation required.

Depending on the place of residence of the patient, support workers within care homes can also undertake these functions

# HYWEL DDA UNIVERSITY HEALTH BOARD

## 6.8 Non-registered clinical staff

Any non-registered staff working within clinical services must:

- Be aware of this procedure and its contents;
- Direct any patient who has a query about their legal rights to a member of registered staff unless they are competent to address any issues raised.

## 6.9 Mental Health Act administration team

The Mental Health Act administration team are responsible for:

- Providing clinical staff with copies of the appropriate patient information leaflets;
- Monitoring the initial and on-going explanation of their legal rights to detained patients, via the receipt of the patients rights forms;
- Co-ordinating requests by patients for an appeal to the Hospital Managers and/or the Mental Health Review Tribunal;
- Ensuring referrals are made to the IMHA service where necessary;
- Patient's rights forms are filed within the patient's legal correspondence file and a copy in the patient's case notes.
- Ensuring copies of correspondence to NR are filed within the patient's legal correspondence files (section 133).

## 6.10 Mental Health Legislation Assurance Committee

The Mental Health Legislation Assurance Committee is responsible for:

- Overseeing the implementation of the Act within the organisation;
- The review and issuing of all policies and procedures which relate to the Act;
- Monitoring the Health Boards compliance with the legal requirements of the Act;
- Undertaking audit work and agreeing action plans in relation to the Act;

## 7. References

Jones R Mental Health Act Manual, nineteenth Edition, Sweet and Maxwell

Code of Practice for Wales (revised 2016) Welsh Government

Mental Health (Wales) Measure 2010

Mental Capacity Act Code of Practice

Human Rights Act

Data Protection Act

Relevant NICE guidance:

Service user experience in adult Mental Health:

QS15: <https://www.nice.org.uk/guidance/qs15>

CG136: <https://www.nice.org.uk/guidance/cg136>



**8. APPENDIX 1 – Patients Rights Form  
Information to detained patients  
regarding Medication / ECT**

<b>Patients Name:</b>	
<b>Current Section:</b>	<b>Date of Section:</b>
<b>Ward/Team:</b>	<b>Name of RC/AC:</b>
<p>I can confirm that I have fully explained the contents of the Patients Rights Leaflet explaining the consent to treatment rules and the administration of medication/ECT to patients detained under the Mental Health Act. I confirm that I have informed the patient of their right to an Independent Mental Health Advocate (IMHA).</p> <p>I also confirm that the patient is consenting to take medication/ECT for their mental health. The Responsible Clinician has recently obtained their consent and has filled in a Form CO2/CO4 on which he/she has described the medication.</p> <p>The patient has been made aware that they can change their mind and withdraw their consent at any time. The role of Healthcare Inspectorate Wales and information regarding treatment has also been explained fully.</p>	
<p><b>Please tick one of the following boxes:-</b></p> <p>The patient has understood the information read and I have given <u>him/her/them</u> a copy of the information leaflet to retain. <input type="checkbox"/></p> <p>The patient is currently refusing to have their medication rights read and I will make further attempts to read <u>him/her/them</u> their rights <input type="checkbox"/></p> <p>The patient has no capacity currently and I will make further attempts to read <u>him/her/them</u> their rights <input type="checkbox"/></p> <p>The patient has no capacity to understand the information <input type="checkbox"/></p> <p>Other reasons (please state) <input type="checkbox"/></p>	
<b>Name of staff member reading rights - Print Name:</b>	
A copy of the Mental Health Act Leaflet and information relating to the treatment will be sent to the patients nearest relative unless the patient objects to this	<b>I Object</b> <input type="checkbox"/>
	* Please tick if patient objects *
<b>Patients Signature:</b>	<b>Date:</b>

**Please email this form to Admin.MentalHealthAct.HDD@wales.nhs.uk or post it to the Mental Health Act Administration Team, 2<sup>nd</sup> Floor, Hafan Derwen, St David’s Park, Carmarthen, SA31 3BB**

<b>Enw'r claf:</b>	
<b>Cadwraeth ("section") bresennol:</b>	<b>Dyddiad cadw yn yr ysbyty:</b>
<b>Ward/Tîm:</b>	<b>Enw'r RC/AC:</b>
<p>Gallaf gadarnhau fy mod wedi egluro cynnwys y daflen 'Hawliau'r Claf' sy'n egluro rheolau cydsynio i driniaeth a gweinyddu meddyginiaethau/ECT i gleifion sydd wedi'u cadw o dan y Ddeddf Iechyd Meddwl. Rwyf yn cadarnhau i mi roi gwybod i'r claf mae ei hawl i Eiriolwyr Iechyd Meddwl Annibynnol ("IMHA").</p> <p>Gallaf gadarnhau hefyd fod y claf yn cydsynio i gymryd meddyginiaeth/ECT am ei iechyd meddwl. Yn ddiweddar cafodd y Clinigydd Cyfrifol ei ganiatâd/chaniatâd ac mae wedi llenwi ffurflen CO2/CO4 lle mae wedi disgrifio'r feddyginiaeth.</p> <p>Mae'r claf wedi cael gwybod y gall newid ei feddwl/meddwl a thynnu'r cydsyniad yn ôl unrhyw bryd. Maent hefyd wedi cael eglurhad llawn o rôl Arolygiaeth Gofal Iechyd Cymru a gwybodaeth am driniaeth.</p>	
<p><b>Ticiwch un o'r blychau canlynol:-</b></p> <p>Mae'r claf wedi deall y wybodaeth a ddarllenwyd ac rwyf wedi rhoi copi <u>iddynt</u> o'r wybodaeth <del>iddo</del> ei chadw <input type="checkbox"/></p> <p>Ar hyn o bryd mae'r claf yn gwrthod clywed ei hawliau am feddyginiaeth a byddaf yn rhoi cynnig arall ar ddarllen ei hawliau <del>iddo</del> <u>iddynt</u> <input type="checkbox"/></p> <p>Ar hyn o bryd does dim gallu gan y claf a byddaf yn gwneud rhagor o ymdrechion i ddarllen ei hawliau <u>iddynt</u> <input type="checkbox"/></p> <p>Does dim gallu gan y claf i ddeall y wybodaeth <input type="checkbox"/></p> <p>Rhesymau eraill (nodwch) <input type="checkbox"/></p>	
<b>Enw'r aelod staff sy'n darllen yr hawliau – Printiwch yr enw:</b>	
Caiff copi o daflen y Ddeddf Iechyd Meddwl a gwybodaeth am y driniaeth eu hanfon at berthynas agosaf y claf oni bai bod y claf yn gwrthod hyn	<p><b>Rwyf yn gwrthod</b> <input type="checkbox"/></p> <p>* Ticiwch os yw'r claf yn gwrthod *</p>
<b>Llofnod y claf:</b>	<b>Dyddiad:</b>

Anfonwch ebost o'r ffurflen hon i [Admin.MentalHealthAct.HDD@wales.nhs.uk](mailto:Admin.MentalHealthAct.HDD@wales.nhs.uk) post i: Tîm y Ddeddf Iechyd Meddwl, 2il Lawr, Hafan Derwen, Parc Dewi Sant, Caerfyrddin, SA31 3BB





**9. Appendix 2 – Patients right form – medication/ECT  
Mental Health Act, 1983 - Section 132/132A  
Information to Detained Patients**

<b>Patients Name:</b>	
<b>Current Section:</b>	<b>Ward/Team:</b>
<p><b>Do you want us to correspond with you in Welsh or English?</b>  <b>Please put a cross in the appropriate box to confirm your language of choice.</b></p> <p>Welsh <input type="checkbox"/>      <input type="checkbox"/> ish      oth <input style="width: 150px;" type="text"/></p>	
<p>I can confirm that I have fully explained the contents of the Patients Rights Leaflet to the patient, including the reasons for their detention and the patient’s right to an Independent Mental Health Advocate (IMHA).                  I have informed the patient how long the detention will last for, if and when they have a right of appeal against their detention to the Mental Health Review Tribunal (Wales) and the Hospital Managers and of their right to make a complaint and how to do so. The role of Healthcare Inspectorate Wales and information regarding treatment has also been explained fully.</p>	
<p><b>Please tick one of the following boxes:-</b></p> <p>The patient has understood the information read and I have given <u>him/her/them</u> a copy of the information leaflet to retain. <input type="checkbox"/></p> <p>The patient is currently refusing to have their rights read and I will make further attempts to read <u>him/her/them</u> their rights <input type="checkbox"/></p> <p>The patient has no capacity currently and I will make further attempts to read <u>him/her/them</u> their rights <input type="checkbox"/></p> <p>The patient has no capacity to understand the information <input type="checkbox"/></p> <p>Other reasons (please state) <input type="checkbox"/></p>	
<p><b>Please tick if patient would like a copy of their detention papers</b> <input type="checkbox"/></p>	
<p><b>Name of staff member reading rights - Print Name:</b></p>	
<p>A copy of the Mental Health Act Leaflet and information relating to the section will be sent to the patients nearest relative unless the patient objects to this</p>	<p><b>I Object</b> <input type="checkbox"/>                  * Please tick if patient objects *</p>
<b>Patients Signature:</b>	<b>Date:</b>



Please email this form to

Admin.MentalHealthAct.HDD@wales.nhs.uk or post  
it to the Mental Health Act Administration Team, 2<sup>nd</sup>

Floor, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

**Deddf Iechyd Meddwl 1983 – Adran 132/132A Gwybodaeth i gleifion sydd  
wedi'u cadw yn yr ysbyty**

Enw'r claf:

Cadwraeth ("section") bresennol:

Ward/Tîm:

**A ydych am i ni gysylltu â chi yn Gymraeg neu Saesneg?**

**Rhowch groes yn y blwch i gadarnhau eich dewis iaith.**

Cymraeg

Saesneg

Eraill? nodwch

Gallaf gadarnhau fy mod wedi egluro cynnwys y daflen 'Hawliau'r Claf' yn llawn, gan gynnwys y rhesymau am ei gadw/chadw yn yr ysbyty a hawl y claf i Eiriolwyr Iechyd Meddwl Annibynnol ("IMHA").

Rwyf wedi rhoi gwybodaeth i'r claf am ba mor hir y bydd yn cael ei gadw/chadw yn yr ysbyty, os a phryd fydd hawl apelio yn erbyn hyn i Dribiwnlys Adolygu Iechyd Meddwl (Cymru) a rheolwyr yr ysbyty, ac am ei hawl i gwyno os bydd am wneud hyn, a sut mae gwneud hynny. Mae rôl Tribiwnlys Adolygu Iechyd Meddwl Cymru a gwybodaeth am driniaeth wedi'u hegluro'n llawn.

**Ticiwch un o'r blychau canlynol:-**

Mae'r claf wedi deall y wybodaeth a ddarllenwyd ac rwyf wedi rhoi copi o'r wybodaeth iddynt/~~ei~~ chadw

Ar hyn o bryd mae'r claf yn gwrthod clywed ei hawliau a byddaf yn rhoi cynnig arall ar ddarllen ei hawliau iddynt/~~ei~~

Ar hyn o bryd does dim gallu gan y claf a byddaf yn gwneud rhagor o ymdrechion i ddarllen ei hawliau iddynt/~~ei~~

Does dim gallu gan y claf i ddeall y wybodaeth

Rhesymau eraill (nodwch)

Ticiwch os hoffai'r claf gopi o'u papurau cadw

**Enw'r aelod staff sy'n darllen yr hawliau – Printiwch yr enw:**

Caiff copi o daflen y Ddeddf Iechyd Meddwl a gwybodaeth am y gadwraeth eu hanfon at berthynas agosaf y claf oni bai bod y claf yn gwrthod hyn

**Rwyf yn gwrthod**

\* Ticiwch os yw'r claf yn gwrthod \*

**Llofnod y claf:**

**Dyddiad:**

## HYWEL DDA UNIVERSITY HEALTH BOARD

Anfonwch ebost o'r ffurflen hon i [Admin.MentalHealthAct.HDD@wales.nhs.uk](mailto:Admin.MentalHealthAct.HDD@wales.nhs.uk) post i: Tîm y Ddeddf Iechyd Meddwl, 2il Lawr, Hafan Derwen, Parc Dewi Sant, Caerfyrddin, SA31 3BB