



Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board



# Section 135, Mental Health Act Warrant to search for and remove patients Inter-Agency Procedure

## Procedure information

Procedure number: 743

### Classification:

Clinical

### Supersedes:

Version 2 – January 2022

### Clinical documents only:

Local Safety Standard for Invasive Procedures (LOCSSIP) reference:

*Not applicable*

National Safety Standards for Invasive Procedures (NatSSIPs) standards:

*Not applicable*

### Version number:

3

### Date of Equality Impact Assessment:

*01/08/2024*

## Approval information

### Approved by:

*Mental Health Legislation Committee*

### Date of approval:

*Enter approval date*

### Date made active:

*Enter date made active (completion by policy team)*

**Review date:**  
**Enter review date (normally three years from approval date)**

**Summary of document:**

*Procedure for the use of Section 135 – Warrant to search for and remove patients. Outlines the process for obtaining a warrant from a magistrate’s court. Includes practical information for police officers and staff. Welsh Government Section 135/6 form is also included.*

**Scope:**

*The procedure covers all areas of the HDUHB. It applies to police officers involved in implementing a section 135 and all nursing staff, doctors and Approved Mental Health Professionals involved in Section 135.*

**To be read in conjunction with:**

[395 - Section 136 - Mentally Disordered Persons Found in Public Places Inter-Agency Procedure](#) (Opens in new tab)

[731 - Leave of Absence Policy](#)(Opens in new tab)

[625 - Community Treatment Order Policy](#)(Opens in new tab)

[741 - Information to Patient Rights Procedure](#)(Opens in new tab)

[218 - Missing Persons Under the Care of the Mental Health and Learning Disabilities Directorate Procedure](#) (Opens in new tab)

**Owning group:**

Mental Health Written Control Document Group

*Date signed off by owning group*

**Executive Director job title:**

*Executive Director of Operations*

**Reviews and updates:**

Version 1 – New Procedure – 14.05.2019

Version 2 – Three year review – updated guidelines – 04.01.2022

**Keywords**

*Section 135, Section 136, Mental Health Act, Mentally disordered persons.*

**Glossary of terms**

Term	Definition
AMHP	Approved Mental Health Professional – a professional with training in the use of the Mental Health Act, approved by a local authority to carry out a number of functions under the Act
COP	Mental Health Act 1983, Code of Practice for Wales, Revised 2016
PACE	Police and Criminal Evidence Act 2017
AWOL	Absent without leave – when a patient absconds from legal custody
Section 12 Doctor	A doctor who has been approved by the Welsh Ministers (or the

	Secretary of State) under the Act as having special experience in the diagnosis or treatment of mental disorder.
RMP	A registered medical practitioner (Doctor) approved by the General Medical Council
Magistrates	Magistrates are volunteer judges who are appointed to serve in local courts. Magistrates are also known as justices of the peace.

**Key points:**

Inter- agency procedure to advise upon local processes and procedures for the implementation of Section 135 of the Mental Health Act.

Section 135 provides professionals with a warrant obtained from the Magistrates Court to grant forced entry into a persons home in order to keep them or remove them to a place of safety to receive an assessment of their mental health.

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## Scope

This procedure relates to all staff responsible for and/or working with persons who may be detained under section 135 of the Mental Health Act, 1983 including those in support functions. It also informs staff from other agencies involved in the detention of individuals under sec 135.

## Aim

This joint procedure outlines the roles and responsibilities of each of the organisations that are agreeing to it and provides guidance for police officers, healthcare practitioners including Registered Medical Practitioners, Care Co-ordinators and Approved Mental Health Professionals (AMHPs) on how to obtain a warrant from a Magistrates Court and how to implement it. Ensuring sec 135 is implemented in a consistent and efficient manner.

## Objectives

A person experiencing a mental health crisis should receive the best possible care at the earliest possible point.

The aim of this document will be achieved by the following objectives:

- Ensuring assessments under sec135 meet the requirements of the Mental Health Act Code of Practice for Wales 2016 and the Police and Criminal Evidence Act 1984 (Code C) and Policing and Crime Act 2017.
- Maintaining the professional expertise of police officers, Approved Mental Health Professionals (AMHPs), Registered Medical Practitioners and authorised persons in ensuring the proper assessment of people detained under sec 135.
- Obtaining and monitoring information on reasons for individuals being removed and detained under sec 135 and by improving service delivery.
- Whilst the person is detained under legal framework of MHA the agencies will protect and promote human rights also enhancing the underlying principles of the MHA code of practice which are treating people with dignity and respect, least restrictive option and maximising independence, fairness, equality and equity, empowerment and involvement, keeping people safe and effectiveness and efficiency.

## PLACES OF SAFETY

The Act defines a place of safety as

- A hospital
- An independent hospital or care home for mentally disordered persons
- A police station (for those over 18 years of age only)
- Residential accommodation provided by a local social services authority
- Any other suitable place (with the consent of a person managing or residing at that place).

## A Police Station

The Policing and Crime Act 2017 made several amendments to sec 135 including restricting situations in which a custody being used as a place of safety. As a result under 18's can no longer be removed to custody under any circumstance and for over 18's only in exceptional circumstances as detailed below:-

- The behaviour of the person poses an imminent risk of serious injury or death to themselves or another person
- because of that risk, no other place of safety in the relevant police area can reasonably be expected to detain them, and
- so far as reasonably practicable, a healthcare professional will be present at the police station and available to the police.

The authority of an officer of at least the rank of Inspector must be given for the use of custody in such circumstances.

### Any other Suitable Place

A place that is not specifically named in the legislation as a place of safety can be a "suitable place" if it is suitable, and with the agreement of relevant parties. In the case of a private home this is the agreement of the person believed to be suffering from a mental disorder and, unless the detained person lives alone at the property, one person residing there. Where the place is not a private home, the agreement of the person who appears to manage that place is required.

Where it is contemplated to use a private dwelling (house, flat or room where a person is living) as a place of safety. Sec 135 requires that the person believed to be suffering from a mental disorder and, if they are not the sole occupier of the premises, at least one of the occupiers of that dwelling, agree to that place being used as a place of safety.

This is set out in summary form below:

Scenario	Consent Required
<b>If the person believed to be suffering from a mental disorder is the sole occupier of the place</b>	That person agrees to the use of the place as a place of safety
<b>If the person believed to be suffering from a mental disorder is an occupier of the place but not the sole occupier</b>	Both that person and one of the other occupiers agree to the use of the place as a place of safety
<b>If the person believed to be suffering from a mental disorder is not an occupier of the place</b>	Both that person and the occupier (or, if more than one, one of the occupiers) agree to the use of the place as a place of safety

Legislation continues to provide for a range of locations to be used as a place of safety, which allows for local flexibility to respond to different situations. A person in mental health crisis should be taken to or kept at a place of safety that best meets their needs.

## **SECTION 135(1) WARRANT**

### **Definition and Purpose**

The purpose of a sec 135(1) warrant is to provide police officers with a power of entry to private premises, for the purposes of removing the person to a place of safety for a mental health assessment or for other arrangements to be made for their treatment or care. A warrant must be applied for by an AMHP and can be granted by a magistrate when the person is believed to be:

- suffering from a mental disorder AND
- has been, is being ill-treated, neglected or kept otherwise than under proper control, in any place within the jurisdiction of the justice OR
- being unable to care for themselves, is living alone in any such place.

### **Premises**

Although this is not defined within the Mental Health Act, it is understood to mean a dwelling (house and associated outbuildings including its land). It also includes “any tent or moveable structure” where the person is residing which includes caravans and hotels.

Where a person is lodging and renting a room within a house where they share facilities the landlord has the right to provide access to mental health professionals.

### **Application for a Section 135(1) Warrant and pre-assessment**

Where it is reasonably practicable, the intended place of safety should be identified, and the necessary arrangements made, before a warrant is applied for under sec 135(1). Proper planning should ensure that it is not necessary to use a police station as a place of safety other than in the exceptional circumstances described.

Having established that the grounds for an application are met and that an application is justified in terms of the Human Rights Act, the AMHP will contact all parties to forewarn about the process and discuss any actions needed. The police will require as much notice as possible (minimum 24 hours unless an emergency) in order to research and risk assess cases.

The AMHP will provide information to the Magistrate for the warrant and follow the courts own processes when making the application (details from the risk assessment may be relevant).

The decision to grant a warrant to a constable or to an AMHP by a court is usually in a process that is ‘ex parte’ – without giving notice to the person affected. The court will therefore need to be assured that, in accordance with Articles 5 and 6 of the European Convention of Human Rights, it is necessary that such an urgent and serious procedure is required in order to achieve the safety or protection of the person concerned.

In order for a Magistrate to be satisfied that it is appropriate to issue a warrant they are likely to ask AMHPs:

- Why they are applying for a warrant, i.e. there is reason to suspect the person is suffering from a mental disorder, there are significant risks to the persons health and safety, and/or the safety of other persons
- Whether reasonable attempts to enter without a warrant have been made i.e. details of what has been tried and by whom, and
- If not, why not.

Although it is not necessary for permission to enter to have been refused in order for a sec 135 (1) warrant to be granted, applicants should provide documented reasons for seeking a warrant if they have not already tried to gain access.

- Ahead of executing the Warrant the AMHP will ensure information on risk and presenting factors is shared with parties involved, including the persons family and/or carers and other relevant individuals should, where appropriate, be involved in assessing any risks posed, to develop a risk management plan for the execution of the warrant by ringing 101, or logging a request via email to the Force Control Centre [contactcentre@dyfed-powys.police.uk](mailto:contactcentre@dyfed-powys.police.uk). The request will be passed to the local sargeant who will make contact with the AMHP to arrange a mutually convenient time and place to meet.

All agencies involved will enquire into the background of the patient and exchange relevant information, for example:

- The time and place of the proposed assessment
- The identity of the person to be assessed and any background information including risks of violence, possession of weapons any physical conditions and if person has animals to be taken care of.
- If there is a key holder or arrangements needed to secure property
- The premises to be entered and its location
- The nature of the application including the statutory provision and brief facts
- The identity of the professionals involved
- The name and telephone contact number of the AMHP responsible for organising the assessment and the subsequent conveyance of the patient

## Executing the Warrant

When executing the warrant, the officer must be accompanied by an AMHP and a doctor. It may be helpful if the doctor who accompanies the police officer is approved for the purposes of section 12(2) of the Act. A pre-meet should be arranged prior to the executed of the warrant; this would be at a mutually agreed safe location, where the plan would be formulated.

The process involves effective co-ordination and communication for the AMHP, they must:

- Discuss with police all available information, so they can decide the level of resource in undertaking this.
- Ensure section 12(2) Doctor is available to attend the address, it may be the person's regular doctor if known to services and available.
- Liaise with Health Board staff to agree booking of suitable transport to transfer the person to an identified place of safety. If still on sec 135 (1) there would be an expectation for the police to remain with the individual until it is deemed safe for them to leave. This should be agreed with the AMHP.

On arrival at the premises the AMHP must request entry. If entry is refused the police will be asked to execute the warrant. In this respect the constable shall:

- Identify themselves
- Produce the warrant to the occupier of the premises
- Supply the occupier with a copy of the warrant
- If the subject of the warrant is NOT present but another person is present and apparently “in charge” of those premises, then the procedure described shall be followed
- If, upon entry, no one is found to be present then a copy of the warrant must be left in a “prominent” place on the premises

Warrants will only be executed by the police officer if, in the event, entry to the premises can only be achieved by the use of the warrant. The level of police intervention and force must be proportionate to the assessed level of risk at the premises.

The warrant gives police the right to enter the premises, by force if necessary. The police officer may remain even if asked to leave and may also search the premises of the person believed to be suffering from a mental disorder. The police officer may then remove the person to a place of safety (as identified above) in order for an assessment to take place. The person should be told the reasons for the removal before they are removed.

Local authorities have a duty to ensure the temporary protection of property for persons admitted to hospital or accommodation provided under the Social Services and Well-being Wales Act 2014 and safeguard their property and personal effects including pets if the individual is detained under MHA has no one else to take responsibility of their pets, property or belongings.

If damage has been caused to the premises whilst effecting entry and there is a need to secure the property, the AMHP should ensure this is done. The local authority must ensure information is available during working hours of locksmiths, and approved maintenance services that can be used. Outside of working hours, the police can, at their request, access a suitable service, which will be charged to the relevant authority.

Following entry under sec 135(1) the person may then be removed to a place of safety (as identified above) in order to convene a mental health assessment. The person’s home may be identified if it is safe and appropriate and the person consents, to this. In taking this decision, consideration should be given as to who else is present, particularly if a person might be distressed by the assessment taking place in these circumstances.

If it is jointly identified that the person will be removed to a place of safety then it is the responsibility of those involved to ensure arrangements are in place for the person to be received at a place of safety and obtain agreement with those responsible for those premises for its use.

Police have a vital role to play during the medical examination/assessment – to prevent a breach of the peace and ensure the safety of the person being assessed, those carrying out the assessment and any other persons present. By attending to these

considerations police will enable the mental health professionals to concentrate on the assessment process. While the AMHP has overall responsibility for the conduct of the assessment it may be necessary for police to take control in the event of a violent incident.

Where a person is violent or threatens to use violence, the police officer should, if time constraints allow and deemed appropriate, consult with the health care professionals to determine the most appropriate method of restraint.

If the person being assessed leaves the premises before the assessment process is complete they can be retaken within the time period.

- Entry to the premises must take place within 3 calendar months of the date of issue of the warrant. Police and Criminal Evidence Act 1984 S16 (3).
- A sec 135(1) warrant should only need to be executed once however the court can be requested to grant it for more than one occasion if required. In such cases a police officer of at least the rank of inspector will be required to have this in writing.
- Procedures must be put into place as detailed above in respect to returning the warrants to the Magistrates Court once executed. In the case of a warrant authorising multiple entries, upon the expiry of the period of three months or sooner.

### **Conveyance to the Place of Safety**

The police that have the authority to convey a person to the place of safety. However, this authority can be delegated and therefore police transport should not be considered as the default position.

An assessment, to include any risks to the health and safety of the patient and any other affected people, to ensure that patients are transported in the manner most appropriate to their situation. This should be the least intimidating to patients.

### **The Mental Health assessment under section 135(1)**

A person may be removed to a place of safety for a period of up to 24 hours in order to receive an assessment of their mental health. The period of 24 hours commences upon arrival at the first place of safety. If the person is being assessed in their home the period commences once the warrant is executed. Assessors should ensure that any reasonable adjustments are made for people with an impairment that constitutes a disability under the Equality Act, 2010.

Under sec 135(1) a person may be moved between places of safety within the 24 hour period and only when it is in the person's best interests. Second or subsequent place of safety by transport arranged by a police officer, the AMHP or a person authorised by either a police officer or the AMHP. A person should not be moved from one place of safety to another unless it has been confirmed that the new place of safety is willing and able to accept them.

A person may be transferred before their assessment has begun while it is in progress, or after it is completed and they are waiting for any necessary arrangements for their

care or treatment to be put in place. If it is unavoidable, or it is in the person's interests, an assessment begun by one AMHP or doctor may be taken over and completed by another, either in the same location or at another place to which the person is transferred.

If a person subject to sec 135 is taken first to an A&E Department for treatment of an illness or injury (before being removed to another place of safety) the detention period begins at the point when the person arrived at the A&E Department (because a hospital is a place of safety).

Any delays resulting from transferring the person cannot result in an overall period of detention which exceeds 24 hours. However there is provision for the Responsible Medical Practitioner (RMP) to examine the person detained under sec 135(1) to authorise a further period of detention to commence at the end of the 24 hours, not exceeding a further 12 hours. The grounds are that the, "condition of the detained person is such that it would not be practicable for the assessment of the person...to be carried out **before** the end of the period of 24 hours". The clinical grounds to delay an assessment being carried out:

- The person is too intoxicated with alcohol or drugs to be assessed
- The person is too physically unwell and has been transferred to A&E for treatment
- The person needs to be transferred between places of safety
- The person requires an interpreter including sign language
- The person has a specific need and the assessing team agree that it is appropriate to delay the assessment until the professional with relevant experience can be present/consulted.

A delay in attendance by an AMHP or medical practitioner is not a valid reason for extending detention.

The authorisation to extend the time should state:

- The time the authorisation is granted
- The reason for the authorisation
- The new end date and time for the sec 135(1)
- The doctor's name and status

The decision to extend the time period of up to a further 12 hours must be made within the 24 hour period and recorded by the RMP within the patient's case records and on monitoring documentation. Monitoring forms should be sent to the MHA administration team to upload them to Care Partner electronic record system.

If the time period of 24 hours is breached and no extension has been a Datix report must be submitted which provides details of the reason this has occurred and the steps that have been taken to avoid any such breach. The person must be informed and an appropriate plan made to care for the person.

In the unlikely event it is intended for the assessment to take place at a police station, the authorisation to extend the maximum detention period must also be approved by a police officer of the rank of superintendent or higher.

Sec 135 does not give authority for treatment and consent must be sought for any treatment. If the individual lacks capacity to consent, treatment could be considered under the Mental Capacity Act and also common law may be an option in an emergency. Treatment of under 16s who are not competent to decide about treatment could be given via parental consent. The reasons for treatment and the legal basis need to be documented on Care Partner.

Where a hospital is used as a place of safety staff must apply Sec 132 (provision of information to patients detained under the Act. This should be documented within the patient records as well as on the sec 135(1) monitoring form (Appendix B). This should be given both verbally and in writing using Patient Information Leaflet (Appendix C).

The power to detain a person under sec 135(1) ceases once an application for further detention has been made under the Act, other arrangements have been made for their treatment or care, or it has been decided that no further action is to be taken in respect of the person and it is safe to discharge them.

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## **SECTION 135(2) WARRANT**

### **Definition and purpose**

The purpose of a sec 135(2) warrant is to provide police officers with a power of entry to private premises search for, and remove the person so they can be taken to, or returned to, where they ought to be. (MHA CoP 16.16 – 16.21) The warrant will be granted by a Magistrate.

The situations it would likely be used are:

- Community Treatment Order (CTO) recall of a person in private premises not allowing or likely not to allow entry
- A detained person is Absent Without Leave (AWOL) from a ward and is known to be inside the property, but refusing access or likely to do so
- Following a duly completed application for detention whereby there is a refusal to obtain entry to the patient's home to allow conveyance to hospital.

Section 18 of the MHA is the legal power to return persons who are absent without leave (AWOL) to their ward and it is not a power directed solely or even firstly at police officers. Where a person who has been granted leave fails to return to hospital upon its completion, or where they fail to return if recalled from such leave when it is revoked, then they become AWOL.

This then entitles anyone on the staff of the hospital, an AMHP, a constable or anyone else authorised by the managers of the hospital, to take the patient into detention under section 18 and return them to the hospital. There is no power of entry in respect of this authority which is why a sec 135(2) warrant is required.

### **Application for a Section 135(2) Warrant**

The clinical team must decide who will co-ordinate the process on behalf of Hywel Dda to obtain the warrant. There is an expectation that ward staff will normally be responsible for the return of persons who are absent without leave from the hospital and staff who know the patient from the MDT will be responsible when a Community Treatment Order patient is requiring recall i.e. whoever is best placed with the most relevant clinical information should attend.

There should not be a delay because there is a dispute between professionals over who is the appropriate authorised person to apply for a warrant. Should this happen advice will be sought from an On Call Manager (if out of hours), or to make a decision and avoid any delay which may increase risk to the person (in hours).

Hywel Dda mental health staff have a warrant application procedure in place which outlines the details about information to be prepared prior to contacting the Court – see [Appendix A](#).

Once it has been established a sec 135(2) warrant is necessary and attempts to contact and all attempts to gain access have been evidenced and the criteria for the warrant is satisfied, hospital staff will apply for a warrant and once granted should contact the police informing them that a warrant is required and Hywel Dda are starting the process to obtain one. Staff should provide an approximate time to the police for them to attend for the purposes of execution of the warrant.

The co-ordinator will ensure information on risk and presenting factors is shared with parties involved, including the persons family and/or carers and other relevant individuals should, where appropriate, be involved in assessing any risks posed, to develop a risk management plan for the execution of the warrant by ringing 101, or logging a request via email to the Force Control Centre [contactcentre@dyfed-powys.police.uk](mailto:contactcentre@dyfed-powys.police.uk). The request will be passed to the local sargeant who till make contact with staff to arrange a mutually convenient time and place to meet.

The co-ordinator will also be required to:

- Identify appropriate transport to transfer the person to the ward they are being taken or admitted to. Police vehicles should only be used where there is extreme urgency, or where there is an immediate risk of violence.

## **Executing the warrant**

Once everyone is present at the address that is required, that being, police, Hywel Dda staff supporting and transport for conveyance the warrant can then be executed.

On arrival at the premises the coordinator must request entry. If entry is refused the police will be asked to execute the warrant. In this respect the constable shall:

- Identify themselves
- Produce the warrant to the occupier of the premises
- Supply the occupier with a copy of the warrant
- If the subject of the warrant is NOT present but another person is present and apparently “in charge” of those premises, then the procedure described shall be followed
- If, upon entry, no one is found to be present then a copy of the warrant must be left in a “prominent” place on the premises

If necessary, entry can be forced, with the warrant if required, and the property made safe. Making arrangements for repairs to a property or to secure property can be made by emailing the local authority Mental Health service manager to access advice and guidance in respect of local resources.

Staff would enter and speak to the person, explaining what is occurring and why. The person will be given a copy of the warrant once the police have completed the warrant to evidence it has been used, and the name of the officers involved.

### **Conveyance to the Place of Safety**

The police are given the authority to remove a person to the place of safety. However, this authority may be delegated to others, such as ambulance service or hospital staff and therefore police transport should not be considered as the default position.

As assessment, to include any risks to the health and safety of the patient and any other affected people, to ensure that patients are transported in the manner most appropriate to their situation. This should be the least intimidating to the patient.

### **Mental Health assessment under Section 135(2)**

No formal arrangements for an assessment will be required as the sec 135(2) will end when the person is returned to “where they ought to be” under the specific areas of the Act to which they are detained or liable to be detained to.

### **RETAKE OF PATIENTS ESCAPING FROM CUSTODY**

Sec 138 deals with powers to retake a person subject to sec 135 who escapes from custody and is relevant to both sec 135(1) and 135(2) as indicated:

- (i) Escape during removal to a place of safety - Where a person escapes in the course of being removed to a place of safety under sec 135 they may not be retaken under this provision after a period of 24 hours has expired from the time of that escape.
- (ii) Escape from a place of safety - (Sec 135(1) only) - Where a person escapes after arrival at a place of safety, they may not be retaken under this provision after the maximum time that they could have been detained in that place. In most cases that will be a total period of 24 hours but account also needs to be taken of any extension to that period (up to a maximum of 12 hours), where this has already been authorised by the medical practitioner, at the point of any escape.

### **MONITORING REQUIREMENTS OF SECTION 135(1) AND (2)**

The Mental Health Legislation Scrutiny Group are responsible for ensuring the functions of the Mental Health Act 1983 which are delegated to officers and staff are being carried out correctly and operating properly allowing for inadequacies to also be reported. The group is required to report as well as to provide assurance to the Mental Health Legislation Committee (MHLC) their findings and to report on any inadequacies. The Section 135/6 County Review Groups and Mental Health Scrutiny Group serve as groups responsible for examining the processes in place for multi-agency tasks.

Quarterly data on the use of sec 135 are provided quarterly to Welsh Government who also monitors its use across Wales.

To that effect a copy of all executed warrants under both sec 135(1) and 135(2) must be scanned at the earliest opportunity to

[Admin.mentalhealthact.HDD@wales.nhs.uk](mailto:Admin.mentalhealthact.HDD@wales.nhs.uk).

In instances of sec 135(1) the police officer, AMHP and the nurse in charge of the unit must ensure completion of the Section 135 monitoring form at [Appendix B](#) and attach it with the above to the Admin.mentalhealthact.HDD@wales.nhs.uk.

## References

Mental Health Act 1983 [Mental Health Act 1983 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/1983/36) (opens in a new tab)

Policing and Crime Act 2017 [Policing and Crime Act 2017 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2017/19) (opens in a new tab)

Police and Criminal Evidence Act 1984; Section 16 “Execution of Warrants”  
<https://www.legislation.gov.uk/ukpga/1984/60/section/16/2024-04-26#commentary-c18906601> (opens in new tab)

Serious Organised Crime and Police Act 2005  
<https://www.legislation.gov.uk/ukpga/2005/15/section/114#section-114-8-b> (opens in a new tab)

Jones R Mental Health Act Manual, 26th Edition, Sweet and Maxwell  
Code of Practice for Wales (revised 2016) [Mental Health Act 1983: code of practice | GOV.WALES](https://www.gov.wales/gov/wales/mental-health-act-1983-code-of-practice) (opens in a new tab) \*due to significant changes superseded by the Policing and Crime Act 2017 this earlier publication should be read with caution  
Mental Capacity Act Code of Practice [Mental Capacity Act Code of Practice - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/231222/mental_capacity_act_code_of_practice_2016.pdf) (opens in new tab)

Human Rights Act [Human Rights Act 1998 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/1998/42) (opens in a new tab)

Welsh Government Mental Health Crisis Care Concordat (2015)  
<https://www.gov.wales/sites/default/files/publications/2019-03/mental-health-crisis-care-concordat.pdf> (opens in new tab)

Social Services and Well-being (Wales) Act 2014; Section 58  
<https://www.legislation.gov.uk/anaw/2014/4/contents> (opens in new tab)

Relevant NICE guidance:

Service user experience in adult Mental Health:

QS15: [Overview | Patient experience in adult NHS services | Quality standards | NICE](https://www.nice.org.uk/guidance/qs15) (opens in new tab)

CG136: [Overview | Service user experience in adult mental health: improving the experience of care for people using adult NHS mental health services | Guidance | NICE](https://www.nice.org.uk/guidance/cg136) (opens in new tab)

**Section 135(2) Warrants procedure for Hywel Dda MH&LD staff**

**1. Introduction:**

The purpose of a section 135(2) warrant is to provide police officers with a power of entry to private premises to remove or return the person to where they ought to be. For example:

- Community Treatment Order recall of a person in private premises not allowing or likely to allow entry.
- A detained person absent without leave from a ward, refusing access to property or likely to do so.

The clinical team must decide who will co-ordinate the process on behalf of Hywel Dda Health Board to obtain the warrant. There is an expectation that ward staff will normally be responsible for the return of persons absent without leave from the hospital or community team nursing staff when the patient has been on leave for a significant period of time or is subject to a Community Treatment Order.

There should not be a delay because of a dispute between professionals over who is the most appropriate applicant. Should this occur then advice should be sought from the management team.

An online system is in effect for applications during business hours (please refer to Part B of the process in an emergency out of hours situation).

Wherever possible applications for a warrant should only be applied for within normal Court hours. (09.00am to 5.00pm Monday to Friday):

**2. Preparing the application**

The applicant completes the application (appendix Ai) and draft warrant form digitally (appendix Aii). Saving both documents in the following format:

Application – MH Hyweldda “Date” “Author name” A

Warrant – MH Hyweldda “Date” “Author name” W

**3. Book appointment**

Using Team up online calendar (available 24/7) book an available time slot which fits operational needs. Do not provide any confidential information during the booking. Keep a copy of the auto-reply.

Link to Team Up Calendar

<https://teamup.com/kssshiv9yzkwh5m4o>

If there are no suitable available slots email application to [searchwarrants@justice.gov.uk](mailto:searchwarrants@justice.gov.uk) and in the subject line “Urgent listing required – no team up slot available” and submit your application using the secure file share portal - It does not need to be encrypted.

**4. Submitting application**

Using the secure file share portal submit application and draft warrant by emailing it [searchwarrants@justice.gov.uk](mailto:searchwarrants@justice.gov.uk)

Copy in [Admin.mentalhealthact.HDD@wales.nhs.uk](mailto:Admin.mentalhealthact.HDD@wales.nhs.uk).

Alternatively you can request the MHA department submit the completed application on your behalf. It must be submitted no later than 7am on day of your appointment (unless an urgent application).

Include booking reference in subject line of email.

### **5. Payment of fees**

Contact usual local court to pay any fees arising in civil applications by emailing

**To:** [llanellimagscrt@hmcts.gsi.gov.uk](mailto:llanellimagscrt@hmcts.gsi.gov.uk)

**Subject:** PAYMENT INFORMATION / UNDERTAKING FOR MENTAL HEALTH ACT WARRANTS OF ENTRY

Name: (Applicant)

Organisation and address: Hywel Dda University Health Board

E mail: (Applicant)

Telephone number: (Applicant)

Date of application being made:

Court booking reference for application:

**If the fee cannot be paid prior to the application due to its urgency, I undertake that payment will be made within 48 hours.**

Signature :

Date:

[typed signature is acceptable]

Using ORACLE raise a requisition for the above payment to be made at the very earliest convenience.

- Create a non catalogue request on the Oracle system in the usual way and mark it urgent
- Description will be "Payment for the issue of a Court Warrant on (date) to Carmarthen Court etc."
- The supplier is "Credit Card Purchase
- Unit of issue is each @ £.....+ Vat
- In the note to buyer we will need the contact name and telephone number on who to contact to make payment
- Requisition gets approved and goes into the Procurement workflow
- Procurement receives the requisition and processes the payment

### **6. Telephone hearing**

Dial in at your chosen appointment time using conference details:

Conference numbers for Telephone Hearings (unless you have been provided with alternative numbers by the legal adviser) - please dial in at your appointment using the following numbers.

If you are booked in the BLUE DIARY: 0800 048 8525 participant code: 25237668#

If you are booked in the RED DIARY: 0800 048 8525 participant code: 25386987#

You will then be on hold in the CVP Lobby until a Legal Advisor accepts you into the call. Please do not join the telephone hearing prior to your allocated time. If there is a delay in accepting you please be patient and remain on the call as it is likely the previous application has over run.

You will be asked some security questions and will be asked to swear on an oath (Appendix Aiii)

Applications will be considered in the normal way as if being heard at court and parties should ensure conversations remain confidential and cannot be overheard. Observers to the hearing must be declared at the start.

If granted the warrant will be electronically authenticated and emailed to the applicants secure email address as set out on the application form.

The warrant no longer requires a signature – it will either have a typed name or initials usually following “By order of the court” and will be in PDF format.

#### **7. Returning the warrant once executed / expired**

Once executed or when expired warrant must be returned by email as soon as possible to [returnedsearchwarrants@justice.gov.uk](mailto:returnedsearchwarrants@justice.gov.uk)

In subject line enter heading “Returned Search Warrant – booking reference \*\*\*”.

A warrant can only be used once and is valid for 1 month. An electronic section 135 warrant cannot be held for future use once it has been executed.

#### **8. Outside business working hours**

The online booking Team Up calendar does not apply to applications being made outside of working hours. The existing out of hours process which have been in force since 2016 will continue to apply using the telephone number 01554 779972.

Applications will be heard out of hours only in genuine emergency situations in:

- The matter giving rise to the need for an emergency application needs to have arisen after 5pm.
- You plan to execute the warrant before 9am on the next working day.
- 

Points 4-7 above should all still be applied.

#### **9. Co-ordination of the warrant execution**

Refer to policy

**Appendix Ai**

**APPLICATION FOR WARRANT TO SEARCH FOR AND REMOVE PATIENT**

*(Section 135(2) Mental Health Act 1983)*

Use this form ONLY for an application for a warrant under s135(2) Mental Health Act 1983.

**This is an application by** ..... (name of applicant)

Applicant's

address:<sup>1</sup> .....

Email address: .....

Phone .....

**Applicant's status:** Police constable / person authorised under Mental Health Act 1983 or article 8 of the Mental Health (Care and Treatment) (Scotland) Act 2003 (Consequential Provisions) Order 2005 to take or retake a patient into custody <sup>2</sup>

**Booking reference (if appropriate :**

**I estimate that the court should allow** ..... (time) **to read this application and**  
..... (time) **for the hearing.** <sup>3</sup>

**I expect any warrant issued to be executed on** ..... (give the planned date).

**1. Complete the box above and boxes below.** If you use an electronic version of this form, the boxes will expand. If you use a paper version and need more space, you may attach extra sheets.

**2. Complete the declaration in box 6.**

**3. Attach the draft warrant(s) you are asking the court to issue.**

**4. Send or deliver a copy of the completed form and draft warrant(s) to the court.** You may send them by secure email. Make sure the court knows if the application is urgent. Your time estimates will help the court to allow enough time to prepare for the hearing.

**1) (a) The name of the patient**

**2) The address of any premises you seek to enter**

<sup>1</sup> See guidance note 2 at the end of this form.

<sup>2</sup> Delete as appropriate

<sup>3</sup> See guidance note 4 at the end of this form.

**3) Grounds.** What you need to explain will depend on the circumstance of the above named individual

(a) Outline the circumstances by which the patient became a patient as defined by the Mental Health Act and the diagnosis if known

(b) Outline the grounds which lead you to believe that the patient is on the premises?

(c) When and how was admission to the premises refused or why do you apprehend that such admission will be refused?

**4) Why do you believe that the warrant is necessary?** Explain why the matter cannot be dealt with without a warrant, for example – seriousness of risk to patient or others

**5) Search on more than one occasion.** Use this box only if you are applying for the court's authority to search premises on more than one occasion.

(a) Why do you want to search on more than one occasion?

(b) How many times do you want to be able to search those premises? Specify any maximum number of occasions, or state 'unlimited'.

**6) Duty of disclosure.**<sup>4</sup> See also the declaration in box .

Is there anything of which you are aware that might reasonably be considered capable of undermining any of the grounds of this application, or which for some other reason might affect the court's decision? Include anything that reasonably might call into question the credibility of information you have received, and explain why you have decided that that information still can be relied upon.

**7) Declaration**

To the best of my knowledge and belief:

- (a) this application discloses all the information that is material to what the court must decide, including anything that might reasonably be considered capable of undermining any of the grounds of the application, and
- (b) the content of this application is true.

Signed:<sup>5</sup> .....  
[applicant]

Date: ..... Time: .....

**Decision**

I heard this application today.

The applicant satisfied me about his or her entitlement to make the application.

The applicant confirmed on oath or affirmation the declaration in box 6

The applicant gave me additional information, the essence of which was:<sup>6</sup>

I [issued] [refused to issue] [a warrant] [warrants] because:<sup>7</sup>

<sup>4</sup> See guidance note 5 at the end of this form.

<sup>5</sup> If an electronic version of this form is used, instead of a signature it may be authenticated electronically (e.g. by sending it from an email address recognisable to the recipient).

<sup>6</sup> Delete if not applicable.

Signed:

.....

Name: ..... [Justice of the Peace]<sup>6</sup>  
[District Judge (Magistrates' Court)]<sup>6</sup>

Date: ..... Time: .....

## NOTES FOR GUIDANCE

### 1. Use of this Form

This form is for use in connection with an application for a warrant under Section 135(2) of the Mental Health Act 1983.

### 2. Applicant's contact details

The court may need to contact the applicant urgently. In choosing the address and telephone number(s) to give, applicants should be aware that details entered in this application form may be disclosed in subsequent legal proceedings, unless the court orders them to be withheld.

### 3. Status of the applicant

The applicant must satisfy the court about their entitlement to make the application. Officers of some other investigating authorities can apply for and execute warrants to enter, search and seize as if they were constables, under the legislation which applies to them. Examples include members of the National Crime Agency designated with the powers of a constable, and officers of HM Revenue and Customs.

### 4. Making an application: time estimates and live links

In boxes 3 and 4 you should identify the sources of your statement, referring to status (e.g. social worker, person's mother, psychiatrist etc) in

The court needs an estimate of how long to allow for reading and hearing the application.

If in doubt, consult the justices' legal advisor.

To help assess the urgency of the application compared with others, the court also needs to know when it is expected that the warrant will be executed.

Normally applications should be made by telephone. The applicant must provide a telephone number.

The application and ad raft warrant must be delivered to the court by email.

### 5. Information that might undermine the grounds of the application

Information that might undermine any of the grounds of the application must be included in the application, or the court's authority for the search may be ineffective. The court will not necessarily refuse to issue a warrant in every case in which there is information that undermines the grounds of the application.

The applicant must explain why information is thought to be credible, where it comes from a source that cannot be tested (for example, a report from an anonymous informant).

**Applicant Copy/Patient Copy/ Police Copy / Place of Safety Copy<sup>1</sup>****Magistrates' Courts in England and Wales****WARRANT TO SEARCH FOR AND REMOVE PATIENT**

Any queries regarding this document should be directed to Cardiff Magistrates' Court, Fitzalan Place, Cardiff, CF24 0RZ, telephone number: 02920 463040

This warrant is issued under Section 135(2) Mental Health Act 1983

Specify name of applicant	On this day information was laid before me by [name of applicant]
Specify name of Local Authority/ agency <sup>1</sup>	a police constable / person authorised under the Mental Health Act 1983 or Article 8 of the Mental Health (Care and Treatment) (Scotland) Act 2003 (Consequential Provisions) Order 2005 to take a patient to any place or take or retake a patient into custody
Specify patient	that there is reasonable grounds to believe that a patient, namely [name]
Insert address of premises	is to be found on premises at [address] and that admission to the premises has been refused or that such a refusal of such admission is to be apprehended

AUTHORITY IS HEREBY GIVEN for any constable TO ENTER THE SAID PREMISES, if need be by force and remove the patient

The constable may be accompanied by a registered medical practitioner or another person authorised under the Mental Health Act 1983 or Article 8 of the Mental Health (Care and Treatment)(Scotland) Act 2003

Entry is authorised for one occasion only<sup>1</sup>

Entry is authorised for ... occasions<sup>1</sup>

Entry under this warrant must be within three months of the date of its issue

**By order of the Court**

Signature, initial or other authentication .....

Justice of the Peace/ District Judge<sup>1</sup>

Date:.....

**ENDORSEMENT** – to be made by the constable executing the warrant

*(please delete as appropriate)*

1. This warrant was executed on
2. The person sought was found and removed to a place of safety namely:
3. No person was found
4. This warrant was not executed
5. The name(s) of the officer(s) executing this warrant is/are

Dated: .....

Signature of officer executing the warrant: .....

**A copy of this warrant endorsed as above must be returned to the issuing magistrates' court office**

### **Oath**

I swear by Almighty God that the evidence I shall give will be the truth, the whole truth, and nothing but the truth. To the best of my knowledge and belief, this application discloses all the information that is material to what the court must decide, including anything that might reasonably be considered capable of undermining any of the grounds of the application and the content of this application is true.

### **Affirmation**

I solemnly declare and affirm that the evidence I shall give will be the truth, the whole truth, and nothing but the truth. To the best of my knowledge and belief, this application discloses all the information that is material to what the court must decide, including anything that might reasonably be considered capable of undermining any of the grounds of the application and the content of this application is true.



## Section 135 Mental Health Act 1983 Monitoring Form

Police Reference Number (STORM): .....

Health Board Reference: .....

GREEN SECTIONS TO BE COMPLETED BY HEALTH BOARD PERSONEL ONLY



Pembrokeshire County Council  
Cyngor Sir Benfro



Cyngor Sir  
CEREDIGION  
County Council

## 1. Personal Details

Name:			
Date of Birth:			
Gender:	Male	Female	Other (please specify)
Ethnicity:	Self-defined:	If not self-defined, list from 2011 census to be referred to (see end of form)	
Preferred Language:			See end of form for full list of languages
Is a translator required?	Yes/No		

## 2. Details of Police Encounter

Date and time of Warrant Executed	Date:	Time:			
Name of Police Officer:			Collar No:		
Name of AMHP:			Local Authority:		
Name of Doctor (if present)					
Address Identified on Warrant			Copy of warrant to person: Yes/No		
Is the address identified on the warrant considered suitable as a place of safety to undertake the assessment?	Yes/No				
If YES to above: [Note: the 24 hour detention period starts from time warrant executed]	Date Assessment concluded:	Go to Part 5 - Outcome of Assessment			
	Time Assessment concluded:				
If NO:			Go to: Date and Time arrived at 1st Place of Safety in Part 4		
Is the person suffering from the effect of alcohol or drugs?	Alcohol	Drugs	Both	No	Not Known
Any Additional Information Surrounding Occurrence/Detention:					

### 3. Restraint

Was physical restraint used during the initial encounter?	Yes/No	If yes, provide details
Was physical restraint used during transport?	Yes/No	If yes, provide details
Was physical restraint used at the place of safety?	Yes/No	If yes, provide details
Use of force form completed?	Yes/No	

### 4. Place of Safety (PoS)

Was the person initially taken to A&E for illness or injury?	Yes/No	If yes, provide details	
	If yes, time of arrival (24hr clock)		
	If yes, time of departure (24hr clock)		
Location of 1st place of safety	<input type="checkbox"/> Agreed Health Based PoS <input type="checkbox"/> Police Station <input type="checkbox"/> A&E Department <input type="checkbox"/> Other (please specify) .....	Name of location	
Arrival at agreed 1st Place of Safety	Date:	Time :	
Conveyance method (if not already there and kept at place of safety)	<input type="checkbox"/> Ambulance <input type="checkbox"/> Police Vehicle <input type="checkbox"/> Other Health Vehicle <input type="checkbox"/> None (if already at PoS) <input type="checkbox"/> Other (please specify) .....	*If police vehicle used, please state reason why <input type="checkbox"/> Ambulance not available with 30 minutes <input type="checkbox"/> Ambulance not requested <input type="checkbox"/> Police or police/ambulance risk assessment <input type="checkbox"/> Ambulance crew refused to attend <input type="checkbox"/> Ambulance re-tasked to higher priority call <input type="checkbox"/> Not known	
Location of agreed 2nd place of safety	<input type="checkbox"/> Agreed Health Based PoS <input type="checkbox"/> Police Station <input type="checkbox"/> A&E Department <input type="checkbox"/> Other (please specify) .....	Name of location	
Reason for transfer			

<b>Arrival at agreed 2nd Place of Safety</b>	<b>Date:</b>	<b>Time :</b>
<b>Conveyance method to 2nd place of safety</b>	<input type="checkbox"/> Ambulance <input type="checkbox"/> Police Vehicle <input type="checkbox"/> Other Health Vehicle <input type="checkbox"/> None <i>(if already at PoS)</i> <input type="checkbox"/> Other <i>(please specify)</i> .....	*If police vehicle used, please state reason why <input type="checkbox"/> Ambulance not available with 30 minutes <input type="checkbox"/> Ambulance not requested <input type="checkbox"/> Police or police/ambulance risk assessment <input type="checkbox"/> Ambulance crew refused to attend <input type="checkbox"/> Ambulance re-tasked to higher priority call <input type="checkbox"/> Not known
<b>Location of agreed 3rd place of safety</b>	<input type="checkbox"/> Agreed Health Based PoS <input type="checkbox"/> Police Station <input type="checkbox"/> A&E Department <input type="checkbox"/> Other <i>(please specify)</i> .....	Name of location
<b>Arrival at 3rd agreed place of safety</b>	<b>Date:</b>	<b>Time :</b>
<b>Reason for transfer</b>		
<b>Conveyance method to 3rd place of safety</b>	<input type="checkbox"/> Ambulance <input type="checkbox"/> Police Vehicle <input type="checkbox"/> Other Health Vehicle <input type="checkbox"/> None <i>(if already at PoS)</i> <input type="checkbox"/> Other <i>(please specify)</i> .....	*If police vehicle used, please state reason why <input type="checkbox"/> Ambulance not available with 30 minutes <input type="checkbox"/> Ambulance not requested <input type="checkbox"/> Police or police/ambulance risk assessment <input type="checkbox"/> Ambulance crew refused to attend <input type="checkbox"/> Ambulance re-tasked to higher priority call <input type="checkbox"/> Not known
<b>Date officer released from PoS</b>		
<b>Time officer released from PoS</b>		
<b>Reason officer required to remain with detained person</b>	<input type="checkbox"/> Risk assessment (aggression, risk of absconding, Breach of the Peace) <input type="checkbox"/> Place of safety not forewarned of arrival <input type="checkbox"/> Availability of health staff <input type="checkbox"/> Delay in locating a hospital bed (if required) <input type="checkbox"/> Other <input type="checkbox"/> No delay	Comments:
<b>If police custody used as a place of safety for a person aged 18 or above, brief outline of reasons</b>	Joint risk assessment of imminent risk of serious harm or death to self and/or others	Details of authorising officer (must be rank of Inspector or above)

5. Assessment and Outcome

Time the person explained rights when kept at or on arrival at the place of safety	Time:	Information provided by:
AMHP Details	Name of AMHP:	Local Authority Area:
	Date:	Time:
Name of 1st Assessing Doctor	Name:	S12 (2) Approved - Yes/No
Name of 2nd Assessing Doctor (if required)	Name:	S12 (2) Approved - Yes/No
Date and time assessment started	Date:	Time:
Date and time assessment concluded	Date:	Time:
Extension of 12 hour period required agreed	Name of Responsible Medical Practitioner:	
	Date:	Time:
	Reason for extension:	Intoxication
		Physical Health
	Reason if declined:	

<input type="checkbox"/> Informal admission to hospital <input type="checkbox"/> Admitted to hospital under Section 2 of the MHA <input type="checkbox"/> Admitted to hospital under Section 3 of the MHA <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Any Other, please specify .....
---

Detention under S.135 ended	Date:	Time:
-----------------------------	-------	-------

Received at Mental Health Act Department by:

Details:	Date:
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**Ethnicity**

Welsh  
 English  
 Scottish  
 Northern Irish  
 British  
 Irish  
 Gypsy or Irish Traveller  
 Any other White background - please specify .....  
 White and Black Caribbean  
 White and Black African  
 White and Asian  
 Any other Mixed/Multiple ethnic background - please specify .....  
 Indian  
 Pakistani  
 Bangladeshi  
 Chinese  
 Any other Asian background - please specify .....  
 African  
 Caribbean  
 Any other Black/African/Caribbean background - please specify .....  
 Arab  
 Any other ethnic group - please specify .....  
 Unknown

**Preferred Language**

Welsh	Kurdish
English	Lingala
Akan (Ashanti)	Luganda
Albanian	Makaton (sign language)
Amharic	Malayalam
Arabic	Mandarin
Bengali & Sylheti	Norwegian
British Signing Language	Pashto (Pushtoo)
Cantonese	Patois
Cantonese & Vietnamese	Polish
Creole	Portuguese
Dutch	Punjabi
Ethiopian	Russian
Farsi (Persian)	Serbian/Croatian
Finnish	Sinhala
Flemish	Somali
French	Spanish
French creole	Swahili
Gaelic	Swedish
German	Sylheti
Greek	Tagalog (Filipino)
Gujarati	Tamil
Hakka	Thai
Hausa	Tigrinya
Hebrew	Turkish
Hindi	Urdu
Igbo (Ibo)	Vietnamese
Italian	Yoruba
Japanese	Other - please specify in 'Comments' (indicator 17)
Korean	Unknown

Mental Health Act 1983

Section 135(1) – ADMISSION OF PERSONS REMOVED BY POLICE UNDER A  
COURT WARRANT

You have been brought to:

Name of Hospital .....

Your Detention under section 135 began on:

Date: ..... Time: ..... am/pm

Why Have I Been Brought To A Hospital?

You have been brought to this hospital under section 135(1) of the Mental Health Act 1983. This means that a magistrate has issued a warrant saying that a police officer can bring you here and that you can be kept here even if you don't want to come.

The warrant has been issued because an approved mental health professional thinks that you have a mental disorder and that you may need treatment and care.

An approved mental health professional is someone who has been specially trained to help decide whether people need to be in hospital.

If the police officer has safety concerns they are allowed to search you if they reasonable believe that you have an item on your person that could be used to hurt yourself or others.

How long will I be here?

You can be kept here (or in another place of safety) for 24 hours from:

- where you are removed to a place of safety, the time when you arrive at that place; or
- where you are kept at the premises specified in the warrant, the time when the police officer first enters the premises to execute the warrant,

so that you can be seen by a doctor and approved mental health professional.

If the doctor and the approved mental health professional agree that you need to remain in hospital, a second doctor may be asked to see you to confirm their decision.

In some situations, a doctor will be able to give permission for you to be kept at, or removed to another place of safety for another 12 hours. The maximum period of time that you can be kept at any place of safety under section 135 is 36 hours.

During the time allowed for you to be kept at the place of safety you must not leave unless a doctor tells you that you can go.

If you try to leave the staff can stop you and if you leave, you can be brought back.

If the doctor and an approved mental health professional have not seen you by the end of the 24 (or sometimes 36) hours, you will be free to leave.

However, you may decide to stay on a voluntary basis. If you do want to leave, please talk to a doctor first.

#### What Happens Next?

When the doctor and an approved mental health professional have seen you, they may say that you need to stay in hospital for longer. They will tell you why and for how long this is likely to be. You will be given another leaflet that explains what will happen.

#### Can I appeal?

No. Even if you do not agree that you need to be in hospital, you cannot appeal against the decision to keep you at the hospital under section 135.

#### Will I be given treatment?

The doctor will tell you about and discuss any treatment they think you need. You have the right to refuse any treatment you do not want.

Only in special circumstances, which would be explained to you can you be given treatment you do not agree to.

#### How do I complain?

If you want to raise a concern or make a complaint about any part of your care and treatment in hospital, please speak to the person in charge of the hospital unit that you have been brought to, or a nurse or social worker. They might be able to sort it out. If you are not satisfied with their response you can write to the Hospital Managers at the following address:

If you are not satisfied with the response from the Hospital Managers, you can contact the Review Service for Mental Health. This service was set up to make sure that the mental health law is used properly and that patients are cared for properly whilst they are in hospital.

You can contact them by phone, in writing or by email at:

Review Service for Mental Health  
Healthcare Inspectorate Wales  
Welsh Government  
Rhydycar Business Park  
Merthyr Tydfil  
CF48 1UZ  
Tel: 0300 062 8327  
Email: [rsmh@gov.wales](mailto:rsmh@gov.wales)

You can also contact the Review Service once you have left the hospital.

#### Code of Practice for Wales to the Mental Health Act 1983

The Code of Practice for Wales gives guidance to staff about the Mental Health Act 1983. They have to think about what the Code says when they take decisions about your care and treatment. You can ask to look at a copy of the Code.

#### Further Information and Help

If there is anything you do not understand about your care and treatment, a member of staff will try to help you. Please ask a member of staff if there is also anything in this leaflet you do not understand or if you have other questions that it has not answered.