



New South Wales

# Mental Health Bill 2006

## Explanatory note

This explanatory note relates to this Bill as introduced into Parliament.

## Overview of Bill

The objects of this Bill are to make provision with respect to the care, treatment and control of mentally ill persons and mentally disordered persons and other matters relating to mental health. The Bill re-enacts the provisions of the *Mental Health Act 1990*, with amendments, generally in accordance with proposals relating to patients (other than forensic patients) arising from a statutory review of that Act.

The Bill is divided into Chapters, Parts and Divisions. Each Chapter deals with a discrete subject-matter relating to mental health.

## Outline of provisions

### Chapter 1 Preliminary

Chapter 1 (proposed sections 1–4) contains provisions relating to the citation and commencement of the proposed Act, as well as provisions defining words and expressions used in the proposed Act. The proposed Chapter also sets out the objects of the proposed Act in relation to the care, treatment and control of mentally ill persons and mentally disordered persons.

## **Chapter 2 Voluntary admission to facilities**

Chapter 2 (proposed sections 5–11) sets out the circumstances in which a person may be admitted voluntarily to a mental health facility as a voluntary patient under the proposed Act. It also sets out the additional requirements relating to the voluntary admission of children and persons under guardianship. An *authorised medical officer* (that is, a medical superintendent of a mental health facility or a medical officer nominated by the medical superintendent) may refuse to admit a person as a voluntary patient and may discharge a person as a voluntary patient. A right of appeal is provided to the medical superintendent against any such decision by a medical officer nominated by the medical superintendent. The case of a voluntary patient must be reviewed at least once a year, if the patient remains in a mental health facility.

## **Chapter 3 Involuntary admission and treatment in and outside facilities**

### **Part 1 Requirements for involuntary admission, detention and treatment**

The Part (proposed sections 12–16) provides that a person must not be involuntarily admitted to, or detained in or continue to be detained in, a mental health facility unless an authorised medical officer is of the opinion that the person is a mentally ill person or a mentally disordered person and that no other care of a less restrictive kind is appropriate and reasonably available to the person. An authorised medical officer has a duty to discharge a person if not of that opinion. The Part sets out the criteria which a person who is suffering from mental illness or who is mentally disordered must satisfy before being considered to be a mentally ill person or mentally disordered person for the purpose of involuntary detention under the proposed Act or being made subject to a community treatment order under the proposed Act.

### **Part 2 Involuntary detention and treatment in mental health facilities**

#### **Division 1 Preliminary**

The Division (proposed section 17) defines expressions used in the proposed Part.

#### **Division 2 Admission to and initial detention in mental health facilities**

The Division (proposed sections 18–33) sets out the circumstances in which a person may be brought to, and detained involuntarily in, a mental health facility under the proposed Act. The Division specifies the requirements that are to be satisfied before a person can be taken to and detained in a mental health facility, including on the

certificate of a medical practitioner or other person accredited by the Director-General of the Department of Health (the **Director-General**), on the information of an ambulance officer, after apprehension by a police officer, following the making of an order by a Magistrate or other authorised person in the case of a person who is physically inaccessible to ordinary medical examination or observation, on an order of a court or bail officer, on transfer from another health facility or at the request of a primary carer, relative or friend.

The Division also sets out the steps to be taken following the involuntary detention of a person in a mental health facility, including the carrying out of medical examinations and the notification of friends and relatives of the person's detention. A person who is found, after those steps are taken, to be a mentally ill person (an **assessable person**) must be the subject of a Magistrate's inquiry (a **mental health inquiry**). A person who is found, after those steps are taken, to be a mentally disordered person must not be detained for a period of more than 3 days (not including weekends and public holidays). A person who is not found, after those steps are taken, by 2 medical practitioners to be either a mentally ill person or a mentally disordered person, must be released. The Division provides for further limited detention to enable police to take action in relation to certain persons.

### **Division 3      Continuing detention in mental health facilities**

The Division (proposed sections 34–45) provides for the procedures and purpose of mental health inquiries to determine whether an assessable person is, on the balance of probabilities, a mentally ill person and the course of action to be taken in respect of the person. On a finding that a person is a mentally ill person, the Magistrate must, if of the opinion that it is appropriate to do so, order that the person be detained in a mental health facility as an involuntary patient for a period not exceeding 3 months. If not of that opinion, the Magistrate may order the person's discharge or make a community treatment order for the person.

The Division also deals with the periodic review (every 3 months) by the Mental Health Review Tribunal (the **Tribunal**) of persons who are found at an inquiry to be mentally ill persons requiring detention. The Tribunal must order the discharge of a patient on a review if it does not determine that the patient is a mentally ill person and that no other care of a less restrictive kind is appropriate and reasonably available to the person. An involuntary patient must be examined by an authorised medical officer at least once every 3 months.

The Division sets out other circumstances in which an involuntary patient may cease to be involuntarily detained in a mental health facility, including on re-classification as a voluntary patient, when a community treatment order is made and by discharge after an application by the patient or the primary carer or another person or if a person is absent from a facility for more than 12 months.

There is an appeal to the Tribunal against a refusal of or failure to determine an application for discharge.

#### **Division 4      Leave of absence from mental health facilities**

The Division (proposed sections 46–49) provides for leave of absence from detention in a mental health facility to be granted to patients and detained persons and for the apprehension of patients or persons who fail to return after leave of absence expires or to comply with a condition of leave of absence.

### **Part 3      Involuntary treatment outside mental health facilities**

The Part establishes a scheme for the mandatory treatment of persons outside mental health facilities under community treatment orders.

#### **Division 1      Applications for and making of community treatment orders**

The Division (proposed sections 50–56) enables the Tribunal, on application or on its own motion, or a Magistrate holding a mental health inquiry, to make a community treatment order in respect of a person (the *affected person*). The Division specifies that such an order may not be made in respect of a person unless specified criteria relating to the person's previous history and treatment are met, a treatment plan is proposed by a declared mental health facility and the Tribunal or Magistrate is satisfied that the facility is capable of implementing it. The Division also specifies requirements for treatment plans and provides for the form and duration of community treatment orders. A community treatment order may not last for more than 12 months.

#### **Division 2      Operation of community treatment orders**

The Division (proposed sections 57–64) provides for the operation and enforcement of community treatment orders. An affected person is required to attend at a specified place to receive treatment by a specified mental health facility. Medication may be administered to an affected person without consent for the purposes of an order. A person who breaches an order may be taken to the relevant mental health facility or another mental health facility and may be given treatment there or assessed for involuntary admission to a mental health facility. A person who refuses treatment after being taken to the supervising mental health facility may be taken to another mental health facility. A person taken to such a mental health facility may be detained there for the duration of the community treatment order but must be released in specified circumstances. The Tribunal is to review the case of an affected person detained after breach of a community treatment order every 3 months to determine whether the person is a mentally ill person for whom no other care is appropriate and reasonably available.

### **Division 3      Revocation, variation and review of community treatment orders**

The Division (proposed sections 65–67) provides for the variation and revocation of community treatment orders and for appeals against community treatment orders.

## **Chapter 4    Care and treatment**

### **Part 1    Rights of patients or detained persons and primary carers**

#### **Division 1      General**

The Division (proposed sections 68–72) sets out general principles for the care and treatment of people with a mental illness or mental disorder, including the principle that people with a mental illness or a mental disorder should receive the best possible care and treatment in the least restrictive environment enabling the care and treatment to be effectively given. The Division makes it an offence for an authorised medical officer or an employee at a mental health facility wilfully to strike, wound, ill-treat or neglect a patient or detained person. It also requires interpreters to be provided for medical examinations if a person cannot communicate adequately in English. The Division also provides for primary carers under the proposed Act, including the process for nominating primary carers.

#### **Division 2      Notification and information sharing**

The Division (proposed sections 73–79) contains provisions setting out the rights of patients and persons detained in mental health facilities, and their primary carers, to be notified of events affecting those patients and persons and of their rights under the proposed Act. The rights include the right to be informed about medication and medication dosages, to be given an oral and written explanation of rights under the Act, to be notified about mental health inquiries and appeal rights and to be consulted in discharge planning. In addition, a primary carer will have the right to be notified of a person's initial detention and other events affecting the person, including absences, transfer to other facilities, medical treatments and re-classification.

#### **Division 3      Transfer of patients**

The Division (proposed sections 80 and 81) enables the transfer of patients and persons to and from mental health facilities and other facilities. It also sets out the persons who may take or transfer a person to or from a mental health facility, including members of staff of the NSW Health Service, ambulance officers and police officers, and confers powers on them to use reasonable force and to restrain persons in ways that are reasonably necessary in the circumstances. A search power is also conferred on these persons.

## **Part 2 Mental health treatments**

### **Division 1 Preliminary**

The Division (proposed section 82) defines expressions used in the proposed Part.

### **Division 2 General provisions about mental health treatment**

The Division (proposed sections 83–86) prohibits the administration of deep sleep therapy, insulin coma therapy, psychosurgery and other prescribed operations or treatments and provides for the regulation of the administration of drugs. It also authorises an authorised medical officer (subject to the proposed Act) to treat patients or persons detained in mental health facilities. It will be an offence for a medical practitioner to administer excessive or inappropriate dosages of drugs in relation to a mental illness or mental condition. An internal review system must be established to monitor and review the prescription of drugs in a mental health facility.

### **Division 3 Electro convulsive therapy**

The Division (proposed sections 87–97) regulates the administration of electro convulsive therapy. Any such treatment must be given in accordance with the Division, which specifies that it must be given by a medical practitioner in the presence of at least 1 other medical practitioner. Of the medical practitioners, 1 must be experienced in electro convulsive therapy and 1 must be experienced in anaesthesia. The Division specifies the circumstances in which such treatment may be administered without consent to an involuntary patient, after an inquiry by the Tribunal, and a finding that informed consent has been given or that the treatment is a reasonable and proper treatment and is necessary and desirable for the safety and welfare of the patient. For a person other than an involuntary patient, the Division requires treatment to be given only after informed consent is given and a certificate is given by at least 2 medical practitioners (including at least 1 psychiatrist) that the treatment is reasonable and proper treatment to be administered to the person and necessary or desirable for the person's safety or welfare. The Tribunal may determine whether informed consent has been given. A determination of the Tribunal has effect for 6 months unless another period is specified in the determination. A register of treatments is to be kept in relation to each place at which electro convulsive therapy is administered.

## **Part 3 Other medical treatments**

The Part (proposed sections 98–104) regulates the performance of certain surgical operations on persons involuntarily detained in a mental health facility and the performance of special medical treatment (including procedures to render a person infertile) on such persons. A medical practitioner authorised by the Director-General may, in the case of an emergency, consent to the performance of a surgical operation on a patient where the patient is incapable of giving, or fails or refuses to give, consent. A medical practitioner may carry out special medical treatment on a patient,

in case of emergency. Provision is made, in other cases, for an authorised medical officer of a mental health facility to apply, after the giving of notice to certain persons, to the Tribunal for consent to perform surgical operations or to the Tribunal for consent to carry out special medical treatment in relation to persons involuntarily detained in a mental health facility.

## **Chapter 5 Administration**

### **Part 1 Administrative objectives and functions**

The Part (proposed sections 105–108) sets out the objectives of the New South Wales public health system in relation to mental health services as well as the general functions of the Director-General under the proposed Act. It also contains other administrative provisions, including the Director-General's delegation power and the requirement for the Director-General to prepare an annual report for the Minister about mental health services and other matters.

### **Part 2 Mental health facilities**

#### **Division 1 Declared mental health facilities**

The Division (proposed sections 109–114) provides for the establishment of declared mental health facilities under the proposed Act and the appointment of medical superintendents and deputy medical superintendents of those facilities. It also provides for the appointment of directors and deputy directors of community treatment and psychiatric case managers for the purposes of community treatment orders.

#### **Division 2 Private mental health facilities**

The Division (proposed sections 115–127) provides for the licensing of private mental health facilities, for medical supervision of those facilities and for the appointment of medical superintendents and deputy medical superintendents to those facilities.

### **Part 3 Official visitors and accredited persons**

The Part (proposed sections 128–136) provides for the appointment and functions of official visitors and accredited persons. Official visitors and a Principal official visitor may be appointed by the Minister to inspect mental health facilities and make inquiries with regard to the care, treatment and control of patients. Among other functions, the Principal official visitor is to oversee the official visitor program and to act as an advocate to the Minister for consumers of mental health care. The Part sets out the inspection obligations of official visitors and the requirement for medical superintendents and administrators to facilitate the inspection of premises and

interviews of patients or detained persons and to produce relevant registers and other records.

The Part also provides for the appointment of accredited persons by the Director-General.

## **Part 4 Inspection powers**

The Part (proposed sections 137–139) enables the Director-General to inquire into the administration, management and services of a mental health facility and, for that purpose, to cause inspections of facilities to be carried out. The Part sets out the powers of the authorised officers who carry out the inspections to require persons to attend and give evidence or produce books and other records and contains a provision protecting a person who gives self-incriminating evidence.

# **Chapter 6 Mental Health Review Tribunal**

## **Part 1 The Tribunal**

The Part (proposed sections 140–148) constitutes the Mental Health Review Tribunal and makes general provision in relation to the Tribunal, including provision for the qualifications of members to be appointed to the Tribunal and the appointment of a Registrar and staff. The Part also gives proceedings of the Tribunal protection under the *Defamation Act 2005* and enables the President of the Tribunal to delegate his or her functions.

## **Part 2 Procedures of the Tribunal**

The Part (proposed sections 149–162) sets out matters relating to the composition of the Tribunal when exercising its functions and to procedure at meetings of the Tribunal. The Part prohibits a member from determining that a person is a mentally ill person or a mentally disordered person unless so satisfied on the balance of probabilities. Unless the Tribunal otherwise orders, the Tribunal's proceedings are to be open to the public. The Part contains provisions relating to rights of appearance, adjournments, inspection of medical records, the production of evidence for the Tribunal, the use of interpreters and recording proceedings. Regulations may be made for or with respect to various aspects of Tribunal proceedings, including the form of representations by victims. It will be an offence to refuse, neglect or for any reason fail to obey or comply with an order, direction, decision or determination of the Tribunal. It will also be an offence to publish or broadcast the name of persons involved in Tribunal reviews and other proceedings.



## **Chapter 7 Jurisdiction of Supreme Court**

The Chapter (proposed sections 163–168) provides for the making of appeals to the Supreme Court from determinations of the Tribunal or if the Tribunal refuses or fails to make a determination. The Chapter also provides for the appointment of assessors having appropriate qualifications and experience to sit with the Court on the hearing of appeals in order to assist in, but not to adjudicate on, any matter relevant to the determination of the appeal. Jurisdiction is also conferred on the Court to order a person who is detained in a mental health facility to be brought before the Court for examination and to order the person's release from the facility (or transfer, in the case of a forensic patient) if the Court is not satisfied that the person meets the criteria for involuntary detention in a mental health facility.

## **Chapter 8 Interstate application of mental health laws**

### **Part 1 Preliminary**

The Part (proposed sections 169–173) sets out the objects of the proposed Chapter and defines expressions used in the proposed Chapter. It also enables the Minister to enter into agreements with Ministers of other States and Territories to participate in reciprocal arrangements relating to the transfer, detention, treatment and apprehension of mental health patients and the interstate operation and enforcement of community treatment orders. It also provides for the declaration of interstate mental health laws for the purposes of the proposed Chapter. The remainder of the proposed Part deals with the actions that may be taken under any such reciprocal arrangements.

### **Part 2 Transfer of patients and persons**

#### **Division 1 Transfer of persons from this State**

The Division (proposed sections 174–176) enables people who may be taken to and detained in a mental health facility in this State to be taken to mental health facilities in other States or Territories by people authorised to do so in this State or the other State or Territory concerned. The Division also provides for the transfer of patients from this State to other States or Territories.

#### **Division 2 Transfer of persons to this State**

The Division (proposed sections 177–180) enables people who may be taken to and detained in a mental health facility in another State or Territory to be taken to mental health facilities in this State by people authorised to do so in this State or the other State or Territory concerned. The Division also provides for the transfer of interstate involuntary patients to mental health facilities in this State.

### **Part 3 Community treatment orders and other orders**

The Part (proposed sections 181–184) enables community treatment orders to be made in this State for interstate residents who are to be treated in this State and provides for the implementation, in this State, of community treatment orders made in other States or Territories.

### **Part 4 Apprehension of persons absent from mental health facility or in breach of orders**

The Part (proposed sections 185–187) enables interstate warrants and orders to apprehend interstate mental health patients to be recognised and enforced in this State and provides for the detention of patients apprehended under such warrants or orders in mental health facilities in this State.

### **Chapter 9 Miscellaneous**

The Chapter (proposed sections 188–201) contains miscellaneous provisions, including provisions relating to the disclosure of information, exclusion from liability of police officers, health care professionals and ambulance officers, service of documents, approved forms, the role of the objects provisions and regulation-making powers. The Chapter also provides for a 5-year review of the Act and repeals the *Mental Health Act 1990*.

### **Schedule 1 Medical certificate as to examination or observation of person**

The Schedule contains the form of the mental health certificate for use for the detention of a person in a declared mental health facility.

### **Schedule 2 Mental health inquiries**

The Schedule contains procedural provisions relating to the conduct of mental health inquiries by Magistrates to determine whether persons should be detained in mental health facilities as involuntary patients.

### **Schedule 3 Statement of rights**

The Schedule contains the statement of rights which is to be given to a person as soon as practicable after a person is taken to and detained in a mental health facility, or it is decided to take steps to detain a person already in a facility.

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## **Schedule 4      Provisions relating to Principal official visitor and official visitors**

The Schedule contains provisions relating to the remuneration and tenure of office of the Principal official visitor and official visitors.

## **Schedule 5      Provisions relating to members of Tribunal**

The Schedule contains provisions relating to the members of the Tribunal.

## **Schedule 6      Savings, transitional and other provisions**

The Schedule contains savings, transitional and other provisions consequent on the enactment of the proposed Act.

## **Schedule 7      Amendment of other Acts**

The Schedule makes consequential amendments to other Acts. The Schedule inserts into the *Mental Health (Criminal Procedure) Act 1990*, with only consequential changes, the provisions of the former *Mental Health Act 1990* relating to the review, detention, care, treatment and release of forensic patients.

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Mental Health Bill 2006

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New South Wales

## Mental Health Bill 2006

No , 2006

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### **A Bill for**

An Act to make provision with respect to the care, treatment and control of mentally ill and mentally disordered persons and other matters relating to mental health; and for other purposes.

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The Legislature of New South Wales enacts: 1

## Chapter 1 Preliminary 2

### 1 Name of Act 3

This Act is the *Mental Health Act 2006*. 4

### 2 Commencement 5

This Act commences on a day or days to be appointed by proclamation. 6

### 3 Objects of Act 7

The objects of this Act are: 8

- (a) to provide for the care, treatment and control of persons who are mentally ill or mentally disordered, and 9  
10
- (b) to facilitate the care, treatment and control of those persons through community care facilities, and 11  
12
- (c) to facilitate the provision of hospital care for those persons on a voluntary basis where appropriate and, in a limited number of situations, on an involuntary basis, and 13  
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15
- (d) while protecting the civil rights of those persons, to give an opportunity for those persons to have access to appropriate care, and 16  
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- (e) to facilitate the involvement of those persons, and persons caring for them, in decisions involving appropriate care, treatment and control. 19  
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**Note.** See also section 68 which contains principles for care and treatment and section 105 which sets out objectives for the New South Wales public health system. 22  
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24

### 4 Definitions 25

- (1) In this Act: 26

**accredited person** means a person accredited under section 136. 27

**ambulance officer** means a member of staff of the NSW Health Service who is authorised by the chief executive of the Ambulance Service of NSW to exercise functions of an ambulance officer under this Act. 28  
29  
30

**assessable person**—see section 17. 31

**authorised medical officer** of a mental health facility means: 32

- (a) the medical superintendent of the mental health facility, or 33



- (b) a medical officer, nominated by the medical superintendent for the purposes of this Act, attached to the mental health facility concerned.

**community treatment order** means a community treatment order in force under Part 3 of Chapter 3.

**Court** means the Supreme Court.

**declared mental health facility** means premises subject to an order in force under section 109.

**Deputy President** means a person appointed as a Deputy President of the Tribunal.

**determination of the Tribunal** includes an order, direction or decision of the Tribunal.

**Director-General** means the Director-General of the Department of Health.

**director of community treatment**—see section 50.

**exercise** a function includes perform a duty.

**forensic patient** means a person:

- (a) who is detained in a mental health facility, correctional centre or other place, or released from custody subject to conditions, pursuant to an order:
- (i) under section 10 (3) (c), 14, 17 (3), 25, 27 or 39 of the *Mental Health (Criminal Procedure) Act 1990*, or
  - (ii) an order under section 7 (4) of the *Criminal Appeal Act 1912* (including that subsection as applied by section 5AA (5) of that Act), or
- (b) who is granted bail pursuant to section 14 (b) (ii) or 17 (2) of the *Mental Health (Criminal Procedure) Act 1990*, or
- (c) who is detained in a mental health facility pending the person's committal for trial for an offence or pending the person's trial for an offence, or
- (d) who has been transferred to a mental health facility while serving a sentence of imprisonment and who has not been classified by the Tribunal as an involuntary patient.

**function** includes a power, authority or duty.

**guardian**, in relation to the exercise of any function under this Act by the guardian of a person under guardianship, means a guardian who is able to exercise that function.

<b><i>involuntary patient</i></b> means:	1
(a) a person who is ordered to be detained as an involuntary patient by a Magistrate after a mental health inquiry or by the Tribunal, or	2 3 4
(b) a forensic patient who is re-classified as an involuntary patient.	5
<b><i>medical superintendent</i></b> :	6
(a) of a declared mental health facility, means the medical practitioner appointed, under section 111, as medical superintendent of the facility, or	7 8 9
(b) of a private mental health facility, means the medical practitioner appointed, under section 124, as medical superintendent of the facility.	10 11 12
<b><i>mental health certificate</i></b> —see section 17.	13
<b><i>mental health facility</i></b> means a declared mental health facility or a private mental health facility.	14 15
<b><i>mental health inquiry</i></b> means an inquiry conducted by a Magistrate under Division 3 of Part 2 of Chapter 3.	16 17
<b><i>mental illness</i></b> means a condition that seriously impairs, either temporarily or permanently, the mental functioning of a person and is characterised by the presence in the person of any one or more of the following symptoms:	18 19 20 21
(a) delusions,	22
(b) hallucinations,	23
(c) serious disorder of thought form,	24
(d) a severe disturbance of mood,	25
(e) sustained or repeated irrational behaviour indicating the presence of any one or more of the symptoms referred to in paragraphs (a)–(d).	26 27 28
<b><i>mentally disordered person</i></b> —see section 15.	29
<b><i>mentally ill person</i></b> —see section 14.	30
<b><i>parent</i></b> , of a child, means any person having parental responsibility (within the meaning of the <i>Children and Young Persons (Care and Protection) Act 1998</i> ) for the child.	31 32 33
<b><i>patient</i></b> means a person who is admitted to a mental health facility in accordance with this Act and who is in the facility following the person's admission, and includes a person so admitted while absent from the facility either with or without leave of absence.	34 35 36 37
<b><i>person under guardianship</i></b> means a person under guardianship within the meaning of the <i>Guardianship Act 1987</i> .	38 39
<b><i>premises</i></b> includes any land, building and part of any building.	40

- 
- President*** means the President of the Tribunal. 1
- primary carer***—see section 71. 2
- private mental health facility*** means premises subject to a licence under Division 2 of Part 2 of Chapter 5. 3
- spouse*** means: 4
- (a) a husband or wife, or 5
- (b) the other party to a de facto relationship within the meaning of the *Property (Relationships) Act 1984*, 6
- but where more than one person would qualify as a spouse, means only the last person to so qualify. 7
- surgical operation***—see section 98. 8
- Tribunal*** means the Mental Health Review Tribunal constituted under Chapter 6. 9
- voluntary patient*** means: 10
- (a) a person who has been admitted to a mental health facility under Chapter 2, or 11
- (b) a person who has been re-classified as a voluntary patient under this Act. 12
- (2) Notes included in this Act do not form part of this Act. 13

<b>Chapter 2</b>	<b>Voluntary admission to facilities</b>	1
<b>5</b>	<b>Admission on own request</b>	2
(1)	A person may be admitted to a mental health facility as a voluntary patient.	3 4
(2)	An authorised medical officer may refuse to admit a person to a mental health facility as a voluntary patient if the officer is not satisfied that the person is likely to benefit from care or treatment as a voluntary patient.	5 6 7
(3)	A person may be admitted to a mental health facility as a voluntary patient whether or not the person is a mentally ill person or a mentally disordered person.	8 9 10
<b>6</b>	<b>Voluntary admission of children</b> (cf 1990 Act, ss 13–15)	11
(1)	An authorised medical officer must, as soon as practicable after admitting a person under the age of 16 years as a voluntary patient, take all reasonably practicable steps to notify a parent of the person of the admission.	12 13 14 15
(2)	An authorised medical officer must discharge a person of 14 or 15 years of age who has been admitted as a voluntary patient if a parent of the person objects to the admission to the officer, unless the person elects to continue as a voluntary patient.	16 17 18 19
(3)	A person under the age of 14 years must not be admitted as a voluntary patient if a parent of the person objects to the admission to an authorised medical officer.	20 21 22
(4)	An authorised medical officer must discharge a person under the age of 14 years who has been admitted as a voluntary patient if a parent of the person requests that the person be discharged.	23 24 25
<b>7</b>	<b>Voluntary admission of persons under guardianship</b> (cf 1990 Act, s 16)	26
(1)	A person under guardianship may be admitted to a mental health facility as a voluntary patient if the guardian of the person makes a request to an authorised medical officer.	27 28 29
(2)	A person under guardianship must not be admitted as a voluntary patient if the person's guardian objects to the admission to the authorised medical officer.	30 31 32
(3)	An authorised medical officer must discharge a person under guardianship who has been admitted as a voluntary patient if the person's guardian requests that the person be discharged.	33 34 35

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<b>8</b>	<b>Discharge of voluntary patients</b> (cf 1990 Act, s 65)	1
(1)	An authorised medical officer may discharge a voluntary patient at any time if the officer is of the opinion that the patient is not likely to benefit from further care or treatment as a voluntary patient.	2 3 4
(2)	A voluntary patient may discharge himself or herself from or leave a mental health facility at any time.	5 6
(3)	An authorised medical officer must give notice of the discharge of a voluntary patient who is a person under guardianship to the person's guardian.	7 8 9
	<b>Note.</b> Section 79 provides for appropriate information relating to follow-up care to be provided to patients being discharged.	10 11
<b>9</b>	<b>Review of voluntary patients</b> (cf 1990 Act, s 63)	12
(1)	The Tribunal must review, at least once every 12 months, the case of each voluntary patient who has been receiving care or treatment, or both, as a voluntary patient in a mental health facility for a continuous period of more than 12 months.	13 14 15 16
(2)	In addition to any other matters it considers on a review, the Tribunal is to consider whether the patient consents to continue as a voluntary patient.	17 18 19
(3)	The Tribunal may on a review order the discharge of the patient from the mental health facility.	20 21
(4)	The Tribunal may defer the operation of an order for the discharge of a patient for a period of up to 14 days, if the Tribunal thinks it is in the best interests of the patient to do so.	22 23 24
(5)	The medical superintendent of a mental health facility must notify the Tribunal of the name of any voluntary patient whose case the Tribunal is required to review.	25 26 27
<b>10</b>	<b>Detention of voluntary patients in mental health facilities</b> (cf 1990 Act, s 18A)	28 29
(1)	An authorised medical officer may do all necessary things to cause a voluntary patient to be detained in a mental health facility under Part 2 of Chapter 3 if the officer considers the person to be a mentally ill person or a mentally disordered person.	30 31 32 33
(2)	Any such patient is taken to have been detained in the facility under section 19 when the authorised medical officer takes action to detain the patient.	34 35 36

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<b>11</b>	<b>Review of decisions made by authorised medical officer to refuse or discharge voluntary patient</b> (cf 1990 Act, s 19)	1
		2
(1)	This section applies to a decision made under this Chapter by an authorised medical officer (other than a medical superintendent) to refuse a person admission to a mental health facility as a voluntary patient or to discharge a person as a voluntary patient.	3
		4
		5
		6
(2)	The person affected by a decision may apply to the medical superintendent for a review of the decision.	7
		8
(3)	The medical superintendent must review a decision as soon as practicable after receiving an application for its review and may confirm the decision, admit or discharge the person as a voluntary patient or take any other action under this Act that the medical superintendent thinks fit.	9
		10
		11
		12
		13

<b>Chapter 3</b>	<b>Involuntary admission and treatment in and outside facilities</b>	1
		2
<b>Part 1</b>	<b>Requirements for involuntary admission, detention and treatment</b>	3
		4
<b>12</b>	<b>General restrictions on detention of persons</b>	5
(1)	A patient or other person must not be involuntarily admitted to, or detained in or continue to be detained in, a mental health facility unless an authorised medical officer is of the opinion that:	6
		7
		8
(a)	the person is a mentally ill person or a mentally disordered person, and	9
		10
(b)	no other care of a less restrictive kind is appropriate and reasonably available to the person.	11
		12
(2)	If an authorised medical officer is not of that opinion about a patient or other person at a mental health facility, the officer must refuse to detain, and must not continue to detain, the person.	13
		14
		15
(3)	An authorised medical officer may, immediately on discharging a patient or person who has been detained in a mental health facility, admit that person as a voluntary patient.	16
		17
		18
<b>13</b>	<b>Criteria for involuntary admission etc as mentally ill person or mentally disordered person</b> (cf 1990 Act, s 8)	19
		20
	A person is a mentally ill person or a mentally disordered person for the purpose of:	21
		22
(a)	the involuntary admission of the person to a mental health facility or the detention of the person in a facility under this Act, or	23
		24
(b)	determining whether the person should be subject to a community treatment order or be detained or continue to be detained involuntarily in a mental health facility,	25
		26
		27
	if, and only if, the person satisfies the relevant criteria set out in this Part.	28
		29
<b>14</b>	<b>Mentally ill persons</b> (cf 1990 Act, s 9)	30
(1)	A person is a mentally ill person if the person is suffering from mental illness and, owing to that illness, there are reasonable grounds for believing that care, treatment or control of the person is necessary:	31
		32
		33
(a)	for the person's own protection from serious harm, or	34
		35
(b)	for the protection of others from serious harm.	

(2)	In considering whether a person is a mentally ill person, the continuing condition of the person, including any likely deterioration in the person's condition and the likely effects of any such deterioration, are to be taken into account.	1 2 3 4
<b>15</b>	<b>Mentally disordered persons</b> (cf 1990 Act, s 10)	5
	A person (whether or not the person is suffering from mental illness) is a mentally disordered person if the person's behaviour for the time being is so irrational as to justify a conclusion on reasonable grounds that temporary care, treatment or control of the person is necessary:	6 7 8 9
	(a) for the person's own protection from serious physical harm, or	10
	(b) for the protection of others from serious physical harm.	11
<b>16</b>	<b>Certain words or conduct may not indicate mental illness or disorder</b> (cf 1990 Act, s 11)	12 13
(1)	A person is not a mentally ill person or a mentally disordered person merely because of any one or more of the following:	14 15
	(a) the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular political opinion or belief,	16 17 18
	(b) the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular religious opinion or belief,	19 20 21
	(c) the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular philosophy,	22 23
	(d) the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular sexual preference or sexual orientation,	24 25 26
	(e) the person engages in or refuses or fails to engage in, or has engaged in or refused or failed to engage in, a particular political activity,	27 28 29
	(f) the person engages in or refuses or fails to engage in, or has engaged in or refused or failed to engage in, a particular religious activity,	30 31 32
	(g) the person engages in or has engaged in a particular sexual activity or sexual promiscuity,	33 34
	(h) the person engages in or has engaged in immoral conduct,	35
	(i) the person engages in or has engaged in illegal conduct,	36
	(j) the person has developmental disability of mind,	37
	(k) the person takes or has taken alcohol or any other drug,	38



(l)	the person engages in or has engaged in anti-social behaviour,	1
(m)	the person has a particular economic or social status or is a member of a particular cultural or racial group.	2 3
(2)	Nothing in this Part prevents, in relation to a person who takes or has taken alcohol or any other drug, the serious or permanent physiological, biochemical or psychological effects of drug taking from being regarded as an indication that a person is suffering from mental illness or other condition of disability of mind.	4 5 6 7 8
<b>Part 2</b>	<b>Involuntary detention and treatment in mental health facilities</b>	9 10
<b>Division 1</b>	<b>Preliminary</b>	11
<b>17</b>	<b>Definitions</b>	12
	In this Part:	13
	<i>assessable person</i> means a person detained in a declared mental health facility for whom a mental health inquiry is required to be held under this Part.	14 15 16
	<i>mental health certificate</i> means a certificate given under section 19.	17
<b>Division 2</b>	<b>Admission to and initial detention in mental health facilities</b>	18 19
<b>18</b>	<b>When a person may be detained in mental health facility</b>	20
(1)	A person may be detained in a declared mental health facility in the following circumstances:	21 22
(a)	on a mental health certificate given by a medical practitioner or accredited person (see section 19),	23 24
(b)	after being brought to the facility by an ambulance officer (see section 20),	25 26
(c)	after being apprehended by a police officer (see section 22),	27
(d)	after an order for an examination and an examination or observation by a medical practitioner or accredited person (see section 23),	28 29 30
(e)	on the order of a Magistrate or authorised officer (see section 24),	31
(f)	after a transfer from another health facility (see section 25),	32
(g)	on a written request made to the authorised medical officer by a primary carer, relative or friend of the person (see section 26).	33 34

- |           |  |                                  |
|-----------|--|----------------------------------|
| (2)       | A person may be detained, under a provision of this Part, in a health facility that is not a declared mental health facility if it is necessary to do so to provide medical treatment or care to the person for a condition or illness other than a mental illness or other mental condition.  | 1<br>2<br>3<br>4                 |
| (3)       | In this Act, a reference to taking to and detaining in a mental health facility includes, in relation to a person who is at a mental health facility, but not detained in the mental health facility in accordance with this Act, the detaining of the person in the mental health facility.   | 5<br>6<br>7<br>8                 |
|           | <b>Note.</b> A person taken to and detained in a mental health facility must be provided with certain information, including a statement of the person's rights (see section 74).  | 9<br>10<br>11                    |
| <b>19</b> | <b>Detention on certificate of medical practitioner or accredited person</b> (cf 1990 Act, s 21)   | 12<br>13                         |
| (1)       | A person may be taken to and detained in a declared mental health facility on the basis of a certificate about the person's condition issued by a medical practitioner or accredited person. The certificate is to be in the form set out in Part 1 of Schedule 1.   | 14<br>15<br>16<br>17             |
| (2)       | A mental health certificate may be given about a person only if the medical practitioner or accredited person:   | 18<br>19                         |
| (a)       | has personally examined or observed the person's condition immediately before or shortly before completing the certificate, and  | 20<br>21<br>22                   |
| (b)       | is of the opinion that the person is a mentally ill person or a mentally disordered person, and  | 23<br>24                         |
| (c)       | is satisfied that no other appropriate means for dealing with the person is reasonably available, and that involuntary admission and detention are necessary, and  | 25<br>26<br>27                   |
| (d)       | is not the primary carer or a near relative of the person.   | 28                               |
| (3)       | A mental health certificate may contain a police assistance endorsement that police assistance is required if the person giving the certificate is of the opinion that there are serious concerns relating to the safety of the person or other persons if the person is taken to a mental health facility without the assistance of a police officer. The endorsement is to be in the form set out in Part 2 of Schedule 1. | 29<br>30<br>31<br>32<br>33<br>34 |
| (4)       | A mental health certificate may not be used to admit or detain a person in a facility:   | 35<br>36                         |
| (a)       | in the case of a person certified to be a mentally ill person, more than 5 days after it is given, or  | 37<br>38                         |
| (b)       | in the case of a person certified to be a mentally disordered person, more than one day after it is given.   | 39<br>40                         |

(5)	In this section:	1
	<i>near relative</i> of a person means a parent, brother, sister, child or spouse of the person and any other person prescribed for the purposes of this definition.	2 3 4
<b>20</b>	<b>Detention on information of ambulance officer</b>	5
(1)	An ambulance officer who provides ambulance services in relation to a person may take the person to a declared mental health facility if the officer believes on reasonable grounds that the person appears to be mentally ill or mentally disturbed and that it would be beneficial to the person's welfare to be dealt with in accordance with this Act.	6 7 8 9 10
(2)	An ambulance officer may request police assistance if of the opinion that there are serious concerns relating to the safety of the person or other persons if the person is taken to a mental health facility without the assistance of a police officer.	11 12 13 14
<b>21</b>	<b>Police assistance</b>	15
(1)	A police officer to whose notice a police assistance endorsement on a mental health certificate, or a request for assistance by an ambulance officer under this Division, is brought must, if practicable:	16 17 18
(a)	apprehend and take or assist in taking the person the subject of the certificate or request to a declared mental health facility, or	19 20
(b)	cause or make arrangements for some other police officer to do so.	21 22
(2)	A police officer may enter premises to apprehend a person under this section, and may apprehend any such person, without a warrant and may exercise any powers conferred by section 81 on a person who is authorised under that section to take a person to a mental health facility or another health facility.	23 24 25 26 27
	<b>Note.</b> Section 81 sets out the persons who may take a person to a mental health facility and their powers when doing so.	28 29
<b>22</b>	<b>Detention after apprehension by police</b> (cf 1990 Act, s 24)	30
(1)	A police officer who, in any place, finds a person who appears to be mentally ill or mentally disturbed may apprehend the person and take the person to a declared mental health facility if the officer believes on reasonable grounds that:	31 32 33 34
(a)	the person is committing or has recently committed an offence or that the person has recently attempted to kill himself or herself or that it is probable that the person will attempt to kill himself or herself or any other person or attempt to cause serious physical harm to himself or herself or any other person, and	35 36 37 38 39

(b)	it would be beneficial to the person's welfare to be dealt with in accordance with this Act, rather than otherwise in accordance with law.	1 2 3
(2)	A police officer may apprehend a person under this section without a warrant and may exercise any powers conferred by section 81 on a person who is authorised under that section to take a person to a mental health facility or another health facility.	4 5 6 7
<b>23</b>	<b>Detention after order for medical examination or observation</b> (cf 1990 Act, s 27)	8 9
(1)	A Magistrate or authorised officer may, by order, authorise a medical practitioner or accredited person to visit and to personally examine or personally observe a person to ascertain whether a mental health certificate should be issued for the person.	10 11 12 13
(2)	An order may be made if the Magistrate or officer is satisfied, by evidence on oath, that:	14 15
(a)	the person may be a mentally ill person or a mentally disordered person, and	16 17
(b)	because of physical inaccessibility, the person could not otherwise be personally examined or personally observed.	18 19
(3)	The order may also authorise any other person (including a police officer) who may be required to assist the medical practitioner or accredited person to accompany the medical practitioner or accredited person.	20 21 22 23
(4)	A person authorised to visit a person or accompany another person may enter premises, if need be by force, in order to enable the examination or observation to be carried out.	24 25 26
(5)	A person who is examined or observed under this section may be detained in accordance with section 19.	27 28
(6)	A person who takes action under an order must, as soon as practicable after taking the action, notify the person who made the order in writing of the action.	29 30 31
(7)	In this section:	32
	<b>authorised officer</b> means an authorised officer within the meaning of the <i>Criminal Procedure Act 1986</i> .	33 34
<b>24</b>	<b>Detention on order of Magistrate or bail officer</b> (cf 1990 Act, s 25)	35
	A person may be taken to and detained in a declared mental health facility in accordance with an order made under section 33 of the <i>Mental Health (Criminal Procedure) Act 1990</i> .	36 37 38

<b>25</b>	<b>Detention after transfer from another health facility</b>	1
(1)	A person may be transferred from a health facility to a declared mental health facility and detained in the mental health facility if a medical officer of the health facility, or the authorised medical officer of the mental health facility, considers the person to be a mentally ill person or a mentally disordered person.	2 3 4 5 6
(2)	Any such person is taken to have been detained in the declared mental health facility under section 19 when the person is transferred to the facility.	7 8 9
<b>26</b>	<b>Detention on request of primary carer, relative or friend</b> (cf 1990 Act, s 23)	10
(1)	A person may be detained in a declared mental health facility on a written request made to the authorised medical officer by the primary carer or a relative or friend of the person.	11 12 13
(2)	An authorised medical officer must not detain any such person unless the officer is satisfied that, because of the distance required in order for the person to be examined and the urgency of the circumstances, it is not reasonably practicable to have the person detained on the basis of a mental health certificate.	14 15 16 17 18
<b>27</b>	<b>Steps for medical examination requirements for ongoing detention in mental health facility</b>	19 20
	The following steps must be taken in relation to a person who is detained in a mental health facility under this Division:	21 22
(a)	<b>Step 1 Initial examination by authorised medical officer</b>	23
	An authorised medical officer must examine the person as soon as practicable (but not later than 12 hours) after the person arrives at the facility or after the person is detained after being a voluntary patient.	24 25 26 27
	The person must not be detained after the examination unless the officer certifies that, in the officer's opinion, the person is a mentally ill person or a mentally disordered person.	28 29 30
(b)	<b>Step 2 Examination by second medical practitioner</b>	31
	The authorised medical officer must cause the person to be examined by another medical practitioner as soon as possible after giving the certificate in step 1. The second examiner must be a psychiatrist if the authorised medical officer is not a psychiatrist.	32 33 34 35 36
	The second examiner must notify the authorised medical officer in the form prescribed by the regulations if of the opinion that the person is a mentally ill person or a mentally disordered person or if not able to form such an opinion.	37 38 39 40

- 
- (c) **Step 3 Examination by third medical practitioner if second examiner does not find person to be mentally ill or mentally disordered** 1  
2  
3  
If the second examiner is not of the opinion that the person is a 4  
mentally ill person or a mentally disordered person, the 5  
authorised medical officer must cause the person to be examined 6  
by a medical practitioner who is a psychiatrist, as soon as 7  
practicable after being notified of that opinion. 8  
The third examiner must notify the authorised medical officer in 9  
the form prescribed by the regulations if of the opinion that the 10  
person is a mentally ill person or a mentally disordered person. 11
- (d) **Step 4 Mental health inquiry or discharge** 12  
An authorised medical officer must bring the person before a 13  
Magistrate for a mental health inquiry if: 14  
(i) the person is found to be a mentally ill person by an 15  
authorised medical officer on initial examination in step 1, 16  
and to be a mentally ill person or a mentally disordered 17  
person on examination in step 2 or step 3, or 18  
(ii) the person is found to be a mentally disordered person by 19  
an authorised medical officer on initial examination in step 20  
1, and to be a mentally ill person on examination in step 2 21  
or step 3. 22  
The person must be brought before a Magistrate as soon as 23  
practicable after the authorised medical officer is notified of the 24  
relevant finding of the second or third examiner. 25  
If the third examiner does not find that the person is a mentally ill 26  
person or a mentally disordered person, the person must not be 27  
detained after the third examination. 28
- (e) **Step 5 Mentally disordered persons** 29  
If a person is found to be a mentally disordered person by an 30  
authorised medical officer on initial examination in step 1, and is 31  
found to be a mentally disordered person on examination in step 32  
2 or step 3, the person may be detained in the mental health 33  
facility as a mentally disordered person. 34
- 28 Obligations of examining medical practitioners** 35  
(1) An authorised medical officer or other medical practitioner who 36  
examines a person detained in a mental health facility under this 37  
Division may take into account his or her own observations and any 38  
other available evidence that he or she considers reliable and relevant in 39  
forming an opinion as to whether the person is a mentally ill person or 40  
a mentally disordered person. 41

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(2)	A medical practitioner on whose certificate or request a person has been admitted to a mental health facility must not examine the person under section 27.	1 2 3
<b>29</b>	<b>Treatment of persons detained in mental health facilities</b> (cf 1990 Act, s 31)	4 5
	A person who authorises the administration of any medication to a person detained in a mental health facility under this Division:	6 7
	(a) must have due regard to the possible effects of the administration of the medication, and	8 9
	(b) must prescribe the minimum medication, consistent with proper care, to ensure that the person is not prevented from communicating adequately with any other person who may be engaged to represent the person at a mental health inquiry.	10 11 12 13
<b>30</b>	<b>Assessable persons may be reclassified as voluntary patients</b> (cf 1990 Act, s 54)	14 15
	An authorised medical officer may classify an assessable person as a voluntary patient at any time before a mental health inquiry is held about the person, but only if:	16 17 18
	(a) the authorised medical officer is of the opinion that the person is likely to benefit from care or treatment as a voluntary patient, and	19 20
	(b) the patient agrees to be so classified or, if the person is a person under guardianship or is under the age of 14 years, the person is admitted in accordance with the procedures under this Act applicable to admitting any such person as a voluntary patient.	21 22 23 24
<b>31</b>	<b>Limited detention of mentally disordered persons</b> (cf 1990 Act, s 35)	25
(1)	A person detained as a mentally disordered person under step 5 in section 27 (e) must not be detained in a mental health facility for a continuous period of more than 3 days (not including weekends and public holidays).	26 27 28 29
(2)	If an authorised medical officer of a mental health facility is of the opinion that an assessable person has ceased to be a mentally ill person but is a mentally disordered person, the person must not be further detained in the facility for a continuous period of more than 3 days (not including weekends and public holidays).	30 31 32 33 34
(3)	An authorised medical officer must examine a mentally disordered person detained in a mental health facility at least once every 24 hours.	35 36
(4)	The person must not be further detained in the mental health facility if, on any such examination, the authorised medical officer is of the opinion that the person is not a mentally disordered person or a mentally	37 38 39

	ill person or that other care of a less restrictive kind is appropriate and reasonably available to the person.	1 2
(5)	A person must not be admitted to and detained in a mental health facility on the grounds that the person is a mentally disordered person on more than 3 occasions in any 1 calendar month.	3 4 5
<b>32</b>	<b>Limited further detention of persons taken to facility by police or after Magistrate's or bail officer's order</b> (cf 1990 Act, ss 36, 37, 37A)	6 7
(1)	This section applies to a person detained in a mental health facility under this Part who is required not to be detained or further detained in the facility and who was taken to the facility:	8 9 10
(a)	by a police officer under this Division after being apprehended by a police officer because the officer believed the person to be committing or to have recently committed an offence, or	11 12 13
(b)	on the order of a Magistrate or an authorised officer under section 33 of the <i>Mental Health (Criminal Procedure) Act 1990</i> .	14 15
(2)	An authorised medical officer must release the person into the custody of any police officer who is present at the mental health facility to ascertain the results of any examination or examinations of the person.	16 17 18
(3)	If a police officer is not so present when the authorised medical officer becomes aware that the person must not be detained or further detained, the authorised medical officer must, as soon as practicable, notify a police officer at the appropriate police station that the person will not be further detained.	19 20 21 22 23
(4)	The authorised medical officer may take any of the following actions in relation to a person (other than a person referred to in subsection (5)), after considering any matter communicated by a police officer as to the intended apprehension of the person by a police officer:	24 25 26 27
(a)	detain the person for a period not exceeding one hour pending the person's apprehension by a police officer,	28 29
(b)	admit the person in accordance with this Act as a voluntary patient,	30 31
(c)	discharge the person, in so far as it may be possible to do so, into the care of the person's primary carer,	32 33
(d)	discharge the person.	34
(5)	If the person is a person ordered to be brought back before a court under section 33 (1) (b) of the <i>Mental Health (Criminal Procedure) Act 1990</i> :	35 36
(a)	it is the duty of the police officer notified by the authorised medical officer to ensure that a police officer attends the mental	37 38



health facility and apprehends the person as soon as practicable after notification, and	1
(b) the authorised medical officer must detain the person pending the person's apprehension by a police officer.	2
(6) A police officer may apprehend a person under this section without a warrant.	3
	4
<b>33 Actions may be delayed because of other illnesses or conditions</b>	5
Despite any other provision of this Act, an authorised medical officer is not required:	6
(a) to take or complete a step referred to in section 27, or	7
(b) to bring a person before a Magistrate for a mental health inquiry, while the person is suffering from a condition or illness other than a mental illness or other mental condition and is not, in the officer's opinion, fit to be the subject of the proposed action due to the seriousness of the person's condition or illness.	8
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<b>Division 3 Continuing detention in mental health facilities</b>	16
<b>34 Mental health inquiries to be held</b>	17
(1) A Magistrate is to hold an inquiry about an assessable person brought before the Magistrate under step 4 in section 27 (d).	18
<b>Note.</b> Section 27 sets out the events that result in a mental health inquiry. Notice of the inquiry is to be given to the person concerned and primary carers in accordance with section 76.	19
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(2) An authorised medical officer of the mental health facility in which an assessable person is detained must:	23
(a) ensure that, as far as practicable, a person brought before the Magistrate is dressed in street clothes, and	24
(b) make all necessary arrangements to ensure that all appropriate medical witnesses appear before the Magistrate and other relevant medical evidence concerning the person is placed before the Magistrate.	25
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	30
(3) Schedule 2 has effect with respect to mental health inquiries.	31
<b>35 Purpose and findings of mental health inquiries (cf 1990 Act, ss 50–52)</b>	32
(1) A Magistrate holding a mental health inquiry is to determine whether or not, on the balance of probabilities, the assessable person is a mentally ill person.	33
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|-----|---|----|
| (2) | For that purpose, the Magistrate is to do the following:  | 1  |
| (a) | consider the reports and recommendations of the authorised medical officer and other medical practitioners who examined the person under section 27 after the person's detention,   | 2  |
|     |   | 3  |
|     |   | 4  |
| (b) | consider any other information before the Magistrate,   | 5  |
| (c) | inquire about the administration of any medication to the person and take account of its effect on the person's ability to communicate,   | 6  |
|     |   | 7  |
|     |   | 8  |
| (d) | have due regard to any cultural factors relating to the person that may be relevant to the determination,   | 9  |
|     |   | 10 |
| (e) | have due regard to any evidence given at the inquiry by an expert witness concerning the person's cultural background and its relevance to any question of mental illness.  | 11 |
|     |   | 12 |
|     |   | 13 |
| (3) | A Magistrate who is not satisfied, on the balance of probabilities, that an assessable person is a mentally ill person must order that the person be discharged from the mental health facility.  | 14 |
|     |   | 15 |
|     |   | 16 |
| (4) | The Magistrate may defer the operation of an order for the discharge of a person for a period of up to 14 days, if the Magistrate thinks it is in the best interests of the person to do so.  | 17 |
|     |   | 18 |
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| (5) | A Magistrate who is satisfied, on the balance of probabilities, that an assessable person is a mentally ill person may make any of the following orders:  | 20 |
|     |   | 21 |
|     |   | 22 |
| (a) | an order that the person be discharged into the care of the person's primary carer,   | 23 |
|     |   | 24 |
| (b) | a community treatment order,  | 25 |
| (c) | an order that the person be detained in or admitted to and detained in a specified mental health facility for further observation or treatment, or both, as an involuntary patient, for a specified period of up to 3 months, if the Magistrate is of the opinion that no other care of a less restrictive kind is appropriate and reasonably available or that for any other reason it is not appropriate to make any other order under this subsection. | 26 |
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### **36 Contempt of mental health inquiry** (cf 1990 Act, s 291) 33

A person must not refuse, neglect or for any reason fail to obey or	34
comply with an order, direction, decision or determination of a	35
Magistrate under this Act.	36
Maximum penalty: 50 penalty units.	37

<b>37</b>	<b>Reviews of involuntary patients by Tribunal</b>	1
(1)	The Tribunal must review the case of each involuntary patient as follows:	2
		3
(a)	at the end of the patient's initial period of detention as a result of a mental health inquiry,	4
		5
(b)	at least once every 3 months for the first 12 months the person is an involuntary patient,	6
		7
(c)	at least once every 6 months while the person is an involuntary patient after the first 12 months of detention.	8
		9
(2)	An authorised medical officer must cause an involuntary patient to be brought before the Tribunal as soon as practicable before the end of the initial period of detention, if it appears to the officer that the person should continue to be detained.	10
		11
		12
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(3)	The authorised medical officer must ensure that, as far as practicable, a person brought before the Tribunal is dressed in street clothes.	14
		15
(4)	Despite subsection (1) (c), the Tribunal may review the case of an involuntary patient at intervals of up to 12 months if it is of the opinion that it is appropriate to do so.	16
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		18
<b>38</b>	<b>Purpose and findings of reviews of involuntary patients</b>	19
(1)	The Tribunal is, on a review of an involuntary patient, to determine whether the patient is a mentally ill person for whom no other care (other than care in a mental health facility) is appropriate and reasonably available.	20
		21
		22
		23
(2)	For that purpose, the Tribunal is to do the following:	24
(a)	consider any information before it,	25
(b)	inquire about the administration of any medication to the patient and take account of its effect on the patient's ability to communicate.	26
		27
		28
(3)	If the Tribunal determines that the patient is not a mentally ill person, the patient must be discharged from the mental health facility in which the patient is detained.	29
		30
		31
(4)	If the Tribunal determines that the patient is a mentally ill person and that no other care of a less restrictive kind is appropriate and reasonably available to the patient, the Tribunal must make an order that the patient continue to be detained as an involuntary patient in a mental health facility for further observation or treatment, or both.	32
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(5)	In any other case that the Tribunal determines that a patient is a mentally ill person, it must make an order that the patient be discharged from the	37
		38

	mental health facility in which the patient is detained and may make a community treatment order.	1 2
(6)	The Tribunal may defer the operation of an order for the discharge of a patient for a period of up to 14 days, if the Tribunal thinks it is in the best interests of the patient to do so.	3 4 5
(7)	An order made by the Tribunal under this section is to be in the form approved by the Minister.	6 7
<b>39</b>	<b>Medical examination of involuntary patients</b> (cf 1990 Act, s 61)	8
(1)	An authorised medical officer must medically examine each involuntary patient of the mental health facility, or cause each involuntary patient to be medically examined, to determine whether the patient's continued detention in the facility is necessary.	9 10 11 12
(2)	The medical examinations are to be carried out at intervals of not more than 3 months.	13 14
<b>40</b>	<b>Re-classification of involuntary patients as voluntary patients</b> (cf 1990 Act, s 64)	15 16
(1)	An authorised medical officer may classify an involuntary patient as a voluntary patient of the mental health facility at any time.	17 18
(2)	A patient may be so classified only if:	19
(a)	the authorised medical officer is of the opinion that the patient is likely to benefit from care or treatment as a voluntary patient, and	20 21
(b)	the patient agrees to be so classified or, if the patient is a person under guardianship, the patient is admitted in accordance with the procedures under this Act applicable to admitting such persons as voluntary patients.	22 23 24 25
(3)	Without limiting subsection (1), a person who is discharged as an involuntary patient may be admitted as a voluntary patient immediately on discharge.	26 27 28
	<b>Note.</b> For additional circumstances when a patient or person must be released from a mental health facility, see section 12.	29 30
<b>41</b>	<b>Discharge on making of community treatment order</b> (cf 1990 Act, s 132)	31
(1)	An authorised medical officer must discharge a patient or person who is detained in a mental health facility when a community treatment order is made about the patient or person and any order authorising the patient's or person's detention ceases to have effect.	32 33 34 35
(2)	This section does not prevent an affected person subject to a community treatment order from being admitted to or detained in a mental health facility.	36 37 38

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<b>42</b>	<b>Discharge of involuntary patients on own application</b> (cf 1990 Act, s 67)	1
(1)	An involuntary patient of a mental health facility or another person detained in a mental health facility may make an application to the authorised medical officer to be discharged.	2 3 4
(2)	The authorised medical officer may discharge the patient or person.	5
	<b>Note.</b> The authorised medical officer may also classify a patient as a voluntary patient (see section 40).	6 7
<b>43</b>	<b>Discharge of involuntary patients on application of primary carer</b> (cf 1990 Act, s 68)	8 9
(1)	The primary carer of an involuntary patient or another person detained in a mental health facility may, at any time, apply to an authorised medical officer of the mental health facility for the discharge of the patient or person.	10 11 12 13
(2)	The authorised medical officer may discharge the patient or person if:	14
(a)	the applicant gives the authorised medical officer a written undertaking that the patient or person will be properly taken care of, and	15 16 17
(b)	the authorised medical officer is satisfied that adequate measures will, so far as is reasonably practicable, be taken to prevent the patient or person from causing harm to himself or herself or others.	18 19 20 21
<b>44</b>	<b>Appeals against discharge refusals</b> (cf 1990 Act, ss 69, 70)	22
(1)	An involuntary patient or person detained at a mental health facility (the <i>applicant</i> ) who applies to be discharged, or a person who applies for the discharge of the applicant, or a person appointed by the applicant, may appeal to the Tribunal if:	23 24 25 26
(a)	the authorised medical officer refuses the application, or	27
(b)	the authorised medical officer fails to determine the application within 3 working days after it is made.	28 29
(2)	An appeal may be made orally or in writing and is to be made in accordance with the regulations.	30 31
(3)	The authorised medical officer must provide the Tribunal with a report about the applicant, including the officer's reasons for refusing to discharge the applicant or failing to determine the application.	32 33 34
(4)	For the purpose of determining an appeal, the Tribunal has and may exercise the functions of the authorised medical officer with respect to the discharge application and may make an order accordingly.	35 36 37

(5)	In addition, the Tribunal may determine that no further right of appeal may be exercised under this section before the date on which the person is next reviewed by the Tribunal under this Act, if it thinks it appropriate to do so, having regard to the following:	1
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		4
(a)	the interval between the last determination under this Act that the applicant was a mentally ill person and the date of the appeal,	5
		6
(b)	the frequency of appeals under this section made by or on behalf of the applicant,	7
		8
(c)	the last report about the applicant by the authorised medical officer under this section,	9
		10
(d)	any other matter the Tribunal considers relevant.	11
<b>45</b>	<b>Review and discharge of absent patients</b> (cf 1990 Act, ss 72, 73)	12
(1)	An authorised medical officer must review the mental health and welfare of a patient or person detained in a mental health facility under this Act who is absent from the mental health facility with permission if the absence is for a continuous period of more than 28 days.	13
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(2)	The authorised medical officer must discharge the patient or person following the review unless the officer is of the opinion that further detention of the patient or person in the facility is necessary.	17
		18
		19
(3)	An authorised medical officer of a mental health facility must discharge a patient or person detained in the facility under this Act who is absent from the mental health facility for a single period exceeding 12 months.	20
		21
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<b>Division 4</b>	<b>Leave of absence from mental health facilities</b>	23
<b>46</b>	<b>Application of Division</b>	24
	This Division applies to an involuntary patient or a person who is detained in a mental health facility but does not apply to a forensic patient.	25
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<b>47</b>	<b>Leave of absence on compassionate grounds, medical grounds or other grounds</b>	28
		29
(1)	An authorised medical officer may permit a person to be absent from a mental health facility for the period, and on the conditions, that the officer thinks fit.	30
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(2)	Permission may be given on compassionate grounds, on the ground that medical treatment is required or on any other ground the authorised medical officer thinks fit.	33
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	<b>Note.</b> A person may also be transferred from a mental health facility to another health facility on medical grounds (see section 80).	36
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(3)	An authorised medical officer may not grant leave of absence unless the officer is satisfied that, as far as is practicable, adequate measures have been taken to prevent the person concerned from causing harm to himself or herself or others.	1 2 3 4
<b>48</b>	<b>Apprehension of persons not permitted to be absent from mental health facility</b> (cf 1990 Act, ss 75, 76)	5 6
(1)	An authorised medical officer of a mental health facility may apprehend a person, or direct a person to be apprehended, if:	7 8
(a)	the person fails to return to the facility on or before the expiry of a permitted period of absence granted under this Part or fails to comply with a condition of the permission, or	9 10 11
(b)	the person absents himself or herself from the facility otherwise than in accordance with this Act.	12 13
(2)	The person may be apprehended by any of the following persons:	14
(a)	an authorised medical officer or any other suitably qualified person employed at the mental health facility,	15 16
(b)	a police officer,	17
(c)	a person authorised by the Minister or the authorised medical officer,	18 19
(d)	a person assisting a person referred to in paragraph (a), (b) or (c).	20
(3)	A person who is apprehended is to be conveyed to and detained in the mental health facility from which the person absented himself or herself.	21 22 23
<b>49</b>	<b>Police assistance</b>	24
(1)	An authorised medical officer may request that a police officer apprehend, or assist in apprehending, a person under this Division if the officer is of the opinion that there are serious concerns relating to the safety of the person or other persons if the person is taken to a mental health facility without the assistance of a police officer.	25 26 27 28 29
(2)	A police officer to whose notice any such request is brought may:	30
(a)	apprehend and take or assist in taking the person to the mental health facility from which the person absented himself or herself, or	31 32 33
(b)	cause or make arrangements for some other police officer to do so.	34 35
(3)	A police officer may enter premises to apprehend a person under this section or section 48, and may apprehend any such person, without a warrant and may exercise any powers conferred under section 81 on a	36 37 38

person who is authorised under that section to take a person to a mental health facility or another health facility.

**Note.** Section 81 sets out the persons who may take a person to a mental health facility and their powers when doing so.

## Part 3 Involuntary treatment outside mental health facilities

### Division 1 Applications for and making of community treatment orders

#### 50 Definitions

In this Part:

**affected person** means a person for whom a community treatment order has been applied for or made.

**breach notice**—see section 58 (3).

**breach order**—see section 58 (4).

**director of community treatment** of a mental health facility means a person appointed under section 113 as the director of community treatment of the mental health facility.

**psychiatric case manager** means an officer or an employee of a declared mental health facility who is appointed under section 114 as the psychiatric case manager of an affected person.

**treatment plan**—see section 54.

#### 51 Community treatment orders

- (1) A community treatment order authorising the compulsory treatment in the community of a person may be made by the Tribunal or a Magistrate.

**Note.** Section 56 sets out the matters to be included in community treatment orders.

- (2) The following persons may apply for a community treatment order for the treatment of a person:
  - (a) the authorised medical officer of a mental health facility in which the affected person is detained or is a patient under this Act,
  - (b) a medical practitioner who is familiar with the clinical history of the affected person,
  - (c) any other person prescribed by the regulations.



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- (3) An application may be made about a person who is detained in or a patient in a mental health facility or a person who is not in a mental health facility. 1  
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3
- (4) An application may be made about a person who is subject to a current community treatment order. 4  
5
- (5) A community treatment order may be made in the following circumstances and may replace an existing order: 6  
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(a) following a mental health inquiry, 8  
(b) on a review of a patient by the Tribunal, 9  
(c) on an application otherwise being made to the Tribunal. 10
- 52 Notice of applications** 11
- (1) The applicant for a community treatment order must notify the affected person in writing of the application. 12  
13
- (2) The notice of the application is to include a copy of the proposed treatment plan for the affected person. 14  
15
- (3) If the affected person is not detained in a mental health facility, the notice must be given not less than 14 days before the application is heard. 16  
17  
18
- 53 Determination of applications for community treatment orders** 19
- (1) A Magistrate or the Tribunal is, on an application for a community treatment order, to determine whether the affected person is a mentally ill person who should be subject to the order. 20  
21  
22
- (2) For that purpose, the Magistrate or Tribunal is to consider the following: 23  
(a) a treatment plan for the affected person proposed by the declared mental health facility that is to implement the proposed order, 24  
25  
(b) if the affected person is subject to an existing community treatment order, a report by the psychiatric case manager of the person as to the efficacy of that order, 26  
27  
28  
(c) a report as to the efficacy of any previous community treatment order for the affected person, 29  
30  
(d) any other information placed before the Magistrate or Tribunal. 31
- (3) The Magistrate or Tribunal may make a community treatment order for an affected person if the Magistrate or Tribunal determines that the patient is a mentally ill person and that: 32  
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(a) no other care of a less restrictive kind is appropriate and reasonably available to the person and that the affected person 35  
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	would benefit from the order as the least restrictive alternative consistent with safe and effective care, and	1 2
(b)	a declared mental health facility has an appropriate treatment plan for the affected person and is capable of implementing it, and	3 4 5
(c)	if the affected person has been previously diagnosed as suffering from a mental illness, the affected person has a previous history of refusing to accept appropriate treatment.	6 7 8
(4)	For the purposes of this section, a person has a <i>previous history of refusing to accept appropriate treatment</i> if the following are satisfied:	9 10
(a)	the affected person has previously refused to accept appropriate treatment,	11 12
(b)	when appropriate treatment has been refused, there has been a relapse into an active phase of mental illness,	13 14
(c)	the relapse has been followed by mental or physical deterioration justifying involuntary admission to a mental health facility (whether or not there has been such an admission),	15 16 17
(d)	care and treatment following involuntary admission resulted, or could have resulted, in an amelioration of, or recovery from, the debilitating symptoms of a mental illness or the short-term prevention of deterioration in the mental or physical condition of the affected person.	18 19 20 21 22
(5)	The Tribunal or Magistrate must not specify a period longer than 12 months as the period for which a community treatment order is in force.	23 24 25
(6)	In determining the duration of a community treatment order, the Tribunal or Magistrate must take into account the estimated time required:	26 27 28
(a)	to stabilise the condition of the affected person, and	29
(b)	to establish, or re-establish, a therapeutic relationship between the person and the person's psychiatric case manager.	30 31
<b>54</b>	<b>Requirements for treatment plans under community treatment orders</b>	32
	A treatment plan for an affected person is to consist of the following:	33
(a)	in general terms, an outline of the proposed treatment, counselling, management, rehabilitation or other services to be provided to implement the community treatment order,	34 35 36
(b)	in specific terms, the method by which, the frequency with which, and the place at which, the services would be provided for that purpose.	37 38 39

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<b>55</b>	<b>Community treatment order may be made in absence of affected person</b>	1
	A Magistrate or the Tribunal may make a community treatment order in the absence of the affected person, if the person has been given notice of the application under this Part.	2 3 4
<b>56</b>	<b>Form and duration of community treatment orders</b>	5
(1)	A community treatment order is to:	6
(a)	nominate the declared mental health facility that is to implement the treatment plan for the affected person, and	7 8
(b)	require the affected person to be present, at the reasonable times and places specified in the order to receive the medication and therapy, counselling, management, rehabilitation and other services provided in accordance with the treatment plan.	9 10 11 12
(2)	A community treatment order ceases to have effect at the end of the period specified in the order or, if no period is specified, 12 months after the order is made.	13 14 15
	<b>Note.</b> Section 53 (5) specifies that the maximum period for an order is to be 12 months.	16 17
(3)	A community treatment order has no effect while an affected person is detained in a mental health facility (otherwise than under this Part), or is a voluntary patient.	18 19 20
(4)	The time for which a community treatment order is in force does not cease to run during any period in which this section provides that it has no effect.	21 22 23
	<b>Note.</b> The Tribunal may vary or revoke a community treatment order in accordance with section 65.	24 25
<b>Division 2</b>	<b>Operation of community treatment orders</b>	26
<b>57</b>	<b>Duties and functions of affected person and mental health facility</b> (cf 1990 Act, ss 145, 146)	27 28
(1)	The affected person must comply with the community treatment order.	29
(2)	The director of community treatment of the declared mental health facility implementing a treatment plan under a community treatment order may take all reasonable steps to have medication administered, and services provided, in accordance with the order.	30 31 32 33
(3)	Medication may be administered to an affected person for the purposes of a community treatment order without the person's consent if it is administered without the use of more force than would be required if the person had consented to its administration.	34 35 36 37

- (4) The director of community treatment of a declared mental health facility implementing a treatment plan under a community treatment order must provide to the affected person particulars of the kind and dosages of medication that are being administered, or have recently been administered, to the person, if requested to do so by:
  - (a) the affected person, or
  - (b) the primary carer of the affected person, or
  - (c) if the affected person consents, another person who would be entitled to apply for a community treatment order in relation to the person.
- (5) A person implementing a treatment plan under a community treatment order may enter the land (but not the dwelling) on which an affected person's residence is situated without the person's consent for the purpose of implementing the community treatment order.

#### 58 Breach of community treatment order

- (1) The director of community treatment of a declared mental health facility implementing a community treatment order must take the steps set out in this section if the affected person in any way refuses or fails to comply with the community treatment order and the director is of the opinion that:
  - (a) the mental health facility has taken all reasonable steps to implement the order, and
  - (b) there is a significant risk of deterioration in the mental or physical condition of the affected person.
- (2) The director must:
  - (a) make a written record of the opinions, the facts on which they are based and the reasons for forming them, and
  - (b) cause the affected person to be informed that any further refusal to comply with the order will result in the person being taken to the declared mental health facility or another appropriate mental health facility and treated there.
- (3) On a further refusal or failure by the affected person to comply with the community treatment order, the director may cause the person to be given a written notice (a **breach notice**):
  - (a) requiring the person to accompany a member of staff of the NSW Health Service employed at the declared mental health facility for treatment in accordance with the order or to a specified mental health facility, and
  - (b) warning the person that the assistance of a police officer may be obtained in order to ensure compliance with the order.

(4)	On the refusal or failure by the affected person to comply with a breach notice, the director may, in writing, make an order (a <b>breach order</b> ) that the affected person be taken to a specified declared mental health facility.	1 2 3 4
<b>59</b>	<b>Police assistance</b>	5
(1)	A police officer to whose notice a breach order is brought must, if practicable:	6 7
(a)	apprehend and take or assist in taking the person the subject of the order to the mental health facility, or	8 9
(b)	cause or make arrangements for some other police officer to do so.	10 11
(2)	A police officer may enter premises to apprehend a person under this section, and may apprehend any such person, without a warrant and may exercise any powers conferred by section 81 on a person who is authorised under that section to take a person to a mental health facility or another health facility.	12 13 14 15 16
	<b>Note.</b> Section 81 sets out the persons who may take a person to a mental health facility and their powers when doing so.	17 18
<b>60</b>	<b>Procedures at facility after breach notice or breach order</b>	19
(1)	An affected person who is at a mental health facility as a result of the giving of a breach notice or a breach order:	20 21
(a)	may be given treatment in accordance with the community treatment order, and	22 23
(b)	may be assessed by a medical practitioner for involuntary admission to a mental health facility.	24 25
(2)	A person who is at a mental health facility as a result of a breach notice or breach order may be released after treatment if treatment is accepted or may be dealt with at the mental health facility or taken to another declared mental health facility if treatment is refused.	26 27 28 29
<b>61</b>	<b>Review of affected person at mental health facility after breach order</b> (cf 1990 Act, ss 141, 142)	30 31
(1)	This section applies to an affected person who is taken to a declared mental health facility on a breach order or is taken to or is at a declared mental health facility after refusing treatment at a mental health facility consequent on a breach order.	32 33 34 35
(2)	An authorised medical officer must, not later than 12 hours after the person is taken to the declared mental health facility, review the affected person's mental condition and determine whether the person is a mentally ill person or a mentally disordered person.	36 37 38 39

(3)	The authorised medical officer may cause the person to be given treatment in accordance with the community treatment order.	1 2
(4)	If the authorised medical officer determines that the affected person is a mentally ill person or a mentally disordered person for whom no other care of a less restrictive kind is appropriate or reasonably available, the person is to be detained in the declared mental health facility for further observation or treatment, or both.	3 4 5 6 7
(5)	The affected person may be detained until one of the following events occurs:	8 9
(a)	in the case of a mentally ill person, the term of the community treatment order ends or the person is discharged from the declared mental health facility under this Act,	10 11 12
(b)	in the case of a mentally disordered person, the maximum period for which a person may be held as such a person under Part 2 ends, the term of the community treatment order ends or the person is discharged from the declared mental health facility under this Act.	13 14 15 16 17
<b>62</b>	<b>Discharge and detention of affected persons</b>	18
(1)	An affected person detained in a declared mental health facility under this Division must be discharged from the facility:	19 20
(a)	if the authorised medical officer determines that the person is not a mentally ill person or a mentally disordered person or is of the opinion that other care of a less restrictive kind is appropriate and reasonably available to the person, or	21 22 23 24
(b)	if the authorised medical officer decides at any time that it is appropriate to do so.	25 26
(2)	An authorised medical officer may do all necessary things to cause a person to be detained in a mental health facility under Part 2 at the end of the term of a community treatment order if the officer considers the person to be a mentally ill person.	27 28 29 30
(3)	Any such person is taken to be detained in the mental health facility under section 19 when the authorised medical officer takes action to detain the person.	31 32 33
<b>63</b>	<b>Review by Tribunal of detained affected persons</b> (cf 1990 Act, s 143A)	34
(1)	An authorised medical officer must cause a person detained in a declared mental health facility under this Division to be brought before the Tribunal not later than 3 months after the person is detained.	35 36 37
(2)	The authorised medical officer must ensure that, as far as practicable, a person brought before the Tribunal is dressed in street clothes.	38 39

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(3)	This section does not apply if the affected person's community treatment order will end less than 3 months after the person is detained under this Division.	1 2 3
<b>64</b>	<b>Purpose and findings of reviews</b> (cf 1990 Act, s 143A)	4
(1)	The Tribunal is, on a review of an affected person, to determine whether the person is a mentally ill person for whom no other care (other than care in a mental health facility) is appropriate and reasonably available.	5 6 7
(2)	For that purpose, the Tribunal is to do the following:	8
(a)	consider any information before it,	9
(b)	inquire about the administration of any medication to the person and take account of its effect on the person's ability to communicate.	10 11 12
(3)	If the Tribunal determines that the affected person is a mentally ill person or a mentally disordered person for whom no other care of a less restrictive kind is appropriate or reasonably available, the Tribunal must determine whether the person should be detained in the declared mental health facility until the end of the community treatment order.	13 14 15 16 17
(4)	If the Tribunal does not determine that the person is a mentally ill person or is of the opinion that other care of a less restrictive kind is appropriate or reasonably available:	18 19 20
(a)	it must make an order that the person be discharged from the declared mental health facility in which the person is detained, and	21 22 23
(b)	it may make any community treatment order that it could make on a review of an involuntary patient.	24 25
(5)	The Tribunal may defer the operation of an order for the discharge of an affected person for a period of up to 14 days, if the Tribunal thinks it is in the best interests of the affected person to do so.	26 27 28
(6)	An order made by the Tribunal under this section is to be in the form approved by the Minister.	29 30
<b>Division 3</b>	<b>Revocation, variation and review of community treatment orders</b>	31 32
<b>65</b>	<b>Variation or revocation of orders by Tribunal</b> (cf 1990 Act, s 148)	33
(1)	The Tribunal may vary or revoke a community treatment order, on application being made under this section.	34 35
(2)	An application may be made by any of the following:	36
(a)	the affected person,	37

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(b)	the psychiatric case manager of the affected person,	1
(c)	any person who could have applied for the order.	2
(3)	An application may be made only if:	3
(a)	there has been a substantial or material change in the circumstances surrounding the making of the order, or	4
(b)	relevant information that was not available when the order was made has become available.	7
(4)	An order may be varied only if the order, as varied, could be made in relation to the affected person.	9
(5)	The regulations may make provision for or with respect to applications under this section and the orders that may be made by the Tribunal.	11
<b>66</b>	<b>Revocation by director of community treatment</b> (cf 1990 Act, s 149)	12
	The director of community treatment of a declared mental health facility implementing a treatment plan under a community treatment order may revoke a community treatment order if of the opinion that the affected person is not likely to benefit from a continuation of the order.	15
<b>67</b>	<b>Appeals</b> (cf 1990 Act, s 151)	17
(1)	The affected person under a community treatment order made by the Tribunal may at any time appeal to the Court:	19
(a)	if the term of the order exceeds 6 months or no term is specified in the order, against the duration of the order, or	21
(b)	on any question of law or fact arising from the order or its making.	23
(2)	The affected person under a community treatment order made by a Magistrate may at any time appeal to the Tribunal:	25
(a)	if the term of the order exceeds 6 months or no term is specified in the order, against the duration of the order, or	27
(b)	on any question of law or fact arising from the order or its making.	29
(3)	The regulations may make provision for or with respect to appeals to the Tribunal under this section and the orders that may be made by the Tribunal in respect of any such appeal.	32



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## **Chapter 4    Care and treatment**

### **Part 1    Rights of patients or detained persons and primary carers**

#### **Division 1        General**

##### **68    Principles for care and treatment**

It is the intention of Parliament that the following principles are, as far as practicable, to be given effect to with respect to the care and treatment of people with a mental illness or mental disorder:

- (a) people with a mental illness or mental disorder should receive the best possible care and treatment in the least restrictive environment enabling the care and treatment to be effectively given,
- (b) people with a mental illness or mental disorder should be provided with timely and high quality treatment and care in accordance with professionally accepted standards,
- (c) the provision of care and treatment should be designed to assist people with a mental illness or mental disorder, wherever possible, to live, work and participate in the community,
- (d) the prescription of medicine to a person with a mental illness or mental disorder should meet the health needs of the person and should be given only for therapeutic or diagnostic needs and not as a punishment or for the convenience of others,
- (e) people with a mental illness or mental disorder should be provided with appropriate information about treatment, treatment alternatives and the effects of treatment,
- (f) any restriction on the liberty of patients and other people with a mental illness or mental disorder and any interference with their rights, dignity and self-respect is to be kept to the minimum necessary in the circumstances,
- (g) the age-related, gender-related, religious, cultural, language and other special needs of people with a mental illness or mental disorder should be recognised,
- (h) every effort that is reasonably practicable should be made to involve persons with a mental illness or mental disorder in the development of treatment plans and plans for ongoing care,

- (i) people with a mental illness or mental disorder should be informed of their legal rights and other entitlements under this Act and all reasonable efforts should be made to ensure the information is given in the language, mode of communication or terms that they are most likely to understand,
- (j) the role of carers for people with a mental illness or mental disorder and their rights to be kept informed should be given effect.

**69 Offence to ill-treat patients** (cf 1990 Act, s 298)

An authorised medical officer, or any other person employed at a mental health facility, must not wilfully strike, wound, ill-treat or neglect a patient or person detained at the facility.

Maximum penalty: 50 penalty units or imprisonment for 6 months, or both.

**70 Assistance of interpreters** (cf 1990 Act, s 292)

A medical practitioner must arrange for an interpreter to be present at a medical examination of a person for the purposes of this Act, if the person is unable to communicate adequately in English but can communicate adequately in another language.

**71 Primary carer**

- (1) The *primary carer* of a person (the *patient*) for the purposes of this Act is:
  - (a) the guardian of the patient, or
  - (b) the parent of a patient who is a child (subject to any nomination by a patient referred to in paragraph (c)), or
  - (c) if the patient is over the age of 14 years and is not a person under guardianship, the person nominated by the patient as the primary carer under this Part under a nomination that is in force, or
  - (d) if the patient is not a patient referred to in paragraph (a) or (b) or there is no nomination in force as referred to in paragraph (c):
    - (i) the spouse of the patient, if any, if the relationship between the patient and the spouse is close and continuing, or
    - (ii) any person who is primarily responsible for providing support or care to the patient (other than wholly or substantially on a commercial basis), or
    - (iii) a close friend or relative of the patient.

- (2) In this section:  
*close friend or relative* of a patient means a friend or relative of the patient who maintains both a close personal relationship with the patient through frequent personal contact and a personal interest in the patient's welfare and who does not provide support to the patient wholly or substantially on a commercial basis.

## **72 Nomination of primary carer**

- (1) A person may nominate a person to be the person's primary carer for the purposes of this Act.
- (2) A person may nominate persons who are excluded from being given notice or information about the person under this Act and may revoke or vary any such nomination.
- (3) A person who is over the age of 14 years and under the age of 18 years may not exclude the person's parent by a nomination under subsection (2).
- (4) A nomination, variation or revocation is to be made in writing and may be given to an authorised medical officer at the facility concerned, a director of community treatment or the Director-General.
- (5) A nomination remains in force for the period prescribed by the regulations or until it is revoked in writing.
- (6) An authorised medical officer or a director of community treatment is, in carrying out his or her functions under this Act or the regulations, to give effect to a nomination or a variation or revocation of a nomination, if notified of the nomination, variation or revocation.
- (7) An authorised medical officer or a director of community treatment is not required to give effect to a nomination, or a variation or revocation of a nomination, if the officer or director reasonably believes:
- (a) that to do so may put the patient or nominated person or any other person at risk of serious harm, or
  - (b) that the person who made the nomination, variation or revocation was incapable of making the nomination, variation or revocation.

## **Division 2 Notification and information sharing**

### **73 Information about medication**

- (1) On a request made under this section, an authorised medical officer of a mental health facility must provide particulars of the types of medication and dosages of each type of medication currently being administered or recently administered to a patient or person detained in the facility.

- (2) A request may be made by:
  - (a) the patient or person detained in the mental health facility, or
  - (b) the primary carer of any such patient or person, or
  - (c) a representative of any such patient or person at a mental health inquiry or before the Tribunal.

#### **74 Information to be given to persons to be detained**

- (1) An authorised medical officer of a mental health facility must give the following persons an oral explanation and a written statement of their legal rights and other entitlements under this Act:
  - (a) a person who is taken to the facility under Part 2 of Chapter 3, and
  - (b) a person who is a voluntary patient in the facility, if it is decided to take steps to detain the person under Part 2 of Chapter 3, and
  - (c) an affected person who is detained in the facility after a breach notice or breach order relating to a community treatment order, if it is decided to take steps to detain the person under Part 2 of Chapter 3.
- (2) The explanation and statement must be given as soon as practicable after the person is taken to a mental health facility or it is decided to take steps to detain the person.
- (3) The written statement is to be in the form set out in Schedule 3.
- (4) If the authorised medical officer is of the opinion that a person is not capable of understanding the explanation or statement when it is first given, another explanation or statement must be given to the person not later than 24 hours before a mental health inquiry is held about the person.
- (5) The authorised medical officer must, if the person is unable to communicate adequately in English but is able to communicate adequately in another language, arrange for the oral explanation to be given in that other language.

#### **75 Notification to primary carer of initial detention**

- (1) An authorised medical officer must, not later than 24 hours after a person is detained in a mental health facility, take all reasonably practicable steps to notify the primary carer of the person that the person is detained in the facility.
- (2) Notice need not be given if the person is discharged or classified as a voluntary patient within that period.

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<b>76</b>	<b>Notification of mental health inquiries</b>	1
(1)	An authorised medical officer must notify an assessable person detained in the mental health facility that:	2
	(a) a mental health inquiry will be held about the person, and	3
	(b) notice of the inquiry will be given to the person's primary carer.	4
(2)	The notice is to be given when the authorised medical officer becomes aware that the person is an assessable person.	5
(3)	The authorised medical officer must, in accordance with the regulations, take all reasonably practicable steps to give notice to the primary carer of an assessable person of a proposed mental health inquiry.	6
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<b>77</b>	<b>Notification to new involuntary patients of appeal rights</b> (cf 1990 Act, s 55)	12
(1)	An authorised medical officer of a mental health facility must give, or cause to be given, to a person ordered by a Magistrate after a mental health inquiry to be detained in the facility as an involuntary patient a statement of the rights of appeal conferred on the person as an involuntary patient under this Act.	13
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(2)	The statement must be given as soon as practicable after the order is made.	18
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(3)	The statement is to be in the form approved by the Minister.	20
<b>78</b>	<b>Notifications to primary carer of events affecting patients or detained persons</b>	21
		22
(1)	An authorised medical officer of a mental health facility must take all reasonably practicable steps to notify the primary carer of a patient or person detained in the facility if any of the following events occurs:	23
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		25
	(a) the patient or person is absent from the facility without permission or fails to return at the end of a period of leave,	26
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	(b) it is proposed to transfer the patient or person, or the patient or person is transferred, to another mental health facility or other facility,	28
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	(c) the patient or person is discharged from the mental health facility,	31
	(d) the patient or person is re-classified as a voluntary patient,	32
	(e) it is proposed to apply to the Tribunal for an ECT inquiry under Part 2 or to ascertain whether the patient or person is capable of giving informed consent to electro convulsive therapy,	33
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		35
	(f) a surgical operation is performed on the patient or person under Part 3,	36
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(g)	it is proposed to apply to the Tribunal for consent to a surgical operation or special medical treatment under Part 3.	1 2
(2)	The authorised medical officer must give the notice as soon as practicable after becoming aware that the event has occurred.	3 4
(3)	In the case of a proposed transfer, the notice must be given before the relevant order or arrangement is made, except in an emergency.	5 6
<b>79</b>	<b>Discharge and other planning</b>	7
(1)	An authorised medical officer of a mental health facility must take all reasonably practicable steps to ensure that a patient or person detained in the facility, and the primary carer of the patient or person, are consulted in relation to planning the patient's or person's discharge and any subsequent treatment or other action considered in relation to the patient or person.	8 9 10 11 12 13
(2)	In planning the discharge of any such patient or person, and any subsequent treatment or other action considered in relation to the patient or person, the authorised medical officer must take all reasonably practicable steps to consult with agencies involved in providing relevant services to the patient or person, any primary carer of the patient or person and any dependent children or other dependants of the patient or person.	14 15 16 17 18 19 20
(3)	An authorised medical officer of a mental health facility must take all reasonably practicable steps to provide any such patient or person who is discharged from the facility, and the patient's or person's primary carer, with appropriate information as to follow-up care.	21 22 23 24
<b>Division 3</b>	<b>Transfer of patients</b>	25
<b>80</b>	<b>Transfer of patients to or from mental health facilities</b> (cf 1990 Act, s 78)	26
(1)	An involuntary patient or a person detained in a mental health facility may be transferred from the mental health facility to another mental health facility or another health facility.	27 28 29
(2)	A person who is a patient in a health facility other than a mental health facility may be transferred from the health facility to a declared mental health facility for the purpose of detaining the person under Part 2 of Chapter 3.	30 31 32 33
	<b>Note.</b> Section 25 sets out the procedure for detaining such a person in a declared mental health facility.	34 35
(3)	A transfer of a patient or person to a health facility other than a mental health facility may be made on the grounds that the patient or person requires medical treatment for a condition or illness (other than a mental illness or other mental condition).	36 37 38 39

(4)	A transfer under this section is to be done in accordance with an arrangement between medical officers of each facility.	1 2
(5)	An arrangement under this section is sufficient authority for the transfer of a patient or person, and the reception into, the mental health facility or other health facility to which the patient or person is transferred.	3 4 5
<b>81</b>	<b>Transport of persons to and from mental health facilities and other health facilities</b>	6 7
(1)	The persons listed below may take to or from a mental health facility or another health facility any person who is authorised by this Act to be taken, or transferred, to or from the facility:	8 9 10
	(a) a member of staff of the NSW Health Service,	11
	(b) an ambulance officer,	12
	(c) a police officer,	13
	(d) a person prescribed by the regulations.	14
(2)	A person authorised by this Act to take a person to or from a mental health facility or other health facility may:	15 16
	(a) use reasonable force in exercising functions under this section or any other provision of this Act applying this section, and	17 18
	(b) restrain the person in any way that is reasonably necessary in the circumstances.	19 20
(3)	A person may be sedated, by a person authorised by law to administer the sedative, for the purpose of being taken to or from a mental health facility or other health facility under this Act if it is necessary to do so to enable the person to be taken safely to or from the facility.	21 22 23 24
	<b>Note.</b> The <i>Poisons and Therapeutic Goods Act 1966</i> , and the regulations under that Act, regulate the persons who may prescribe and administer drugs (including sedative drugs).	25 26 27
(4)	A person authorised by this Act to take a person to or from a mental health facility or other health facility may carry out a frisk search or an ordinary search of the person, if the person reasonably suspects that the other person is carrying anything:	28 29 30 31
	(a) that would present a danger to the person or any other person, or	32
	(b) that could be used to assist the other person to escape from the person's custody.	33 34
(5)	The person may seize and detain a thing found in a search if it is a thing of a kind referred to in subsection (4) (a) or (b).	35 36

- (6) In this section: 1
- frisk search*** means: 2
- (a) a search of a person conducted by quickly running the hands over 3  
the person's outer clothing or by passing an electronic metal 4  
detection device over or in close proximity to the person's outer 5  
clothing, or 6
- (b) an examination of anything worn or carried by the person that is 7  
conveniently and voluntarily removed by the person, including 8  
an examination conducted by passing an electronic metal 9  
detection device over or in close proximity to that thing. 10
- ordinary search*** means a search of a person or of articles in the 11  
possession of the person that may include: 12
- (a) requiring the person to remove only his or her overcoat, coat or 13  
jacket or similar article of clothing and any gloves, shoes, socks 14  
and hat, and 15
- (b) an examination of those items. 16

## Part 2 Mental health treatments 17

### Division 1 Preliminary 18

#### 82 Definitions 19

In this Part: 20

***administer*** a treatment includes cause or knowingly permit treatment to 21  
be administered. 22

***involuntary patient*** includes a forensic patient and a person detained in 23  
a mental health facility. 24

### Division 2 General provisions about mental health treatment 25

#### 83 Prohibited treatments (cf 1990 Act, s 197) 26

- (1) A person must not administer to or perform on another person any of the 27  
following: 28
- (a) deep sleep therapy, 29
- (b) insulin coma therapy, 30
- (c) psychosurgery, 31
- (d) any other operation or treatment prescribed by the regulations for 32  
the purposes of this section. 33
- Maximum penalty: 50 penalty units. 34



(2)	In this section:	1
	<i>psychosurgery</i> means:	2
(a)	the creation of 1 or more lesions, whether made on the same or separate occasions, in the brain of a person by any surgical technique or procedure, when it is done primarily for the purpose of altering the thoughts, emotions or behaviour of the person, or	3 4 5 6
(b)	the use for such a purpose of intracerebral electrodes to produce such a lesion or lesions, whether on the same or separate occasions, or	7 8 9
(c)	the use on 1 or more occasions of intracerebral electrodes primarily for the purpose of influencing or altering the thoughts, emotions or behaviour of a person by stimulation through the electrodes without the production of a lesion in the brain of the person,	10 11 12 13 14
	but does not include a technique or procedure carried out for the treatment of a condition or an illness prescribed by the regulations for the purposes of this definition.	15 16 17
<b>84</b>	<b>Treatment may be given to patients</b>	18
	An authorised medical officer of a mental health facility may, subject to this Act, give, or authorise the giving of, any treatment (including any medication) the officer thinks fit to an involuntary patient or assessable person detained in the facility in accordance with this Act.	19 20 21 22
<b>85</b>	<b>Administration of excessive or inappropriate drugs</b> (cf 1990 Act, s 198)	23
	A medical practitioner must not, in relation to any mental illness or mental condition or suspected mental illness or mental condition, administer, or cause to be administered to a person a drug or drugs in a dosage that, having regard to professional standards, is excessive or inappropriate.	24 25 26 27 28
	Maximum penalty: 50 penalty units.	29
<b>86</b>	<b>Review of drug use in mental health facilities</b> (cf 1990 Act, s 199)	30
(1)	The medical superintendent of a mental health facility must establish an internal review system to monitor and review the prescription and use of drugs in the facility.	31 32 33
(2)	The director of community treatment of a mental health facility must establish an internal review system to monitor and review the prescription and use of drugs under community treatment orders implemented by the facility.	34 35 36 37

- (3) The system is to monitor the frequency of administration and dosages of drugs, the intended and unintended effects of any drugs administered and the appropriateness of their use.

### **Division 3      Electro convulsive therapy**

#### **87      Definitions**

In this Division:

*ECT administration inquiry*—see section 96 (2).

*ECT consent inquiry*—see section 96 (1).

*ECT determination*—see section 96 (3).

*ECT inquiry* means an ECT administration inquiry or an ECT consent inquiry.

#### **88      Offences relating to administration of electro convulsive treatment** (cf 1990 Act, ss 180–182)

- (1) A person who is not a medical practitioner must not administer electro convulsive therapy to another person.
- (2) A medical practitioner must not administer electro convulsive therapy to a person:
- (a) otherwise than in accordance with this Division, or
  - (b) at a place other than a mental health facility or other place approved by the Director-General.
- (3) A medical practitioner must not administer electro convulsive therapy to a person unless there are present during the administration of the electro convulsive therapy not less than 2 medical practitioners (of whom the medical practitioner administering the electro convulsive therapy may be one):
- (a) one of whom is experienced in the administration of electro convulsive therapy, and
  - (b) another of whom is experienced in the administration of anaesthesia.
- Maximum penalty: 50 penalty units.

#### **89      When electro convulsive therapy may be administered**

Electro convulsive therapy may be administered only in the following circumstances:

- (a) to a person other than an involuntary patient, if the person meets the requirements for informed consent to the treatment and medical certification set out in this Division,

- (b) to an involuntary patient, after an ECT determination by the Tribunal at an ECT inquiry.

**Note.** In this Part, *involuntary patient* includes a forensic patient and a person detained in a mental health facility.

#### **90 Refusal of treatment by medical superintendent**

The medical superintendent of a mental health facility may refuse to allow electro convulsive therapy to be administered to a patient or person detained in the facility, even though the Tribunal has made a determination under this Division that enables the treatment to be given.

#### **91 Informed consent requirements** (cf 1990 Act, s 183)

- (1) A person is taken to have given informed consent to the administration of electro convulsive therapy if the person gives a free, voluntary and written consent after this section is complied with.
- (2) The following steps must be taken before consent is obtained:
- (a) a fair explanation must be made to the person of the techniques or procedures to be followed, including an identification and explanation of any technique or procedure about which there is not sufficient data to recommend it as recognised treatment or to reliably predict the outcome of its performance,
  - (b) a full description must be given, without exaggeration or concealment, to the person of any possible discomforts and risks of the treatment (including possible loss of memory),
  - (c) a full description must be given to the person of any expected benefits of the treatment,
  - (d) a full disclosure must be made, without exaggeration or concealment, to the person of any appropriate alternative treatments that would be advantageous to the person,
  - (e) an offer must be made to the person to answer any inquiries concerning the procedures or any part of them,
  - (f) the person must be given notice that the person is free to refuse or to withdraw consent and to discontinue the procedures or any part of them at any time,
  - (g) a full disclosure must be made to the person of any financial relationship between the person proposing the administration of the treatment or the administering medical practitioner, or both, and the facility in which it is proposed to administer the treatment,
  - (h) the person must be given notice of their right to obtain legal and medical advice and to be represented before giving consent,

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- (i) any question relating to the techniques or procedures to be followed that is asked by the person must have been answered and the answers must appear to have been understood by the person, 1  
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4
- (j) a form setting out the steps in this subsection is to be given to the person and an oral explanation of the matters dealt with in the form is to be given to the person in a language with which the person is familiar. 5  
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- (3) The regulations are to prescribe forms setting out the steps to be taken before obtaining informed consent to electro convulsive therapy. 9  
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- 92 Person impaired by medication incapable of giving informed consent** 11  
(cf 1990 Act, s 184) 12
- A person is presumed to be incapable of giving informed consent to the administration of electro convulsive therapy if, when consent is sought, the person is affected by medication that impairs the person's ability to give that consent. 13  
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16
- 93 When electro convulsive therapy may be administered to persons other than involuntary patients** (cf 1990 Act, s 185) 17  
18
- (1) Electro convulsive therapy may be administered to a person (other than an involuntary patient) if: 19  
20
- (a) the person is capable of giving informed consent to the treatment and has given informed consent to the treatment, including a written consent in the form prescribed by the regulations, and 21  
22  
23
- (b) a certificate is given under this section by at least 2 medical practitioners, at least one of whom is a psychiatrist. 24  
25
- (2) A certificate under this section is a certificate in writing that, after considering the clinical condition and history of treatment of, and any appropriate alternative treatments for, the person, the medical practitioners are of the opinion that electro convulsive therapy is: 26  
27  
28  
29
- (a) a reasonable and proper treatment to be administered to the person, and 30  
31
- (b) necessary or desirable for the safety or welfare of the person. 32
- (3) An authorised medical officer who is unsure whether a person is capable of giving informed consent may apply to the Tribunal for an ECT consent inquiry to determine whether the person is capable of giving informed consent and has given that consent. 33  
34  
35  
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<b>94</b>	<b>When electro convulsive therapy may be administered to involuntary patients</b>	1 2
(1)	Electro convulsive therapy may be administered to an involuntary patient in accordance with an ECT determination made by the Tribunal at an ECT administration inquiry.	3 4 5
(2)	An authorised medical officer may apply to the Tribunal for an ECT administration inquiry about an involuntary patient if a certificate is given under this section by at least 2 medical practitioners, at least one of whom is a psychiatrist.	6 7 8 9
(3)	A certificate under this section is a certificate in writing that, after considering the clinical condition and history of treatment of, and any appropriate alternative treatments for, the patient, the medical practitioners are of the opinion that electro convulsive therapy is:	10 11 12 13
(a)	a reasonable and proper treatment to be administered to the patient, and	14 15
(b)	necessary or desirable for the safety or welfare of the patient.	16
<b>95</b>	<b>Tribunal to hold inquiries promptly</b>	17
	The Tribunal must hold an ECT inquiry about a person as soon as practicable after an application is made to it under this Division.	18 19
<b>96</b>	<b>Purpose and findings of ECT inquiries</b>	20
(1)	<b>ECT consent inquiries about voluntary patients</b>	21
	The Tribunal is, on an ECT consent inquiry, to determine whether or not the person is capable of giving informed consent to the administration of electro convulsive therapy and has given that consent.	22 23 24
(2)	<b>ECT administration inquiries about involuntary patients</b>	25
	The Tribunal is, on an ECT administration inquiry, to determine whether or not an ECT determination should be made in relation to the patient about whom the inquiry is held.	26 27 28
(3)	<b>ECT determinations that enable treatment of involuntary patients</b>	29
	An ECT determination is a determination:	30
(a)	that the patient is capable of giving informed consent to the electro convulsive therapy and has given that consent, or	31 32

- (b) that: 1
- (i) the patient is incapable of giving informed consent or is 2  
        capable of giving informed consent to the electro 3  
        convulsive therapy but has refused, or has neither 4  
        consented nor refused, to have the treatment administered, 5  
        and 6
- (ii) after considering the medical opinions and other 7  
        information placed before it, the Tribunal is satisfied the 8  
        electro convulsive therapy is a reasonable and proper 9  
        treatment and is necessary and desirable for the safety or 10  
        welfare of the patient. 11
- (4) **Maximum number of treatments for involuntary patients** 12
- In any ECT determination, the Tribunal must also specify the number 13  
of treatments that are approved (not exceeding 12). 14
- (5) **Increase in maximum number of treatments for involuntary patients** 15
- Despite subsection (4), the Tribunal may specify more than 12 16  
treatments if the Tribunal is satisfied that, having regard to the special 17  
circumstances of the case (including the success of any previous electro 18  
convulsive therapy), the higher number of treatments is justified. 19
- (6) **Procedures applying to ECT inquiries** 20
- For the purposes of an ECT inquiry, the Tribunal is to do the following: 21
- (a) in the case of an ECT administration inquiry, find out from the 22  
        patient about whom the inquiry is being held whether or not the 23  
        patient was aware of the authorised medical officer's obligation 24  
        to give notice of the inquiry and whether notice of the inquiry was 25  
        given in accordance with this Act, 26
- (b) inform the patient or person about whom the inquiry is being held 27  
        of the nature and possible results of the inquiry, if the patient or 28  
        person has not or appears not to have been informed of them, 29
- (c) inquire about the administration of any medication to the patient 30  
        or person about whom the inquiry is being held and take account 31  
        of its effect on the patient's or person's ability to communicate, 32
- (d) consider the views of the patient or person about whom the 33  
        inquiry is being held about the treatment, 34
- (e) consider any information before it. 35
- (7) **Duration of ECT determination** 36
- An ECT determination has effect for 6 months from the date the 37  
determination is made unless a shorter period is specified in the 38  
determination. 39

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- 97 Electro convulsive therapy register** 1
- (1) A register containing information relating to the administration of 2  
electro convulsive therapy is to be kept in relation to each mental health 3  
facility or other place at which the treatment is administered. 4
- (2) The medical superintendent of the facility or the person approved by the 5  
Director-General for any other place is to keep the register or cause it to 6  
be kept. 7
- (3) The register is to be in the form prescribed by the regulations. 8
- (4) Particulars of a proposed administration of electro convulsive therapy 9  
are to be entered in the register before the therapy is administered, and 10  
any differences in the particulars of treatment actually administered are 11  
to be subsequently noted and explained in the register. 12
- (5) The register may be inspected at any time by the Tribunal, the Principal 13  
official visitor, an official visitor or the Director-General. 14

## **Part 3 Other medical treatments** 15

### **98 Definitions** 16

In this Part: 17

*authorised medical practitioner* means a medical practitioner 18  
authorised in writing by the Director-General to exercise the functions 19  
of an authorised medical practitioner under this Part. 20

*special medical treatment* means: 21

- (a) any treatment, procedure, operation or examination that is 22  
intended, or is reasonably likely, to have the effect of rendering 23  
infertile the person on whom it is carried out, or 24
- (b) any other kind of treatment declared by the regulations to be 25  
special medical treatment for the purposes of this Part. 26

*surgical operation* means a surgical procedure, a series of related 27  
surgical operations or surgical procedures, and the administration of an 28  
anaesthetic for the purpose of medical investigation. 29

### **99 Emergency surgery for involuntary patients** 30

- (1) An authorised medical officer or authorised medical practitioner may 31  
consent to the performance of a surgical operation on an involuntary 32  
patient (other than a forensic patient not suffering from a mental illness) 33  
if of the opinion that: 34
- (a) the patient is incapable of giving consent to the operation or is 35  
capable of giving consent but refuses to give that consent or 36  
neither gives nor refuses to give that consent, and 37

- 
- (b) it is necessary, as a matter of urgency, to perform a surgical operation on the patient in order to save the patient's life or to prevent serious damage to the patient's health or to prevent the patient from suffering or continuing to suffer significant pain or distress. 1  
2  
3  
4  
5
- (2) An authorised medical officer or an authorised medical practitioner may consent to the performance of a surgical operation on a forensic patient not suffering from a mental illness if of the opinion that: 6  
7  
8
- (a) the patient is incapable of giving consent to the operation, and 9
- (b) it is necessary, as a matter of urgency, to perform a surgical operation on the patient in order to save the patient's life or to prevent serious damage to the patient's health or to prevent the patient from suffering or continuing to suffer significant pain or distress. 10  
11  
12  
13  
14
- (3) The consent is to be in writing and signed by the person giving the consent. 15  
16
- (4) The authorised medical officer of the mental health facility in which the involuntary patient is detained must, as soon as practicable after the performance of a surgical operation consented to under this section, notify the Tribunal of the operation. 17  
18  
19  
20
- 100 Authorised medical practitioner may consent to surgery** 21
- (1) An authorised medical officer may apply to an authorised medical practitioner for consent to the performance of a surgical operation on an involuntary patient. 22  
23  
24
- (2) On an application, the authorised medical practitioner may consent to the performance of a surgical operation on an involuntary patient (other than a forensic patient not suffering from a mental illness) if of the opinion that: 25  
26  
27  
28
- (a) the patient is incapable of giving consent to the operation or is capable of giving consent but refuses to give that consent or neither gives nor refuses to give that consent, and 29  
30  
31
- (b) it is desirable, having regard to the interests of the patient, to perform the surgical operation on the patient. 32  
33
- (3) An application must be made not earlier than 14 days after notice of the proposed application is given under section 78, but may be made sooner if: 34  
35  
36
- (a) the authorised medical officer is of the opinion that the urgency of the circumstances requires an earlier determination of the matter, or 37  
38  
39
- (b) the person notified indicates that the person does not object. 40



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(4)	The consent is to be in writing and signed by the person giving the consent.	1 2
<b>101</b>	<b>Tribunal may consent to surgery</b>	3
(1)	An authorised medical officer of a mental health facility may apply to the Tribunal for consent to the performance of a surgical operation on an involuntary patient detained in the facility.	4 5 6
(2)	On an application, the Tribunal may consent to the performance of a surgical operation on an involuntary patient (other than a forensic patient not suffering from a mental illness) if the Tribunal is of the opinion that:	7 8 9 10
(a)	the patient is incapable of giving consent to the operation or is capable of giving consent but refuses to give that consent or neither gives nor refuses to give that consent, and	11 12 13
(b)	it is desirable, having regard to the interests of the patient, to perform the surgical operation on the patient.	14 15
(3)	On an application, the Tribunal may consent to the performance of a surgical operation on a voluntary patient or a forensic patient not suffering from a mental illness if the Tribunal is of the opinion that:	16 17 18
(a)	the patient is incapable of giving consent to the operation, and	19
(b)	it is desirable, having regard to the interests of the patient, to perform the surgical operation on the patient.	20 21
(4)	An application for consent must be made not earlier than 14 days after notice of the proposed application is given under section 78, but may be made sooner if:	22 23 24
(a)	the authorised medical officer is of the opinion that the urgency of the circumstances requires an earlier determination of the matter, or	25 26 27
(b)	the person notified indicates that the person does not object.	28
<b>102</b>	<b>Special medical treatment</b>	29
(1)	A person must not carry out special medical treatment on a patient otherwise than in accordance with this Part, unless the person is a medical practitioner and:	30 31 32
(a)	is of the opinion that it is necessary, as a matter of urgency, to carry out special medical treatment on the patient in order to save the patient's life or to prevent serious damage to the patient's health, or	33 34 35 36

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- (b) consent to the treatment being carried out is given by the Tribunal in accordance with this Part.

Maximum penalty on indictment: imprisonment for 7 years.

- (2) This section does not apply to a patient who is a child to whom section 175 of the *Children and Young Persons (Care and Protection) Act 1998* applies.

### 103 Tribunal may consent to special medical treatment

- (1) An authorised medical officer of a mental health facility may apply to the Tribunal for consent to the carrying out of special medical treatment on an involuntary patient detained in the facility.
- (2) On an application, the Tribunal may consent to the carrying out of special medical treatment on a patient (other than prescribed special medical treatment) if the Tribunal is satisfied that it is necessary to prevent serious damage to the health of the patient.
- (3) The Tribunal may consent to the carrying out of prescribed special medical treatment if the Tribunal is satisfied that:
- (a) the treatment is the only or most appropriate way of treating the patient, and is manifestly in the best interests of the patient, and
  - (b) in so far as the National Health and Medical Research Council has prescribed guidelines that are relevant to the carrying out of the treatment—those guidelines have been or will be complied with as regards the patient.
- (4) The Tribunal must not consent to the carrying out of special medical treatment on a patient who is under the age of 16 years.
- (5) An application for consent must be made not earlier than 14 days after notice of the proposed application is given under section 78, but may be made sooner if the authorised medical officer is of the opinion that the urgency of the circumstances requires an earlier determination of the matter or the person notified agrees.
- (6) In this section:

***prescribed special medical treatment*** means special medical treatment referred to in paragraph (b) of the definition of ***special medical treatment*** in section 98.

### 104 Effect of consents

A consent given under this Part has the same effect as if it were given by the patient and the patient had the capacity to consent or, in the case of a child under the age of 14 years or a person under guardianship, by the person having capacity to consent on the child's or person's behalf.

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## Chapter 5 Administration

### Part 1 Administrative objectives and functions

- 105 Objectives of New South Wales public health system** (cf 1990 Act, s 6) 3
- The objectives of the New South Wales public health system under this 4  
Act in relation to mental health services are to establish, develop, 5  
promote, assist and encourage mental health services that: 6
- (a) ensure that provision is made for the care, treatment, control and 7  
rehabilitation of persons who are mentally ill or mentally 8  
disordered, and 9
  - (b) promote the establishment of community mental health services 10  
for the purpose of enabling the treatment in the community 11  
wherever possible of persons who are mentally ill or suffering 12  
from the effects of mental illness or who are mentally disordered, 13  
and 14
  - (c) develop, as far as practicable, standards and conditions of care 15  
and treatment for persons who are mentally ill or mentally 16  
disordered that are in all possible respects at least as beneficial as 17  
those provided for persons suffering from other forms of illness, 18  
and 19
  - (d) take into account the various religious, cultural and language 20  
needs of those persons, and 21
  - (e) are comprehensive and accessible, and 22
  - (f) permit appropriate intervention at an early stage of mental illness, 23  
and 24
  - (g) assist patients to live in the community through the provision of 25  
direct support and provide for liaison with carers and providers of 26  
community services. 27
- 106 Functions of Director-General** (cf 1990 Act, s 7) 28
- The Director-General has the following functions under this Act: 29
- (a) to promote research into mental illness, 30
  - (b) to assist in the training and education of persons responsible for 31  
the care and treatment of persons who are mentally ill or mentally 32  
disordered, 33
  - (c) to make recommendations and reports to the Minister about 34  
matters affecting the accommodation, maintenance, care, 35  
treatment, control and welfare of persons who are mentally ill or 36  
mentally disordered, 37

(d)	to make recommendations to the Minister about this Act or the regulations,	1 2
(e)	to promote informed public opinion on matters relating to public health by publishing reports and information concerning mental health,	3 4 5
(f)	to promote public understanding of involvement in measures for the prevention, treatment and care of mental illness and the care, treatment and control of persons who are mentally ill or mentally disordered,	6 7 8 9
(g)	to assist in, and promote, co-operation between different agencies involved in the provision of services for people who are mentally ill or mentally disordered and their carers,	10 11 12
(h)	any other functions conferred or imposed on the Director-General by or under this or any other Act.	13 14
<b>107</b>	<b>Delegation</b>	15
(1)	The Director-General may delegate the exercise of any function of the Director-General under this Act (other than this power of delegation) to:	16 17
(a)	any member of staff of the Department of Health, or	18
(b)	any member of staff of the NSW Health Service, or	19
(c)	any person, or any class of persons, authorised for the purposes of this section by the regulations.	20 21
(2)	A delegate may sub-delegate to a person referred to in subsection (1) (a) or (b) if the delegate is authorised in writing to do so by the Director-General.	22 23 24
<b>108</b>	<b>Annual report</b> (cf 1990 Act, s 301)	25
(1)	The Director-General must, as soon as practicable after 30 June in each year, cause to be prepared and forwarded to the Minister a report as to the matters relating to mental health services that are prescribed by the regulations for the 12 months preceding that date.	26 27 28 29
(2)	The Minister is required to lay the report, or cause it to be laid, before each House of Parliament as soon as practicable after the receipt by the Minister of the report.	30 31 32
(3)	A report made under the <i>Annual Reports (Departments) Act 1985</i> in respect of the Department of Health may include any report required to be made under this section.	33 34 35

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## **Part 2 Mental health facilities**

### **Division 1 Declared mental health facilities**

#### **109 Establishment of declared mental health facilities (cf 1990 Act, s 208)**

- (1) The Director-General, by order published in the Gazette:
  - (a) may declare any premises to which this section applies and that are specified or described in the order to be a declared mental health facility, and
  - (b) may, in the same or another order so published, name the premises so specified or described, and
  - (c) may, in the same or another order so published, limit the provisions of this Act or the purposes under this Act for which the facility is a declared mental health facility.
- (2) Without limiting subsection (1), an order may do any of the following:
  - (a) designate a declared mental health facility as a facility of a specified class,
  - (b) designate the purposes for which a mental health facility of a specified class may be used,
  - (c) impose restrictions on the use of a mental health facility for specified purposes,
  - (d) impose any other conditions in relation to the operation of the facility as a mental health facility.
- (3) This section applies to the following premises:
  - (a) premises that belong to or are under the control of the Crown or a person acting on behalf of the Crown,
  - (b) a public hospital within the meaning of the *Health Services Act 1997*,
  - (c) premises that the owner or person who has control of the premises has agreed, by an instrument in writing given to the Director-General, to being premises to which this section applies.

#### **110 Declared mental health facilities that are private mental health facilities**

A declared mental health facility that is also a private mental health facility ceases to be a declared mental health facility if the licence for the facility is cancelled under Division 2.

<b>111</b>	<b>Appointment of medical superintendents</b> (cf 1990 Act, s 209)	1
(1)	The Director-General must, by instrument in writing, appoint a medical practitioner as medical superintendent of a declared mental health facility (other than a private mental health facility).	2 3 4
(2)	The Director-General may (by the same or different instruments) appoint a medical practitioner as the medical superintendent of more than one declared mental health facility.	5 6 7
<b>112</b>	<b>Appointment of deputy medical superintendents</b> (cf 1990 Act, s 210)	8
(1)	The Director-General may, by instrument in writing, appoint a medical practitioner as deputy medical superintendent of a declared mental health facility.	9 10 11
(2)	The deputy medical superintendent of a declared mental health facility has the functions of the medical superintendent of the facility during the absence, for any reason, of the medical superintendent or during a vacancy in the office of medical superintendent.	12 13 14 15
(3)	The Director-General may (by the same or different instruments) appoint a medical practitioner as the deputy medical superintendent of more than one declared mental health facility.	16 17 18
<b>113</b>	<b>Directors and deputy directors of community treatment</b> (cf 1990 Act, ss 115, 150)	19 20
(1)	The Director-General must appoint the holder of a specified office as the director of community treatment of a mental health facility that implements treatment plans under community treatment orders and may appoint the holder of a specified office as the deputy director of community treatment of the facility.	21 22 23 24 25
(2)	An office may not be specified unless, in the opinion of the Director-General, it qualifies the holder to exercise the functions conferred or imposed on a director or deputy director by or under this Act.	26 27 28 29
(3)	A person appointed as a director of community treatment must be a health professional who is appropriately qualified for the position by education, training and experience.	30 31 32
(4)	The Director-General may:	33
(a)	revoke the appointment of the holder of a specified office as the director of community treatment of a mental health facility and appoint the holder of another specified office as the director, or	34 35 36
(b)	revoke the appointment of the holder of a specified office as the deputy director of community treatment of a mental health	37 38

facility and appoint the holder of another specified office as the deputy director or specify that there is to be no deputy director, or	1 2
(c) appoint the holder of a specified office as the deputy director of community treatment of a mental health facility for which no deputy director has been appointed.	3 4 5
(5) The director of community treatment of a mental health facility may delegate a function conferred or imposed by this Act on the director (other than this power of delegation) to the deputy director.	6 7 8
<b>114 Psychiatric case managers</b> (cf 1990 Act, s 116)	9
(1) The director of community treatment of a declared mental health facility may appoint an officer or employee of the facility as the psychiatric case manager of an affected person under a community treatment order.	10 11 12
(2) A person may not be appointed as a psychiatric case manager unless, in the opinion of the director, the person is qualified to supervise the treatment, and monitor the progress, of the affected person under a community treatment order.	13 14 15 16
(3) The same person may be the director or deputy director of community treatment of a declared mental health facility and the psychiatric case manager of an affected person.	17 18 19
<b>Division 2 Private mental health facilities</b>	20
<b>115 Application for licence</b> (cf 1990 Act, s 211)	21
(1) A person may apply to the Director-General for a licence to keep premises as a private mental health facility for the admission, care and treatment of patients.	22 23 24
(2) An application must be:	25
(a) in a form approved by the Director-General, and	26
(b) accompanied by a plan of the premises in respect of which the licence is sought and the prescribed fee.	27 28
<b>116 Grant or refusal of licence</b> (cf 1990 Act, s 212)	29
(1) The Director-General may grant an application for a licence under this Division or may refuse to grant the application.	30 31
(2) If the Director-General grants the application, the Director-General:	32
(a) must specify the maximum number of patients who may be kept or treated at the private mental health facility, and	33 34
(b) must specify any other terms and conditions to which the licence is subject, as the Director-General thinks fit, and	35 36

(c)	must issue the applicant with a licence in a form approved by the Director-General.	1 2
<b>117</b>	<b>Duration of licence</b> (cf 1990 Act, s 213)	3
	A licence remains in force until it is cancelled in accordance with this Division.	4 5
<b>118</b>	<b>Annual statement and licence fee</b> (cf 1990 Act, s 214)	6
	A licensee must, on or before 31 December in each year:	7
(a)	forward to the Director-General a statement in a form approved by the Director-General relating to the conduct of the premises to which the licence relates and the admission of patients to those premises and the care and treatment of patients on those premises, and	8 9 10 11 12
(b)	pay to the Director-General the prescribed annual licence fee.	13
<b>119</b>	<b>Duplicate licence</b> (cf 1990 Act, s 215)	14
	If the Director-General is satisfied that a licence has been lost, destroyed or damaged, the Director-General may, on payment of the prescribed fee, issue a duplicate licence to the licensee.	15 16 17
<b>120</b>	<b>Cancellation of licences—generally</b> (cf 1990 Act, s 216)	18
	The Director-General may cancel a licence:	19
(a)	if the annual licence fee payable in respect of the licence has not been paid by the due date, or	20 21
(b)	if the licensee requests the Director-General, in writing, to cancel the licence, or	22 23
(c)	if the premises to which the licence relates have ceased to be kept as a mental health facility for the admission, care and treatment of patients, or	24 25 26
(d)	if the premises to which the licence relates cease to be the subject of a licence under the <i>Private Hospitals and Day Procedure Centres Act 1988</i> .	27 28 29
<b>121</b>	<b>Cancellation of licences—failure to show cause</b> (cf 1990 Act, s 217)	30
(1)	The Director-General may, by notice in writing served on the holder of a licence, require the holder to show cause, by a date and time specified in the notice (being a date not less than 1 month after the date of service of the notice), why the licence should not be cancelled.	31 32 33 34



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(2)	The Director-General may cancel the licence if, by the date and time referred to in the notice, the holder of the licence has not shown sufficient cause why the licence should not be cancelled.	1 2 3
<b>122</b>	<b>Variation of licence</b> (cf 1990 Act, s 218)	4
(1)	The holder of a licence may, at any time, apply to the Director-General for the variation of any term or condition to which the licence is subject.	5 6
(2)	The Director-General may, on an application being made:	7
(a)	vary any term or condition to which a licence is subject, or	8
(b)	refuse to grant the application.	9
<b>123</b>	<b>Provision of medical services in private mental health facilities</b> (cf 1990 Act, s 219)	10 11
	The holder of a licence must make such arrangements as may be approved by the Director-General for the provision of medical services to patients in the private mental health facility.	12 13 14
<b>124</b>	<b>Medical superintendents</b> (cf 1990 Act, ss 220, 221)	15
(1)	The holder of a licence must appoint a medical practitioner approved by the Director-General as the medical superintendent of the private mental health facility.	16 17 18
(2)	The medical superintendent of a private mental health facility must cause to be kept such records and furnish to the Director-General such particulars as are approved by the Minister in respect of the admission, treatment, discharge, removal, absence with or without leave or death of each patient admitted to the facility.	19 20 21 22 23
<b>125</b>	<b>Deputy medical superintendents</b> (cf 1990 Act, ss 222, 223)	24
(1)	The holder of a licence may appoint a medical practitioner as the deputy medical superintendent of the private mental health facility.	25 26
(2)	The appointment of the medical practitioner must be approved by the Director-General before it takes effect.	27 28
(3)	The deputy medical superintendent of a private mental health facility has the functions of the medical superintendent of the facility during the absence, for any reason, of the medical superintendent or during a vacancy in the office of medical superintendent.	29 30 31 32
<b>126</b>	<b>Unlicensed private mental health facilities</b> (cf 1990 Act, s 224)	33
	A person keeping premises is guilty of an offence against this Act if:	34
(a)	the premises were the subject of a licence that has ceased to be in force, and	35 36

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- (b) at any time after 2 months after the licence ceases to be in force,  
there is in or on the premises a person who was a patient  
immediately before the licence ceased to be in force and who has  
not ceased to be a patient.

Maximum penalty: 50 penalty units.

**127 Certain private hospitals to be licensed** (cf 1990 Act, s 225) 6

A person must not conduct a private hospital within the meaning of the  
*Private Hospitals and Day Procedure Centres Act 1988* at which a  
person is being treated primarily for a mental illness, unless the person  
who conducts the hospital is the holder of a licence granted under this  
Division.

Maximum penalty: 50 penalty units.

**Part 3 Official visitors and accredited persons** 13

**128 Principal official visitor** (cf 1990 Act, ss 226, 227) 14

- (1) The Minister may, by instrument in writing, appoint a person to be the  
Principal official visitor. 15  
16
- (2) The Principal official visitor has the following functions: 17
- (a) to advise and assist official visitors in the exercise of the  
functions conferred or imposed on them by or under this Act, 18  
19
  - (b) to oversee the official visitor program conducted under this Act, 20
  - (c) to report to the Minister, as directed by the Minister, about the  
exercise of the functions of the Principal official visitor and  
official visitors, 21  
22  
23
  - (d) to refer matters raising any significant public mental health issues  
or patient safety or care or treatment issues to the Minister or any  
other appropriate person or body, 24  
25  
26
  - (e) to act as an advocate to the Minister for consumers of mental  
health care to promote the proper resolution of issues arising in  
the mental health system, 27  
28  
29
  - (f) any other function conferred on the Principal official visitor by or  
under this or any other Act. 30  
31

**129 Official visitors** (cf 1990 Act, s 228) 32

- (1) The Minister must, by instrument in writing, appoint official visitors. 33
- (2) A person may be appointed as an official visitor if the person has any of  
the following qualifications: 34  
35
- (a) the person is a medical practitioner, 36

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(b)	the person is a psychologist registered under the <i>Psychologists Act 2001</i> ,	1
(c)	the person has any other qualifications prescribed by the regulations,	2
(d)	the person is otherwise a suitably qualified or interested person.	3
(3)	An official visitor has the following functions:	4
(a)	to refer matters raising any significant public mental health issues or patient safety or care or treatment issues to the Principal official visitor or any other appropriate person or body,	5
(b)	to act as an advocate for patients to promote the proper resolution of issues arising in the mental health system, including issues raised by the primary carer of a patient or person detained under this Act,	6
(c)	to inspect mental health facilities as directed by the Principal official visitor and in accordance with this Part,	7
(d)	any other function conferred on official visitors by or under this or any other Act.	8
<b>130</b>	<b>General provisions relating to the Principal official visitor and official visitors</b> (cf 1990 Act, s 229)	9
	Schedule 4 has effect with respect to the Principal official visitor and official visitors.	10
<b>131</b>	<b>Inspections of mental health facilities by official visitors</b> (cf 1990 Act, s 230)	11
(1)	The Principal official visitor must ensure that 2 or more official visitors visit each mental health facility in accordance with the regulations.	12
(2)	For the purposes of any such visit, at least one of the official visitors is to be a person referred to in section 129 (2) (a), (b) or (c) and at least one other of the official visitors is to be a person referred to in section 129 (2) (d).	13
(3)	On a visit to a mental health facility, the official visitors must:	14
(a)	so far as practicable, inspect every part of the facility at least once, and	15
(b)	so far as practicable, make any necessary inquiries about the care, treatment and control of voluntary patients and the patients or persons detained in the facility or who are subject to community treatment orders and being treated by the facility, and	16
(c)	examine and sign the registers, books, records and other documents produced to them in accordance with this Part, and	17

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(d)	enter the fact of their visit in the official visitors book at the facility, together with any observations they think it appropriate to make.	1 2 3
(4)	The official visitors must report to the Principal official visitor about each visit in accordance with any arrangements made by the Principal official visitor.	4 5 6
(5)	A visit may be made with or without previous notice and at any time of the day or night, and be of such length, as the official visitors think appropriate.	7 8 9
(6)	A visit may be made at the request of the primary carer of a patient or person treated at or by the mental health facility.	10 11
<b>132</b>	<b>Obligations to facilitate exercise of functions by official visitors</b> (cf 1990 Act, s 231)	12 13
(1)	The medical superintendent of a declared mental health facility or the administrator of a private mental health facility must do the following for the purposes of any visit by official visitors:	14 15 16
(a)	allow the official visitors to have access to and to inspect every part of the facility,	17 18
(b)	permit the official visitors to see and to interview each patient or person detained in the facility or each affected person under a community treatment order being treated by the facility,	19 20 21
(c)	give full and true answers to the best of their knowledge to all questions that the official visitors ask in relation to the facility, the patients and other persons or affected persons,	22 23 24
(d)	produce to the official visitors any registers, books, records, orders, certificates, returns and other documents relating to the admission, care, treatment and control of the patients and other persons and the discharge of persons required by the official visitors.	25 26 27 28 29
(2)	The administrator of a private mental health facility must, at the end of each month, report in writing to the medical superintendent as to the functions exercised under this section by the administrator during that month.	30 31 32 33
<b>133</b>	<b>Reports to Minister</b> (cf 1990 Act, s 233)	34
	Nothing in this Part prevents an official visitor from reporting to the Minister with respect to any matter arising from or relating to the exercise by the official visitor of the official visitor's functions.	35 36 37

<b>134</b>	<b>Request by patient or other person to see official visitor</b> (cf 1990 Act, s 234)	1 2
(1)	A patient or person detained in a mental health facility or an affected person under a community treatment order who is being treated by a mental health facility, or the primary carer of any such person, may notify the medical superintendent or director of community treatment of the facility, orally or in writing, that the patient or person or carer desires to see an official visitor.	3 4 5 6 7 8
(2)	The medical superintendent or director must inform an official visitor of the patient's or person's or primary carer's desire to see an official visitor not later than 2 days after receiving the notification.	9 10 11
<b>135</b>	<b>Official visitors not personally liable</b> (cf 1990 Act, s 234A)	12
	A matter or thing done or omitted by an official visitor does not, if the matter or thing was done or omitted in good faith for the purpose of executing this Act or the regulations, subject the official visitor personally to any action, liability, claim or demand.	13 14 15 16
<b>136</b>	<b>Accredited persons</b> (cf 1990 Act, s 287A)	17
(1)	The Director-General may appoint a person as an accredited person for the purposes of this Act.	18 19
(2)	The Director-General may appoint the holder of an office as an accredited person and may impose conditions on the exercise by a person or the holder of an office of the functions of an accredited person.	20 21 22 23
<b>Part 4 Inspection powers</b>		24
<b>137</b>	<b>Inspection of mental health facilities</b> (cf 1990 Act, s 237)	25
(1)	The Director-General may inquire into the administration, management and services of a mental health facility and for that purpose may cause every mental health facility to be visited and inspected from time to time by officers authorised by the Director-General.	26 27 28 29
(2)	A visit or inspection may be carried out by an authorised officer appointed under section 124 of the <i>Health Services Act 1997</i> , if the officer's certificate of authority is expressed to extend to such visits or inspections.	30 31 32 33
(3)	On an inspection, an authorised officer:	34
(a)	may, at any time, make any inspections, investigations and inquiries with respect to the care, treatment or control of patients or persons detained in a facility or with respect to the	35 36 37

	management of a facility the authorised officer considers necessary, and	1
	(b) must make any such inspections, investigations and inquiries that are directed by the Director-General.	2
	(4) An inspection may be made with or without previous notice and at any time of the day or night, and be of such length, as the authorised officer thinks appropriate.	3
		4
<b>138</b>	<b>Powers of authorised officer to require information, evidence, production of records</b> (cf 1990 Act, s 238)	5
	(1) An authorised officer inspecting a mental health facility under this Part may, by notice in writing, require a person to do any one or more of the following:	6
	(a) to furnish to the authorised officer the information required by the authorised officer concerning any of the matters with respect to which an authorised officer is, by or under this Part, authorised to make inspections, investigations and inquiries,	7
	(b) to attend and give evidence before the authorised officer concerning any such matters,	8
	(c) to produce all books, documents or other records in the person's custody or under the person's control concerning any such matters.	9
	(2) An authorised officer may require evidence to be given on oath, and either orally or in writing, and for that purpose the authorised officer may administer an oath.	10
	(3) A person must not, without reasonable excuse, refuse or fail to comply with a requirement made under this section.	11
	Maximum penalty: 50 penalty units.	12
<b>139</b>	<b>Protection from incrimination</b>	13
	(1) A person is not excused from a requirement under this Part to make a statement, to give or furnish information, to answer a question or to produce a document on the ground that the statement, information, answer or document might incriminate the person or make the person liable to a penalty.	14
	(2) However, any statement made or any information or answer given or furnished by a natural person in compliance with a requirement under this Part is not admissible in evidence against the person in criminal proceedings (except proceedings for an offence under this Part) if:	15
	(a) the person objected at the time to doing so on the ground that it might incriminate the person, or	16

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|-----|---|---------------------|
| (b) | the person was not warned on that occasion that the person may object to making the statement or giving or furnishing the information or answer on the ground that it might incriminate the person.                         | 1<br>2<br>3<br>4    |
| (3) | Any document produced by a person in compliance with a requirement under this Part is not inadmissible in evidence against the person in criminal proceedings on the ground that the document might incriminate the person. | 5<br>6<br>7<br>8    |
| (4) | Further information obtained as a result of a document produced, a statement made or information or answer given or furnished in compliance with a requirement under this Part is not inadmissible on the ground:           | 9<br>10<br>11<br>12 |
| (a) | that the document, statement, information or answer had to be produced, made, given or furnished, or  | 13<br>14            |
| (b) | that the document, statement, information or answer might incriminate the person.   | 15<br>16            |

## Chapter 6 Mental Health Review Tribunal

### Part 1 The Tribunal

#### 140 Constitution of the Tribunal (cf 1990 Act, s 252)

- (1) There is constituted by this Act a Mental Health Review Tribunal.
- (2) The Tribunal has the functions conferred or imposed on it by or under this Act or any other law.
- (3) Schedule 5 has effect with respect to the Tribunal.

#### 141 Membership of Tribunal

- (1) The Tribunal consists of the following members appointed by the Governor:
  - (a) the President of the Tribunal who is to be appointed as a full-time member,
  - (b) 1 or more Deputy Presidents of the Tribunal who may be appointed as full-time or part-time members,
  - (c) other members (if any) who may be appointed as full-time or part-time members.
- (2) The members (including the President and any Deputy President) are to be appointed from the following classes of persons:
  - (a) Australian legal practitioners,
  - (b) psychiatrists,
  - (c) persons having, in the opinion of the Governor, other suitable qualifications or experience, including at least 1 person selected from a group of persons who are nominated by consumer organisations.
- (3) The members are to include 1 or more women and 1 or more persons of ethnic background and a different person is to be appointed to satisfy each of those qualifications, even though a person so appointed may possess both of those qualifications.
- (4) If, at the time at which an appointment is required to be made of a person selected from a group of persons who are nominated by consumer organisations no such group has been nominated, the Governor may appoint as a member instead a person who, in the opinion of the Governor, has suitable qualifications or experience.



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<b>142</b>	<b>Registrar and other officers of the Tribunal</b> (cf 1990 Act, s 256)	1
(1)	A Registrar and such staff as may be necessary to enable the Tribunal to exercise its functions may be employed under Chapter 1A of the <i>Public Sector Employment and Management Act 2002</i> in the Government Service.	2 3 4 5
(2)	The Registrar has the functions conferred or imposed on the Registrar by or under this Act or any other law or by the Tribunal in the exercise of its functions.	6 7 8
<b>143</b>	<b>Authentication of documents</b> (cf 1990 Act, ss 254, 257)	9
(1)	The Tribunal is to have a seal of which judicial notice is to be taken.	10
(2)	Every document requiring authentication by the Tribunal is sufficiently authenticated without the seal of the Tribunal if it is signed by the President or a Deputy President.	11 12 13
<b>144</b>	<b>Judicial notice of certain signatures</b> (cf 1990 Act, s 258)	14
	Judicial notice is to be taken of the signature of the President, a Deputy President or the Registrar of the Tribunal when appearing on a document issued by the Tribunal.	15 16 17
<b>145</b>	<b>Certain proceedings prohibited</b> (cf 1990 Act, s 259)	18
	No proceedings lie against the Tribunal, a member of the Tribunal or a member of staff of the Tribunal for or on account of any act, matter or thing done or ordered to be done or omitted or suffered to be done by the Tribunal, member or member of staff, and purporting to be done, ordered, omitted or suffered for the purposes of carrying out the provisions of this or any other Act, if the Tribunal, member or member of staff has acted in good faith.	19 20 21 22 23 24 25
<b>146</b>	<b>Application of Defamation Act 2005 to proceedings of Tribunal</b> (cf 1990 Act, s 260)	26 27
	Section 27 of the <i>Defamation Act 2005</i> makes provision for a defence of absolute privilege in respect of publications of defamatory matter in the course of proceedings of the Tribunal.	28 29 30
	<b>Note.</b> Section 27 (2) (b) of the <i>Defamation Act 2005</i> provides that the defence of absolute privilege is available in respect of defamatory matter that is published in the course of proceedings of an Australian court or Australian tribunal, including (but not limited to) the following:	31 32 33 34
(a)	the publication of matter in any document filed or lodged with, or otherwise submitted to, the court or tribunal (including any originating process),	35 36 37
(b)	the publication of matter while giving evidence before the court or tribunal,	38 39

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- (c) the publication of matter in any judgment, order or other determination of the court or tribunal. 1  
2
- The term **Australian tribunal** is defined in section 4 of that Act to mean any tribunal (other than a court) established by or under a law of an Australian jurisdiction that has the power to take evidence from witnesses before it on oath or affirmation (including a Royal Commission or other special commission of inquiry). 3  
4  
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- The Mental Health Review Tribunal is an Australian tribunal for the purposes of the *Defamation Act 2005* because it is a tribunal that has the power under section 151 (5) of this Act to take evidence from witnesses under oath. 8  
9  
10
- 147 Annual report** (cf 1990 Act, s 261) 11
- (1) As soon as practicable after 1 September, but on or before 1 December, in each year, the President must prepare and forward to the Minister a report as to the exercise by the Tribunal of its functions. 12  
13  
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- (2) Without limiting subsection (1), the report is to include the following matters relating to persons taken to mental health facilities under Part 2 of Chapter 3: 15  
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17
- (a) the number of persons so taken and the provisions of this Act under which they were so taken, 18  
19
- (b) the number of persons detained as mentally ill persons or mentally disordered persons, 20  
21
- (c) the number of persons in respect of whom a mental health inquiry was held, 22  
23
- (d) the number of persons detained as involuntary patients for 3 months or less and the number of persons otherwise detained as involuntary patients. 24  
25  
26
- (3) The report is also to include any matters the Minister may direct or that are prescribed by the regulations. 27  
28
- (4) The Minister must lay the report, or cause it to be laid, before each House of Parliament as soon as practicable after receiving the report. 29  
30
- (5) A report made under the *Annual Reports (Departments) Act 1985* in respect of the Department of Health may include any report required to be made under this section. 31  
32  
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- 148 Delegation** (cf 1990 Act, s 263) 34
- (1) The President may delegate to any of the following persons any of the functions of the President, other than this power of delegation: 35  
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- (a) a member of the Tribunal, 37
- (b) the Registrar of the Tribunal, 38
- (c) a person of a class prescribed by the regulations. 39

- (2) A delegate may sub-delegate to a person referred to in subsection (1) (a), (b) or (c) any function delegated by the President if the delegate is authorised in writing to do so by the President.

## **Part 2 Procedures of the Tribunal**

### **149 Application of Part**

This Part, and any regulations made under this Part, apply to any proceedings of the Tribunal under this or any other Act.

### **150 Composition of the Tribunal** (cf 1990 Act, ss 264, 265)

- (1) The Tribunal is to be constituted by one or more members nominated by the President for the exercise of its functions.
- (2) For the purpose of exercising any of its functions (other than in relation to forensic patients), the Tribunal must consist of at least 1 member who is to be the President, a Deputy President or a member who is an Australian legal practitioner.
- (3) The President may nominate other members of the following kinds:
- (a) a member who is a psychiatrist,
- (b) a member who (not being an Australian legal practitioner) has other suitable qualifications or experience.
- (4) For the purpose of exercising its functions in relation to forensic patients, the Tribunal must consist of the President or a Deputy President, a member who is a psychiatrist and a member who (not being an Australian legal practitioner) has other suitable qualifications or experience.
- (5) The regulations may make provision for or with respect to the members who are to constitute the Tribunal for the exercise of any of its functions.

### **151 Procedure at meetings of Tribunal to be informal** (cf 1990 Act, s 267)

- (1) Meetings of the Tribunal are to be conducted with as little formality and technicality, and with as much expedition, as the requirements of this Act, the *Mental Health (Criminal Procedure) Act 1990*, the regulations and as the proper consideration of the matters before the Tribunal permit.
- (2) In determining any matter relating to a forensic patient or other patient or a person detained in a mental health facility, the Tribunal is not bound by the rules of evidence but may inform itself of any matter in such manner as it thinks appropriate and as the proper consideration of the matter before the Tribunal permits.

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- (3) The proceedings of the Tribunal are to be open to the public. 1
- (4) However, if the Tribunal is satisfied that it is desirable to do so for the 2  
welfare of a person who has a matter before the Tribunal or for any other 3  
reason, it may (of its own motion or on the application of the person or 4  
another person appearing at the proceedings) make any one or more of 5  
the following orders: 6
- (a) an order that the hearing be conducted wholly or partly in private, 7
- (b) an order prohibiting or restricting the publication or broadcasting 8  
of any report of proceedings before the Tribunal, 9
- (c) an order prohibiting or restricting the publication of evidence 10  
given before the Tribunal, whether in public or in private, or of 11  
matters contained in documents lodged with the Tribunal or 12  
received in evidence before the Tribunal, 13
- (d) an order prohibiting or restricting the disclosure to some or all of 14  
the parties to the proceedings of evidence given before the 15  
Tribunal, or of the contents of a document lodged with the 16  
Tribunal or received in evidence by the Tribunal, in relation to 17  
the proceedings. 18
- Note.** Section 162 prohibits the publication or broadcasting of the name of a 19  
person involved in Tribunal proceedings or other material that may identify any 20  
such person, except with the consent of the Tribunal. 21
- (5) The President or a Deputy President or the chairperson of a meeting of 22  
the Tribunal may administer an oath to any person giving evidence 23  
before the Tribunal. 24
- (6) The President or a Deputy President of the Tribunal has, in the exercise 25  
of his or her functions as a member, the same protections and immunity 26  
as a Judge of the Supreme Court has in the performance of his or her 27  
duties as a Judge. 28
- 152 Legal representation of mentally ill persons and other persons 29**
- The fact that a person is suffering from mental illness or a 30  
developmental disability of mind or is suffering from a mental condition 31  
that is not a mental illness or a developmental disability of mind is 32  
presumed not to be an impediment to the representation of the person by 33  
an Australian legal practitioner before the Tribunal. 34
- 153 Determination whether a person is a mentally ill person or mentally 35  
disordered person (cf 1990 Act, s 268) 36**
- (1) A member of the Tribunal must not determine, for the purposes of this 37  
Act or the *Mental Health (Criminal Procedure) Act 1990*, that a person 38  
is a mentally ill person or a mentally disordered person unless the 39

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member is satisfied, on the balance of probabilities, that the person is a mentally ill person or a mentally disordered person.	1 2
(2) In determining whether a person is a mentally ill person, a member is to give due regard to the following:	3 4
(a) any cultural factors relating to the person that may be relevant to the determination,	5 6
(b) any evidence given to the Tribunal by an expert witness concerning the person's cultural background and its relevance to any question of mental illness.	7 8 9
<b>154 Rights of appearance and representation</b> (cf 1990 Act, s 274)	10
(1) A person appointed to assist the Tribunal in a matter may appear before the Tribunal in relation to any matter in respect of which the person is appointed.	11 12 13
(2) A forensic patient having any matter before the Tribunal must, unless the forensic patient decides that he or she does not want to be represented, be represented by an Australian legal practitioner or, with the approval of the Tribunal, by another person of his or her choice.	14 15 16 17
(3) A patient, other than a forensic patient, or a person detained in a mental health facility having any matter before the Tribunal may be represented by an Australian legal practitioner or, with the approval of the Tribunal, by another person of his or her choice.	18 19 20 21
<b>155 Adjournments</b> (cf 1990 Act, s 271)	22
(1) The Tribunal may from time to time adjourn its proceedings to such times, dates and places and for such reasons as it thinks fit.	23 24
(2) If the Tribunal adjourns proceedings, a person having a matter before the Tribunal who is detained in a mental health facility is to continue to be detained in the facility unless the person is discharged or allowed to be absent from the facility under another provision of this Act.	25 26 27 28
<b>156 Inspection etc of medical records</b> (cf 1990 Act, s 276)	29
(1) A patient or person having any matter before the Tribunal is, unless the Tribunal otherwise determines, entitled to inspect or otherwise have access to any medical records in the possession of any person relating to the patient or person.	30 31 32 33
(2) A representative of a person having any matter before the Tribunal is entitled, at any time before or during the consideration of that matter by the Tribunal, to inspect or otherwise have access to any medical records in the possession of any person relating to the firstmentioned person.	34 35 36 37

- (3) Subject to any order or direction of the Tribunal, in relation to an inspection under subsection (2) of, or other access under that subsection to, any medical record relating to a person:
  - (a) if a medical practitioner warns the representative of the person that it may be harmful to communicate to the person, or any other person, specified information contained in those medical records, the representative is to have full and proper regard to that warning, and
  - (b) the representative is not obliged to disclose to the person any information obtained by virtue of the inspection or other access.

**157 Production of evidence** (cf 1990 Act, s 278)

- (1) The Tribunal may of its own motion or on the application of a person having any matter before the Tribunal issue a summons in the prescribed form requiring the person to whom the summons is addressed to do either or both of the following things:
  - (a) to attend as a witness at a meeting of the Tribunal,
  - (b) to attend at a meeting of the Tribunal and to produce any documents in the possession or under the control of the person relating to any matter before the Tribunal and specified in the summons.
- (2) For the purposes of subsection (1), a summons is issued by the Tribunal if it is signed by the President or a Deputy President.
- (3) The regulations may make provision for or with respect to authorising compliance with a summons to produce any documents by the production of the documents at a place specified in the summons at any time before the meeting of the Tribunal at which the documents are required to be produced.
- (4) A person to whom a summons is addressed is entitled to receive:
  - (a) if the summons was issued by the Tribunal of its own motion, from the Tribunal, or
  - (b) if the summons was issued by the Tribunal on the application of a person having any matter before the Tribunal, from the person, the amounts payable for compliance with a subpoena under the *Uniform Civil Procedure Rules 2005*.
- (5) A person:
  - (a) who is served with a summons addressed to the person under this section, and
  - (b) to whom, at the time of service, is tendered an amount that is sufficient to cover the person's travelling and other out-of-pocket

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expenses in attending the meeting of the Tribunal specified in the summons and producing anything required by the summons to be produced,	1 2 3
must not, without cause, fail or refuse to obey the summons.	4
Maximum penalty: 50 penalty units.	5
<b>158 Assistance of interpreters</b> (cf 1990 Act, s 275)	6
A person having any matter before the Tribunal who is unable to communicate adequately in English but who is able to communicate adequately in another language is entitled to be assisted, when appearing before the Tribunal in relation to the matter, by a competent interpreter.	7 8 9 10 11
<b>159 Record of proceedings</b>	12
(1) Proceedings before the Tribunal are to be recorded.	13
(2) Regulations may be made for or with respect to the manner in which the evidence may be recorded and the authentication of evidence or of transcripts of evidence given in proceedings.	14 15 16
(3) The regulations may provide for the circumstances in which evidence given in proceedings is to be transcribed.	17 18
<b>160 Tribunal procedure generally</b>	19
(1) Subject to this Part and the regulations, the procedure for the calling of, and for the conduct of business at, any meeting of the Tribunal is to be as determined by the Tribunal.	20 21 22
(2) The regulations may make provision for or with respect to the following matters:	23 24
(a) the procedure for the calling of, and for the conduct of business at, any meeting of the Tribunal,	25 26
(b) the provision of assistance to the Tribunal by relevant qualified persons for the purposes of determining any matter,	27 28
(c) representations that may be made by victims in relation to proceedings before the Tribunal and victim impact statements,	29 30
(d) notification of family members and victims of persons of proceedings before the Tribunal,	31 32
(e) reports and information required to be provided to the Tribunal, including provisions relating to the matters to be dealt with in reports and the making of reports available to the Tribunal,	33 34 35
(f) the recording of proceedings and determinations of the Tribunal,	36
(g) the service of documents on the Tribunal.	37

<b>161</b>	<b>Contempt of Tribunal</b> (cf 1990 Act, s 291)	1
	A person must not refuse, neglect or for any reason fail to obey or	2
	comply with an order, direction, decision or determination, under this or	3
	any other Act, of the Tribunal.	4
	Maximum penalty: 50 penalty units.	5
<b>162</b>	<b>Publication of names</b>	6
(1)	A person must not, except with the consent of the Tribunal, publish or	7
	broadcast the name of any person:	8
(a)	to whom a matter before the Tribunal relates, or	9
(b)	who appears as a witness before the Tribunal in any proceedings,	10
	or	11
(c)	who is mentioned or otherwise involved in any proceedings	12
	under this Act or the <i>Mental Health (Criminal Procedure) Act</i>	13
	<i>1990</i> ,	14
	whether before or after the hearing is completed.	15
	Maximum penalty: 50 penalty units or imprisonment for 12 months, or	16
	both.	17
(2)	This section does not prohibit the publication or broadcasting of an	18
	official report of the proceedings of the Tribunal that includes the name	19
	of any person the publication or broadcasting of which would otherwise	20
	be prohibited by this section.	21
(3)	For the purposes of this section, a reference to the name of a person	22
	includes a reference to any information, picture or material that	23
	identifies the person or is likely to lead to the identification of the	24
	person.	25



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## Chapter 7 Jurisdiction of Supreme Court

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| <b>163 Appeals to the Court</b> (cf 1990 Act, s 281)                           | 2  |
| (1) A person may appeal to the Court against:                                  | 3  |
| (a) a determination of the Tribunal made with respect to the person,           | 4  |
| or   | 5  |
| (b) the failure or refusal of the Tribunal to make a determination with        | 6  |
| respect to the person in accordance with the provisions of this                | 7  |
| Act.   | 8  |
| (2) An appeal is to be made subject to and in accordance with the rules of     | 9  |
| the Court.   | 10 |
| <b>164 Power of the Court on appeals</b> (cf 1990 Act, ss 283, 284)            | 11 |
| (1) The Court has, for the purposes of hearing and disposing of an appeal,     | 12 |
| all the functions and discretions of the Tribunal in respect of the subject-   | 13 |
| matter of the appeal, in addition to any other functions and discretions       | 14 |
| it has.  | 15 |
| (2) An appeal is to be by way of a new hearing and new evidence or             | 16 |
| evidence in addition to, or in substitution for, the evidence given in         | 17 |
| relation to the determination of the Tribunal, or the failure or refusal of    | 18 |
| the Tribunal to make a determination, in respect of which the appeal is        | 19 |
| made may be given on the appeal.   | 20 |
| (3) The Court is to have regard to the provisions of this Act and any other    | 21 |
| matters it considers to be relevant in determining an appeal.                  | 22 |
| (4) The decision of the Court on an appeal is, for the purposes of this or any | 23 |
| other Act or instrument, taken to be, where appropriate, the final             | 24 |
| determination of the Tribunal and is to be given effect to accordingly.        | 25 |
| (5) In hearing and deciding an appeal, the Court may be assisted by 2          | 26 |
| assessors selected by the Court from the panel nominated for the               | 27 |
| purposes of this Chapter, if the Court considers it appropriate to do so.      | 28 |
| (6) An assessor is to sit with the Court in the hearing of an appeal and has   | 29 |
| power to advise, but not to adjudicate, on any matter relating to the          | 30 |
| appeal.  | 31 |
| <b>165 Panel of assessors</b> (cf 1990 Act, s 282)                             | 32 |
| (1) The Minister must, from time to time, nominate in writing to the Chief     | 33 |
| Justice a panel of persons who, in the opinion of the Minister, have           | 34 |
| appropriate qualifications and sufficient experience to act as assessors       | 35 |
| in the hearing of appeals by the Court under this Chapter.                     | 36 |

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- (2) A nomination made under this section is to be accompanied by an oath taken by the person nominated, in the form prescribed by the regulations. 1  
2  
3
- (3) Sections 11, 11A and 12 of the *Oaths Act 1900* apply to and in respect of an oath required to be taken under this section as if the oath were an oath required to be taken under Part 2 of that Act. 4  
5  
6
- 166 Jurisdiction of Court to order discharge or transfer of detained person** 7  
(cf 1990 Act, s 285) 8
- (1) The Court must order the medical superintendent of a mental health facility to bring a person before the Court for examination at a time specified in the order if the Court receives information on oath or has reason or cause to suspect: 9  
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12
- (a) that the person is not a mentally ill person or a mentally 13  
disordered person and is detained in the facility, or 14
- (b) that the person is a mentally ill person or a mentally disordered 15  
person detained in the facility and that other care of a less 16  
restrictive kind is appropriate and reasonably available to the 17  
person, or 18
- (c) that the person is a forensic patient who is wrongly detained in 19  
the facility. 20
- (2) The Court must order that a person (other than a forensic patient) 21  
examined under this section be immediately discharged from the mental 22  
health facility in which the person is detained if, on examination, the 23  
medical superintendent is unable to prove on the balance of 24  
probabilities: 25
- (a) that the person is a mentally ill person or a mentally disordered 26  
person, or 27
- (b) if the person is a mentally ill person or a mentally disordered 28  
person, that no other care of a less restrictive kind is appropriate 29  
and reasonably available to the person. 30
- (3) The Court must order that a forensic patient examined under this section 31  
be immediately transferred to a correctional centre (within the meaning 32  
of the *Crimes (Administration of Sentences) Act 1999*) if, on 33  
examination under this section, the medical superintendent is unable to 34  
prove that the patient is not wrongly detained in the mental health 35  
facility. 36

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<b>167</b>	<b>Other jurisdiction of the Court not affected</b> (cf 1990 Act, s 286)	1
	Nothing in this Chapter derogates from or otherwise affects the jurisdiction of the Court under any Act or other law.	2 3
<b>168</b>	<b>Tribunal members not liable for costs</b>	4
	The Tribunal or any member of the Tribunal is not liable for any costs relating to a determination of the Tribunal, or the failure or refusal of the Tribunal to make a determination, in respect of which an appeal is made under this Chapter, or of the appeal.	5 6 7 8

## Chapter 8 Interstate application of mental health laws

### Part 1 Preliminary

#### 169 Object of Chapter (cf 1990 Act, s 286A)

The object of this Chapter is to make provision with respect to the following matters:

- (a) the interstate transfer of patients under mental health legislation,
- (b) the interstate recognition of documents enabling detention of persons under mental health legislation,
- (c) the treatment of interstate persons and persons in this State subject to community treatment orders or similar orders made in other States,
- (d) the apprehension of persons subject to certain interstate warrants or orders, or otherwise liable to apprehension, under mental health legislation.

#### 170 Definitions (cf 1990 Act, s 286B)

In this Chapter:

**agreement** means an agreement under section 171.

**corresponding law** means a law declared by the regulations to be a law corresponding to this Act for the purposes of this Chapter.

**interstate community treatment order** means an order made under a corresponding law that is of a class declared by the regulations to be an interstate community treatment order for the purposes of this Chapter.

**State** includes an internal or an external Territory of the Commonwealth.

#### 171 Authority to enter into agreements (cf 1990 Act, s 286C)

- (1) The Minister may enter into an agreement with a Minister of another State for or with respect to any of the following:
  - (a) the application of mental health laws of this State or the other State,
  - (b) the transfer, detention, care, treatment and apprehension of persons in this State and the other State under mental health laws,
  - (c) the making of community treatment orders in respect of residents of this State and the other State under mental health laws,
  - (d) the recognition, implementation and enforcement of community treatment orders of this State in the other State and the

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	recognition, implementation and enforcement of community treatment orders of the other State in this State,	1
	(e) administrative matters and other matters ancillary to, or consequential on, any such matters or any other matters contained in this Chapter.	2
	(2) Nothing in this section limits the power of the Minister to enter into any agreement relating to mental health laws.	3
		4
		5
<b>172</b>	<b>Corresponding laws, documents and interstate community treatment orders</b> (cf 1990 Act, s 286D)	6
	(1) The regulations may declare that a specified law of another State relating to mental health is a law corresponding to this Act for the purposes of this Chapter.	7
	(2) The regulations may declare that a specified class of order relating to the treatment of persons in the community under a corresponding law of another State is an interstate community treatment order for the purposes of this Chapter.	8
		9
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<b>173</b>	<b>New South Wales officers may exercise functions under corresponding laws</b> (cf 1990 Act, s 286E)	13
	Subject to the provisions of any agreement under this Part, an authorised medical officer or other person authorised by the Minister for the purposes of this section, may exercise any function conferred on him or her by or under a corresponding law or an agreement under this Part.	14
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- (b) any other person who is authorised to do so by the regulations or under a provision of a corresponding law of the other State. 1  
2
  - (3) The regulations may make provision for or with respect to the following matters: 3  
4
    - (a) the handing over of custody of a person referred to in subsection (1) by persons in this State, 5  
6
    - (b) the persons (including interstate persons) who may take any such person to a mental health facility in another State under this section, 7  
8  
9
    - (c) the mental health facilities to which a person may be taken under this section and the places taken to be mental health facilities of another State for the purposes of this section. 10  
11  
12
- 175 Effect of certificates** (cf 1990 Act, s 286G) 13
 

A mental health certificate ceases to have any effect under this Act if the person concerned is taken to and detained in a mental health facility in another State. 14  
15  
16
- 176 Transfer of patients from this State** (cf 1990 Act, s 286H) 17
  - (1) A person who is detained as an involuntary patient in a mental health facility in this State may be transferred to a mental health facility in another State, if the transfer is permitted by or under a provision of a corresponding law of the other State and is in accordance with the regulations. 18  
19  
20  
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22
  - (2) A person who is transferred to a mental health facility in another State under this section ceases to be an involuntary patient on admission to the facility. 23  
24  
25
  - (3) A person may be taken to a mental health facility in another State under this section by a person who is authorised to do so by the regulations or under a provision of a corresponding law of the other State. 26  
27  
28
  - (4) The regulations may make provision for or with respect to the following matters: 29  
30
    - (a) procedures for authorising the transfer of a patient under this section and for notifying any such transfer or proposed transfer, 31  
32
    - (b) criteria for authorising the transfer of a patient under this section, 33
    - (c) the handing over of custody of any such patient by persons in this State, 34  
35
    - (d) the persons (including interstate persons) who may take a patient to a mental health facility in another State under this section, 36  
37

(e)	the mental health facilities to which a patient may be taken under this section and the places taken to be mental health facilities for the purposes of this section.	1 2 3
(5)	Section 80 does not apply to a transfer under this section.	4
<b>Division 2</b>	<b>Transfer of persons to this State</b>	5
<b>177</b>	<b>Admission of interstate persons to mental health facilities in this State</b> (cf 1990 Act, s 286I)	6 7
(1)	A person who may be taken to and detained in a mental health facility in another State under a corresponding law of that State may instead be taken to and detained in a declared mental health facility in this State.	8 9 10
(2)	A person may be taken to a declared mental health facility in this State under this section by:	11 12
(a)	a person who is authorised by this Act to take a person to a declared mental health facility, or to apprehend a person and take the person to a declared mental health facility, if this is permitted by or under the law of the other State, or	13 14 15 16
(b)	any other person who is authorised to do so by the regulations or under a provision of a corresponding law of the other State.	17 18
(3)	The regulations may make provision for or with respect to the following matters:	19 20
(a)	the handing over of custody of a person referred to in subsection (1) to persons in this State,	21 22
(b)	the persons (including interstate persons) who may take any such person to a declared mental health facility in this State under this section,	23 24 25
(c)	the declared mental health facilities to which a person may be taken under this section.	26 27
<b>178</b>	<b>Application of Act to persons brought to mental health facility from outside this State</b> (cf 1990 Act, s 286J)	28 29
	This Act applies to a person who is taken to and detained in a mental health facility under this Division in the same way as it applies to a person taken to and detained in a mental health facility under Part 2 of Chapter 3.	30 31 32 33
<b>179</b>	<b>Transfer of interstate persons to mental health facilities in this State</b> (cf 1990 Act, s 286K)	34 35
(1)	A person who is involuntarily detained as a patient in a mental health facility in another State under a corresponding law may be transferred	36 37

to a declared mental health facility in this State, if the transfer is authorised under a provision of a corresponding law of the other State and accepted by the medical superintendent of the mental health facility in this State.

- (2) A person may be taken to a declared mental health facility in this State under this section by a person who is authorised to do so by the regulations or under a provision of a corresponding law of the other State.
- (3) However, a medical superintendent may not accept the transfer of a person unless the medical superintendent considers that it is likely that the person is a mentally ill person or a mentally disordered person.
- (4) The regulations may make provision for or with respect to the following matters:
  - (a) the procedures for authorising and arranging the receipt of a person under this section,
  - (b) the persons (including interstate persons) who may take a patient to a mental health facility in this State under this section,
  - (c) the receiving of custody of any such person by persons in this State,
  - (d) the period within which any such person must be reviewed by the Tribunal after being transferred to a mental health facility in this State.

#### **180 Persons transferred taken to be involuntary patients** (cf 1990 Act, s 286L)

A person transferred to a mental health facility under this Division is taken to be an involuntary patient and the provisions of this Act apply as if the person first became an involuntary patient on the date of the person's transfer to a mental health facility in this State.

### **Part 3 Community treatment orders and other orders**

#### **181 Community treatment orders relating to interstate persons** (cf 1990 Act, s 286M)

A community treatment order may be made under Part 3 of Chapter 3 for an affected person who does not reside in this State, if the mental health facility implementing the order is located in this State.

#### **182 Interstate implementation of New South Wales orders**

- (1) A mental health facility of another State, or any person who provides services on behalf of any such mental health facility, may treat a person subject to a community treatment order in this State, and exercise any



other functions of a mental health facility under this Act, for the purposes of implementing and enforcing the community treatment order.	1 2 3
(2) The regulations may make provision for or with respect to the following matters:	4 5
(a) the bodies or places that are taken to be mental health facilities of another State for the purposes of this section,	6 7
(b) when the treatment may be given or functions may be exercised under subsection (1),	8 9
(c) the effect in this State of a community treatment order being recognised by another State.	10 11
<b>183 Provision of services under interstate community treatment order</b>	12
A declared mental health facility, or any person who provides services on behalf of a declared mental health facility, may treat a person subject to an interstate community treatment order, and exercise any other functions for the purposes of implementing and enforcing the interstate community treatment order, if permitted to do so by the law of another State.	13 14 15 16 17 18
<b>184 Recognition of interstate community treatment orders</b>	19
(1) An interstate community treatment order may be recognised in this State as if it were a community treatment order made by the Tribunal under this Act, if the conditions for recognition set out in the regulations are met.	20 21 22 23
(2) An interstate community treatment order recognised under this section is taken to be a community treatment order made under this Act and this Act applies accordingly, except as provided by the regulations.	24 25 26
(3) The regulations may make provision for or with respect to the declared mental health facilities that may give effect to an interstate community treatment order recognised under this section.	27 28 29
<b>Part 4 Apprehension of persons absent from mental health facility or in breach of orders</b>	30 31
<b>185 Recognition of warrants and orders</b> (cf 1990 Act, s 286O)	32
A warrant or an order, or other document authorising the apprehension of a person, under a corresponding law is recognised in this State if the conditions for recognition set out in the regulations are met.	33 34 35

- 186 Apprehension of interstate persons absent without leave or in breach of corresponding orders** (cf 1990 Act, s 286P) 1  
2
- (1) A person who is the subject of a warrant or an order or other document recognised in this State, or who is otherwise liable to be apprehended, under a provision of a corresponding law under which the person may be apprehended and taken to a mental health facility may be apprehended at any time: 3  
4  
5  
6  
7
- (a) by a police officer, or 8
- (b) by a person who is authorised to do so by the regulations or under a provision of a corresponding law of the other State. 9  
10
- (2) On being apprehended the person may be conveyed to and detained in a mental health facility in this State or the other State (if this is permitted by or under a provision of a corresponding law of the other State). 11  
12  
13
- (3) This Act applies to a person conveyed to and detained in a mental health facility under this section as if the person had been taken to and detained in a mental health facility under Part 2 of Chapter 3. 14  
15  
16
- 187 Regulations relating to apprehension of persons** (cf 1990 Act, s 286Q) 17
- The regulations may make provision for or with respect to the following matters: 18  
19
- (a) the kinds of warrants, orders or other documents that may be recognised in this State for the purposes of this Part, 20  
21
- (b) the conditions (if any) to be met before a warrant, order or other document can be recognised in this State, 22  
23
- (c) the circumstances when a person is taken to be liable to be apprehended under a corresponding law, 24  
25
- (d) the persons (including interstate persons) who may apprehend a person under this Part, 26  
27
- (e) the mental health facilities and places to which a person can be taken under this Part (whether in this State or another State), 28  
29
- (f) the actions (including transfer to the other State) that may be taken in respect of a person detained under this Part. 30  
31

## Chapter 9 Miscellaneous

<b>188</b>	<b>Restrictions on holding of certain offices</b> (cf 1990 Act, s 287)	2
(1)	A person may not hold more than one of the following offices at the same time:	3
(a)	authorised medical officer,	4
(b)	Principal official visitor or official visitor,	5
(c)	member of the Tribunal,	6
(d)	Magistrate, but only where the holder of the office is holding a mental health inquiry.	7
(2)	If a person contravenes this section, nothing invalidates any act of the person during the period of the contravention.	8
(3)	The Minister may remove a person who contravenes this section from any office referred to in subsection (1), other than the office of member of the Tribunal.	9
<b>189</b>	<b>Disclosure of information</b> (cf 1990 Act, s 289)	10
(1)	A person must not disclose any information obtained in connection with the administration or execution of this Act or the regulations unless the disclosure is made:	11
(a)	with the consent of the person from whom the information was obtained, or	12
(b)	in connection with the administration or execution of this Act, or	13
(c)	without limiting paragraph (b), to a primary carer of a person in connection with the provision of care or treatment to the person under this Act, or	14
(d)	for the purposes of any legal proceedings arising out of this Act or the regulations or of any report of any such proceedings, or	15
(e)	with other lawful excuse.	16
	Maximum penalty: 50 penalty units.	17
(2)	A person is not required to comply with subsection (1) if non-compliance is necessarily implied or reasonably contemplated under an Act or law.	18
<b>190</b>	<b>Act does not limit or affect other powers</b>	19
(1)	Nothing in this Act limits or affects any power conferred on a police officer or any other person by or under any other law with respect to stopping, searching or detaining a person (whether or not a patient) or taking any such person to any place.	20

- (2) Nothing in this Act prevents an authorised medical officer from taking any action that the officer thinks fit to protect a patient or person detained in a mental health facility, or any other person in a mental health facility, from serious physical harm.

**191 Liability of police officers and health care professionals exercising functions under this Act** (cf 1990 Act, s 294)

- (1) Any police officer, health care professional or ambulance officer who, in good faith, exercises a function that is conferred or imposed on that person by or under this Act is not personally liable for any injury or damage caused by the exercise of that function.
- (2) Nothing in this section, or any other provision of this Act or the regulations, relieves a medical practitioner or other person from liability in respect of carrying out medical treatment on a patient or other person to which the medical practitioner or person would have been subject had the treatment been carried out with the patient's or other person's consent.
- (3) Nothing in this section affects any exclusion from liability provided by another provision of this Act or any other law.
- (4) In this section, *health care professional* means a person registered under a health registration Act within the meaning of the *Health Care Complaints Act 1993*.

**192 Service of documents** (cf 1990 Act, s 295)

- (1) A document that is authorised or required by this Act or the regulations to be given to or served on any person may be served by:
- (a) in the case of a natural person:
- (i) delivering it to the person personally, or
  - (ii) sending it by post to the address specified by the person for the giving or service of documents or, if no such address is specified, the residential or business address of the person last known to the person giving or serving the document, or
  - (iii) sending it by facsimile transmission to the facsimile number of the person, or
- (b) in the case of a body corporate:
- (i) leaving it with a person apparently of or above the age of 16 years at, or by sending it by post to, the head office, a registered office or a principal office of the body corporate or to an address specified by the body corporate for the giving or service of documents, or

(ii)	sending it by facsimile transmission to the facsimile number of the body corporate.	1 2
(2)	Nothing in this section affects the operation of any provision of a law or of the rules of a court authorising a document to be served on a person in any other manner.	3 4 5
<b>193</b>	<b>Amendment of certain documents</b> (cf 1990 Act, s 296)	6
(1)	A document by virtue of which a person is admitted to a mental health facility and that is incorrect or defective in any particular may be amended by the person who signed the document:	7 8 9
(a)	within 28 days after the admission of the person, and	10
(b)	with the approval of the authorised medical officer.	11
(2)	A document that is amended in accordance with this section is taken to have had effect in its amended form on and from its original date.	12 13
(3)	If an incorrect or defective document is not amended in accordance with this section, the authorised medical officer:	14 15
(a)	may order the discharge of the person admitted to the mental health facility by virtue of the document, or	16 17
(b)	may do such things as are necessary to obtain a document in substitution for that document.	18 19
(4)	A document obtained in substitution for another document is to be taken to have had effect as if it had come into existence on the date on which the document for which it is substituted came into or purported to come into existence.	20 21 22 23
<b>194</b>	<b>Approved forms</b> (cf 1990 Act, s 302A)	24
	The Minister may approve such forms (other than prescribed forms required by this Act) as may be necessary or convenient for the administration of this Act.	25 26 27
<b>195</b>	<b>Role of objects provisions</b>	28
	The provisions of sections 3, 68 and 105 are intended to give guidance in the administration of this Act and do not create, or confer on any person, any right or entitlement enforceable at law.	29 30 31
<b>196</b>	<b>Regulations</b> (cf 1990 Act, s 302)	32
(1)	The Governor may make regulations, not inconsistent with this Act, for or with respect to any matter that by this Act is required or permitted to be prescribed or that is necessary or convenient to be prescribed for carrying out or giving effect to this Act.	33 34 35 36

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| <p>(2) In particular, the regulations may make provision for or with respect to the following:</p> <p>(a) the functions, responsibilities, obligations and liabilities of medical superintendents, other authorised medical officers, medical officers and directors of community treatment,</p> <p>(b) the exercise by the Principal official visitor and the official visitors of their functions,</p> <p>(c) matters relating to mental health inquiries,</p> <p>(d) the establishment and functions of a registry or registries to assist in the administration of the Tribunal and in the holding of mental health inquiries under this Act,</p> <p>(e) procedures for approval of operations, treatments or procedures that are permitted to be carried out under this Act,</p> <p>(f) standards of patient care,</p> <p>(g) the establishment, in relation to a mental health facility, of a patient care review committee and the functions of such a committee,</p> <p>(h) matters relating to the rights and privileges of patients and persons under detention in mental health facilities,</p> <p>(i) the establishment of, and payments to and from, funds and accounts for the keeping of money received on behalf of individual patients or for the benefit, use or enjoyment of patients generally and the payment of amounts by or on behalf of patients,</p> <p>(j) the use of patients' funds and the investment and management of any such funds and accounts,</p> <p>(k) prescribing the forms required by this Act,</p> <p>(l) prescribing the keeping and form of such books, records, registers or other documents, or the furnishing of such reports or statistics, as may be necessary or convenient for the administration of this Act,</p> <p>(m) the modification of Part 3 of Chapter 3 in its application to the making of a community treatment order under section 47 of the <i>Mental Health (Criminal Procedure) Act 1990</i>.</p> <p>(3) A regulation may apply, adopt or incorporate, with or without modification, any publication as in force at a particular time or from time to time.</p> <p>(4) A regulation may create an offence punishable by a penalty not exceeding 5 penalty units.</p> | <p>1<br/>2<br/>3<br/>4<br/>5<br/>6<br/>7<br/>8<br/>9<br/>10<br/>11<br/>12<br/>13<br/>14<br/>15<br/>16<br/>17<br/>18<br/>19<br/>20<br/>21<br/>22<br/>23<br/>24<br/>25<br/>26<br/>27<br/>28<br/>29<br/>30<br/>31<br/>32<br/>33<br/>34<br/>35<br/>36<br/>37<br/>38</p> |
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<b>197</b>	<b>Proceedings for offences</b> (cf 1990 Act, s 299)	1
	(1) Proceedings for an offence against this Act or the regulations are to be dealt with summarily before a Local Court.	2
		3
	(2) Proceedings for an offence under section 102 (Special medical treatment) are to be dealt with on indictment.	4
		5
<b>198</b>	<b>Savings, transitional and other provisions</b>	6
	Schedule 6 has effect.	7
<b>199</b>	<b>Amendment of other Acts</b>	8
	The Acts specified in Schedule 7 are amended as set out in that Schedule.	9
		10
<b>200</b>	<b>Repeal of Mental Health Act 1990 No 9</b>	11
	The <i>Mental Health Act 1990</i> is repealed.	12
<b>201</b>	<b>Review of Act</b>	13
	(1) The Minister is to review this Act to determine whether the policy objectives of the Act remain valid and whether the terms of the Act remain appropriate for securing those objectives.	14
		15
		16
	(2) The review is to be undertaken as soon as possible after the period of 5 years from the date of assent to this Act.	17
		18
	(3) A report on the outcome of the review is to be tabled in each House of Parliament within 12 months after the end of the period of 5 years.	19
		20

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**Schedule 1      Medical certificate as to examination or  
observation of person**

(Section 19)

**Mental Health Act 2006**

**Part 1**

I, ..... (Medical Practitioner/accredited person)  
(name in full—use block letters)

of ..... certify that  
on ..... 20.....  
immediately before or shortly before completing this certificate,  
at .....

(state place where examination/observation took place)

I personally examined/personally observed .....  
..... for a period of .....

(name of person in full)

.....  
(state length of examination/observation)

I certify the following matters:

1. I am of the opinion that the person examined/observed by me is a mentally ill person suffering from mental illness/or a mentally disordered person and that there are reasonable grounds for believing the person's behaviour for the time being is so irrational as to justify a conclusion on reasonable grounds that temporary care, treatment or control of the person is necessary:
  - (a) in the case of a mentally ill person:
    - (i) for the person's own protection from serious harm, or
    - (ii) for the protection of others from serious harm, or
  - (b) in the case of a mentally disordered person:
    - (i) for the person's own protection from serious physical harm, or
    - (ii) for the protection of others from serious physical harm.
2. I have satisfied myself, by such inquiry as is reasonable having regard to the circumstances of the case, that the person's involuntary admission to and detention in a mental health facility are necessary and that no other care of a less restrictive kind is appropriate and reasonably available to the person.



3.	Incidents and/or abnormalities of behaviour and conduct (a) observed by myself and (b) communicated to me by others (state name, relationship and address of each informant) are:	1
	(a) .....	2
	.....	3
	.....	
	(b) .....	
	.....	
4.	The general medical and/or surgical condition of the person is as follows:	4
	.....	
	.....	
5.	The following medication (if any) has been administered for purposes of psychiatric therapy or sedation:	5
	.....	6
	.....	
6.	I am not a near relative or the primary carer of the person.	7
7.	I have/do not have a pecuniary interest, directly or indirectly, in a private mental health facility. I have/do not have a near relative/partner/assistant who has such an interest. Particulars of the interest are as follows:	8
	.....	9
	.....	10
	.....	
	Made and signed this ..... day of ..... 20.....	11
	Signature:.....	12
<b>Part 2</b>		13
	The following persons may transport a person to a mental health facility: a member of staff of the NSW Health Service, an ambulance officer, a police officer.	14
	If the assistance of a police officer is required, this Part of the Form must be completed.	15
	YOU SHOULD NOT REQUEST THIS ASSISTANCE UNLESS THERE ARE SERIOUS CONCERNS RELATING TO THE SAFETY OF THE PERSON OR OTHER PERSONS IF THE PERSON IS TAKEN TO A MENTAL HEALTH FACILITY WITHOUT THE ASSISTANCE OF A POLICE OFFICER	16
	I have assessed the risk and I am of the opinion, in relation to .....	17
	.....	18
	(name of person in full)	19
		20
		21
		22

Mental Health Bill 2006

Schedule 1 Medical certificate as to examination or observation of person

that there are serious concerns relating to the safety of the person or other persons if the person is taken to a mental health facility without the assistance of a police officer. The reason for me being of this opinion is .....

.....  
.....  
.....  
.....  
.....

(include any information known about the patient relevant to the risk)

Made and signed ..... 20.....

Signature:.....

**Notes**

1 Sections 13–16 of the *Mental Health Act 2006* state:

**13 Criteria for involuntary admission etc as mentally ill person or mentally disordered person**

A person is a mentally ill person or a mentally disordered person for the purpose of:

- (a) the involuntary admission of the person to a mental health facility or the detention of the person in a facility under this Act, or
- (b) determining whether the person should be subject to a community treatment order or be detained or continue to be detained involuntarily in a mental health facility,

if, and only if, the person satisfies the relevant criteria set out in this Part.

**14 Mentally ill persons**

- (1) A person is a mentally ill person if the person is suffering from mental illness and, owing to that illness, there are reasonable grounds for believing that care, treatment or control of the person is necessary:

- (a) for the person's own protection from serious harm, or
- (b) for the protection of others from serious harm.

- (2) In considering whether a person is a mentally ill person, the continuing condition of the person, including any likely deterioration in the person's condition and the likely effects of any such deterioration, are to be taken into account.

**15 Mentally disordered persons**

A person (whether or not the person is suffering from mental illness) is a mentally disordered person if the person's behaviour for the time being is so irrational as to justify a conclusion on reasonable grounds that temporary care, treatment or control of the person is necessary:

- (a) for the person's own protection from serious physical harm, or
- (b) for the protection of others from serious physical harm.

16	<b>Certain words or conduct may not indicate mental illness or disorder</b>	1
(1)	A person is not a mentally ill person or a mentally disordered person merely because of any one or more of the following:	2
		3
(a)	the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular political opinion or belief,	4
		5
(b)	the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular religious opinion or belief,	6
		7
(c)	the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular philosophy,	8
		9
(d)	the person expresses or refuses or fails to express or has expressed or refused or failed to express a particular sexual preference or sexual orientation,	10
		11
		12
(e)	the person engages in or refuses or fails to engage in, or has engaged in or refused or failed to engage in, a particular political activity,	13
		14
(f)	the person engages in or refuses or fails to engage in, or has engaged in or refused or failed to engage in, a particular religious activity,	15
		16
(g)	the person engages in or has engaged in a particular sexual activity or sexual promiscuity,	17
		18
(h)	the person engages in or has engaged in immoral conduct,	19
(i)	the person engages in or has engaged in illegal conduct,	20
(j)	the person has developmental disability of mind,	21
(k)	the person takes or has taken alcohol or any other drug,	22
(l)	the person engages in or has engaged in anti-social behaviour,	23
(m)	the person has a particular economic or social status or is a member of a particular cultural or racial group.	24
		25
(2)	Nothing in this Part prevents, in relation to a person who takes or has taken alcohol or any other drug, the serious or permanent physiological, biochemical or psychological effects of drug taking from being regarded as an indication that a person is suffering from mental illness or other condition of disability of mind.	26
		27
		28
		29
2	In addition to matters ascertained as a consequence of personally examining or observing the person, account may be taken of other matters not so ascertained where those matters:	30
		31
(a)	arise from a previous personal examination of the person, or	32
(b)	are communicated by a reasonably credible informant.	33
3	In the <i>Mental Health Act 2006</i> , <b>mental illness</b> is defined as follows:	34
	<b>mental illness</b> means a condition that seriously impairs, either temporarily or permanently, the mental functioning of a person and is characterised by the presence in the person of any one or more of the following symptoms:	35
		36
		37
(a)	delusions,	38
(b)	hallucinations,	39
(c)	serious disorder of thought form,	40
(d)	a severe disturbance of mood,	41
(e)	sustained or repeated irrational behaviour indicating the presence of any one or more of the symptoms referred to in paragraphs (a)–(d).	42
		43

Mental Health Bill 2006

Schedule 1      Medical certificate as to examination or observation of person

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4	In the <i>Mental Health Act 2006</i> , <b>primary carer</b> is defined as follows:	1
71	<b>Primary carer</b>	2
(1)	The <b>primary carer</b> of a person (the <b>patient</b> ) for the purposes of this Act is:	3
(a)	the guardian of the patient, or	4
(b)	the parent of a patient who is a child (subject to any nomination by a patient referred to in paragraph (c)), or	5 6
(c)	if the patient is over the age of 14 years and is not a person under guardianship, the person nominated by the patient as the primary carer under this Part under a nomination that is in force, or	7 8 9
(d)	if the patient is not a patient referred to in paragraph (a) or (b) or there is no nomination in force as referred to in paragraph (c):	10 11
(i)	the spouse of the patient, if any, if the relationship between the patient and the spouse is close and continuing, or	12 13
(ii)	any person who is primarily responsible for providing support or care to the patient (other than wholly or substantially on a commercial basis), or	14 15 16
(iii)	a close friend or relative of the patient.	17
(2)	In this section:	18
	<b>close friend or relative</b> of a patient means a friend or relative of the patient who maintains both a close personal relationship with the patient through frequent personal contact and a personal interest in the patient's welfare and who does not provide support to the patient wholly or substantially on a commercial basis.	19 20 21 22
5	For admission purposes, this certificate is valid only for a period of 5 days, in the case of a person who is a mentally ill person, or 1 day, in the case of a person who is a mentally disordered person, after the date on which the certificate is given.	23 24 25

## Schedule 2      Mental health inquiries

1

(Section 34 (3))

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### 1      General conduct of inquiries

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(1)    The Magistrate may appoint a person to assist the Magistrate in respect of a mental health inquiry and a person so appointed may appear before the Magistrate during the holding of the inquiry.

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(2)    An inquiry is to be open to the public.

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(3)    However, if the Magistrate is satisfied that it is desirable to do so for the welfare of the person before the inquiry or for any other reason, the Magistrate may (of his or her own motion or on the application of the person or another person appearing at the inquiry) make any one or more of the following orders:

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(a)    an order that the inquiry be conducted wholly or partly in private,

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(b)    an order prohibiting or restricting the publication or broadcasting of any report of proceedings before the Magistrate,

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(c)    an order prohibiting or restricting the publication of evidence given before the inquiry, whether in public or in private, or of matters contained in documents lodged with the inquiry or received in evidence at the inquiry,

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(d)    an order prohibiting or restricting the disclosure to some or all of the parties to the proceedings of evidence given at the inquiry, or of the contents of a document lodged with the inquiry or received in evidence at the inquiry.

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**Note.** Clause 7 prohibits the publication or broadcasting of the name of a person involved in an inquiry or other material that may identify any such person, except with the consent of the Magistrate.

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(4)    An assessable person who is unable to communicate adequately in English but who is able to communicate adequately in another language is entitled to be assisted by an interpreter when appearing at the inquiry.

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(5)    The Magistrate may administer an oath to any person giving evidence at an inquiry.

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(6)    The assessable person is to be represented at an inquiry by an Australian legal practitioner or (with the leave of the Magistrate) another person chosen by the assessable person, unless the assessable person decides that he or she does not wish to be represented.

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(7)    Any other person appearing at a mental health inquiry may (with the leave of the Magistrate) be represented by an Australian legal practitioner.

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- (8) The primary carer of an assessable person may, with the leave of the Magistrate, appear at an inquiry. 1  
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- 2 Notification and information given to assessable person to be checked by Magistrate** 3  
4
- (1) As soon as practicable after the beginning of a mental health inquiry, the Magistrate must ask the assessable person whether the person: 5  
6
- (a) has been given a written statement, in the prescribed form, of the person's legal rights and other entitlements, as required by section 74, and 7  
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9
- (b) whether the person has been informed of the duty imposed under section 76 on the authorised medical officer relating to the giving of the notice specified in that section. 10  
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12
- (2) As soon as practicable after the beginning of a mental health inquiry, the Magistrate must ascertain from the authorised medical officer whether the written statement and notice referred to in subclause (1) have been given or all such things as are reasonably practicable have been done to give that statement or notice, as the case requires. 13  
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- 3 Legal representation of mentally ill persons and other persons** 18
- The fact that a person is suffering from mental illness or a developmental disability of mind or is suffering from a mental condition that is neither a mental illness nor a developmental disability of mind is presumed not to be an impediment to the representation of the person by an Australian legal practitioner at a mental health inquiry. 19  
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23
- 4 Adjournments** 24
- (1) The Magistrate may, from time to time, adjourn a mental health inquiry for a period not exceeding 14 days. 25  
26
- (2) Without limiting subclause (1), the Magistrate may adjourn the inquiry if the Magistrate is not satisfied: 27  
28
- (a) that the assessable person has been informed of the duty imposed under section 76 on the authorised medical officer relating to the giving of the notice specified in that section, or 29  
30  
31
- (b) that the notice specified in the section has been given or all such things as are reasonably practicable have been done to give that notice. 32  
33  
34
- (3) The Magistrate may adjourn an inquiry under this clause only if: 35
- (a) the Magistrate is of the opinion that it is in the best interests of the assessable person to do so, and 36  
37

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- (b) the Magistrate has considered any certificates given under this Act available to the Magistrate. 1  
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  - (4) If an inquiry is adjourned, the assessable person is to continue to be detained in the mental health facility unless the person is discharged or allowed to be absent from the facility under another provision of this Act. 3  
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## **5 Summons to produce evidence**

- (1) A Magistrate holding a mental health inquiry may on his or her own motion or on the application of an assessable person or a person given leave to appear at an inquiry issue a summons in the form prescribed by the regulations requiring the person to whom the summons is addressed to do either or both of the following things: 8  
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    - (a) to attend as a witness at the inquiry, 13
    - (b) to attend at the inquiry and to produce any documents in the possession or under the control of the person relating to the inquiry and specified in the summons. 14  
15  
16
  - (2) The regulations may make provision for or with respect to authorising compliance with a summons to produce any documents by the production of the documents at a place specified in the summons at any time before the inquiry at which the documents are required to be produced. 17  
18  
19  
20  
21
  - (3) A person to whom a summons is addressed is entitled to receive: 22
    - (a) if the summons was issued by the Magistrate on his or her own motion, from the principal officer of the mental health facility where the person to whom the inquiry relates is detained, or 23  
24  
25
    - (b) if the summons was issued on the application of another person, from that other person, 26  
27
 the amounts payable for compliance with a subpoena under the *Uniform Civil Procedure Rules 2005*. 28  
29
  - (4) A person: 30
    - (a) who is served with a summons addressed to the person under this clause, and 31  
32
    - (b) to whom, at the time of service, is tendered an amount that is sufficient to cover the person's travelling and other out-of-pocket expenses in attending the inquiry specified in the summons and producing anything required by the summons to be produced, 33  
34  
35  
36
 must not, without reasonable excuse, fail or refuse to obey the summons. 37  
38  
Maximum penalty: 50 penalty units. 39
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- 6 Inspection etc of medical records** 1
- (1) An assessable person is entitled to inspect or otherwise have access to 2  
any medical records relating to the person in the possession of any other 3  
person, unless the Magistrate otherwise determines. 4
- (2) A representative of an assessable person at a mental health inquiry is 5  
entitled, at any time before or during the inquiry, to inspect or otherwise 6  
have access to any relevant medical records relating to the person in the 7  
possession of any other person. 8
- (3) If a medical practitioner warns the representative of the assessable 9  
person that it may be harmful to communicate to the person, or any 10  
other person, specified information contained in those medical records: 11
- (a) the representative is to have full and proper regard to that 12  
warning, and 13
- (b) the representative is not obliged to disclose to the person any 14  
information obtained by virtue of the inspection or other access. 15
- (4) Subclause (3) is subject to any order or direction of the Magistrate, in 16  
relation to an inspection under subclause (2). 17
- 7 Publication of names etc** 18
- (1) A person must not, except with the consent of the Magistrate holding a 19  
mental health inquiry, publish or broadcast the name of any person: 20
- (a) to whom the inquiry relates, or 21
- (b) who appears as a witness at the inquiry, or 22
- (c) who is mentioned or otherwise involved in the inquiry, 23
- whether before or after the hearing is completed. 24
- Maximum penalty: 50 penalty units or imprisonment for 12 months, or 25  
both. 26
- (2) This clause does not prohibit the publication or broadcasting of an 27  
official report of any such inquiry that includes the name of any person 28  
the publication or broadcasting of which would otherwise be prohibited 29  
by this clause. 30
- (3) For the purposes of this clause, a reference to the name of a person 31  
includes a reference to any information, picture or other material that 32  
identifies the person or is likely to lead to the identification of the 33  
person. 34



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<b>8</b>	<b>Records of proceedings</b>	1
(1)	Proceedings of the inquiry are to be recorded.	2
(2)	Regulations may be made for or with respect to the manner in which the evidence may be recorded and the authentication of evidence or of transcripts of evidence given in proceedings.	3 4 5
(3)	The regulations may provide for the circumstances in which evidence given in proceedings is to be transcribed.	6 7
<b>9</b>	<b>Record of decision</b>	8
(1)	An order or direction of a Magistrate pursuant to a mental health inquiry is to be recorded in the form of an instrument in writing and is to include the reasons for the order or direction.	9 10 11
(2)	Nothing in this clause prevents a Magistrate from giving an order or direction orally.	12 13
(3)	An order or direction given orally by a Magistrate is to be recorded in accordance with this clause.	14 15

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## Schedule 3      Statement of rights

(Section 74 (3))

**Statement of rights****Your rights**

You should read the questions and answers below to find out your rights and what may happen to you after you are brought to a mental health facility.

**What happens after I arrive at a mental health facility?**

You must be seen by a facility doctor not later than 12 hours after you arrive at the mental health facility.

If you are a person who is already in a mental health facility as a voluntary patient, and you have been told you are now to be kept in the facility against your will, you must be seen by a facility doctor not later than 12 hours after it is decided to keep you in the facility.

**When can I be kept in a mental health facility against my will?**

You can be kept in a mental health facility against your will if you are certified by the facility doctor as a mentally ill person or a mentally disordered person. The doctor will decide whether or not you are a mentally ill person or a mentally disordered person.

A mentally ill person is someone who has a mental illness and who needs to be kept in a mental health facility for his or her own protection or to protect other people. A mentally disordered person is someone whose behaviour shows that he or she needs to be kept in a mental health facility for a short time for his or her own protection or to protect other people.

The facility cannot continue to keep you against your will unless at least one other doctor also finds that you are a mentally ill person or a mentally disordered person. At least one of the doctors who sees you must be a psychiatrist.

**How long can I be kept in a mental health facility against my will?**

If you are found to be a mentally disordered person, you can only be kept in a mental health facility for up to 3 DAYS (weekends and public holidays are not counted in this time). During this time you must be seen by a doctor at least once every 24 hours. You cannot be detained as a mentally disordered person more than 3 times in any month.

If you are found to be a mentally ill person, you will be kept in the mental health facility until you see a Magistrate who will hold a mental health inquiry to decide what will happen to you.

**How can I get out of a mental health facility?**

You, or a friend or relative, may at any time ask the medical superintendent or another authorised medical officer to let you out. You must be let out if you are not a mentally ill person or a mentally disordered person or if the medical superintendent or another authorised medical officer thinks that there is other appropriate care reasonably available to you.

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**Can I be treated against my will?**

The facility staff may give you appropriate medical treatment, even if you do not want it, for your mental condition or in an emergency to save your life or prevent serious damage to your health. The facility staff must tell you what your medical treatment is if you ask. You must not be given excessive or inappropriate medication.

**Can I be given electro convulsive therapy (ECT) against my will?**

Yes, but only if the Mental Health Review Tribunal determines at a hearing that it is necessary or desirable for your safety or welfare. You have a right to attend that hearing.

**More information**

You should read the questions and answers below to find out about Magistrates' mental health inquiries and when you may be kept in a mental health facility against your will after an inquiry.

**When is a Magistrate's mental health inquiry held?**

A Magistrate's mental health inquiry must be held as soon as possible after it is decided to keep you in a mental health facility against your will because you are a mentally ill person.

**What happens at a Magistrate's mental health inquiry?**

The Magistrate will decide whether or not you are a mentally ill person.

If the Magistrate decides that you are not a mentally ill person, you must be let out of the mental health facility.

If the Magistrate decides that you are a mentally ill person, the Magistrate will then decide what will happen to you. Consideration must be given to the least restrictive environment in which care and treatment can be effectively given. The Magistrate may order that you be kept in a mental health facility as an INVOLUNTARY PATIENT for a set time (not more than 3 months) or the Magistrate may order that you be let out of the mental health facility. If you are let out, the Magistrate may make a community treatment order requiring you to have certain treatment after you are let out.

The Magistrate may adjourn the inquiry for up to 14 days where he or she considers that it is in your best interests.

If the Magistrate makes an order that you are to remain in a mental health facility as an involuntary patient, the Magistrate must also consider whether you are capable of managing your financial affairs. If the Magistrate is not satisfied that you are capable, an order must be made for the management of your affairs under the *Protected Estates Act 1983*.

**What rights do I have at a Magistrate's mental health inquiry?**

You can tell the Magistrate what you want or have your lawyer tell the Magistrate what you want. You can wear street clothes, be helped by an interpreter and have your primary carer, relatives and friends told about the inquiry. You can apply to see your medical records.

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**What are my rights of appeal if I have been made an involuntary patient?**

You (or a carer or friend or relative) may at any time ask the medical superintendent or another authorised medical officer to discharge you. If the medical superintendent or authorised medical officer refuses or does not respond to your request within 3 working days you (or a carer a friend or relative) may lodge an appeal with the Mental Health Review Tribunal.

You will be given a notice setting out your appeal rights.

**What happens when the time set by an order making me an involuntary patient has nearly ended?**

The facility medical staff will review your condition before the end of the order and the mental health facility may either discharge you or apply to the Mental Health Review Tribunal for a further order.

The Tribunal must let you out of the mental health facility if it decides that you are not a mentally ill person or if it feels that other care is more appropriate and reasonably available.

**Who can I ask for help?**

You may ask any facility staff member, social worker, doctor, official visitor, chaplain, your own lawyer or the Mental Health Advocacy Service for help. The Mental Health Advocacy Service telephone number is: .....

(Note. Appropriate telephone numbers should be included.)

**Can I ask a friend or relative to act for me?**

You may nominate a person to be your primary carer while you are in a mental health facility. Your primary carer may ask for information on your behalf and will be informed if you are kept in a mental health facility, subject to a mental health inquiry, transferred or discharged and of proposed special mental health treatments or surgical operations. You and your primary carer also have the right to be given information about follow-up care if you are discharged.

## Schedule 4 Provisions relating to Principal official visitor and official visitors

(Section 130)

### 1 Definition

In this Schedule:

**official visitor** includes the Principal official visitor.

### 2 Terms of office

Subject to this Schedule, an official visitor holds office for the period (not exceeding 3 years) that is specified in the official visitor's instrument of appointment, but is eligible (if otherwise qualified) for re-appointment.

### 3 Remuneration

An official visitor is entitled to be paid such remuneration (including travelling and subsistence allowances) as the Minister may from time to time determine in respect of the official visitor.

### 4 Vacancy in office of member

- (1) The office of an official visitor becomes vacant if the official visitor:
  - (a) dies, or
  - (b) completes a term of office and is not re-appointed, or
  - (c) resigns the office by instrument in writing addressed to the Minister, or
  - (d) is removed from office by the Minister under this clause or by the Governor under Chapter 5 of the *Public Sector Employment and Management Act 2002*, or
  - (e) becomes bankrupt, applies to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounds with his or her creditors or makes an assignment of his or her remuneration for their benefit, or
  - (f) is convicted in New South Wales of an offence that is punishable by imprisonment for 12 months or more or is convicted elsewhere than in New South Wales of an offence that, if committed in New South Wales, would be an offence so punishable, or
  - (g) being the Principal official visitor or an official visitor appointed for a private mental health facility, has a pecuniary interest, directly or indirectly, in a private mental health facility, or

Mental Health Bill 2006

Schedule 4 Provisions relating to Principal official visitor and official visitors

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- |          |   |                      |
|----------|---|----------------------|
| (h)      | signs a certificate or request for the admission of a person to a mental health facility or attends professionally on a patient in a mental health facility.  | 1<br>2<br>3          |
| (2)      | The Minister may remove an official visitor from office at any time.  | 4                    |
| <b>5</b> | <b>Suspension of office</b>   | 5                    |
| (1)      | An official visitor is suspended from office if the official visitor becomes a mentally incapacitated person.   | 6<br>7               |
| (2)      | The suspension from office ceases when the official visitor ceases to be a mentally incapacitated person or the period of the official visitor's appointment expires, whichever is the earlier.   | 8<br>9<br>10         |
| <b>6</b> | <b>Effect of certain other Acts</b>   | 11                   |
| (1)      | The <i>Public Sector Employment and Management Act 2002</i> does not apply to the appointment of an official visitor and an official visitor is not, as an official visitor, subject to that Act (except Chapter 5).                      | 12<br>13<br>14       |
| (2)      | If by or under any Act provision is made:   | 15                   |
| (a)      | requiring a person who is the holder of a specified office to devote the whole of his or her time to the duties of that office, or  | 16<br>17             |
| (b)      | prohibiting the person from engaging in employment outside the duties of that office,   | 18<br>19             |
|          | the provision does not operate to disqualify the person from holding that office and also the office of an official visitor or from accepting and retaining any remuneration payable to the person under this Act as an official visitor. | 20<br>21<br>22<br>23 |
| (3)      | The office of an official visitor is not, for the purposes of any Act, an office or place of profit under the Crown.  | 24<br>25             |

## Schedule 5 Provisions relating to members of Tribunal

(Section 140 (3))

### 1 Qualifications

- (1) A person is qualified for appointment as President or as a Deputy President if the person is an Australian legal practitioner of at least 7 years' standing.
- (2) A person may not be appointed as the President or a Deputy President unless the person has been in practice as an Australian legal practitioner, or has held a judicial or legal office under the Crown in right of the Commonwealth or this State or any other State or a Territory of the Commonwealth, within 2 years immediately preceding the person's appointment.

### 2 Term of office of members

- (1) A member holds office for the period specified in the member's instrument of appointment.
- (2) The term of an appointment must not exceed 7 years.
- (3) A member is eligible for re-appointment.

### 3 Duties of full-time members

A full-time member must devote the whole of his or her time to the duties of the office of member, except as permitted by this Act or except with the consent of the Minister.

### 4 Part-time arrangements

A Deputy President, although not appointed on a part-time basis, may, by agreement in writing entered into with the President, exercise the functions of Deputy President on a part-time basis.

### 5 Remuneration and allowances for members

- (1) The President and a Deputy President are entitled to be paid:
  - (a) remuneration in accordance with the *Statutory and Other Offices Remuneration Act 1975*, and
  - (b) such travelling and subsistence allowances as the Minister may from time to time determine in respect of the President or a Deputy President.
- (2) A member, other than the President or a Deputy President, is entitled to be paid such remuneration (including travelling and subsistence

allowances) as the Minister may from time to time determine in respect of the member.	1 2
<b>6 Deputy Presidents</b>	3
(1) A Deputy President, while holding office as a Deputy President, has, subject to the conditions of appointment specified in the instrument of appointment and to any direction given by the President, the powers, authorities, privileges and immunities of and is to perform the duties of the President.	4 5 6 7 8
(2) No person is to be concerned to inquire whether or not any occasion has arisen authorising a Deputy President to exercise the functions of the President and all acts or things done or omitted or suffered to be done by a Deputy President when exercising those functions are as valid and effectual and have the same consequences as if they had been done or omitted or suffered to be done by the President.	9 10 11 12 13 14
<b>7 Deputies</b>	15
(1) The Minister may, from time to time, appoint as the deputy of a member, a person who holds the same qualifications, if any, as are required to be held by the person for whom he or she is the deputy.	16 17 18
(2) In the absence of a member, the member's deputy:	19
(a) is, if available, to act in the place of the member, and	20
(b) while so acting, has all the functions of the member and is to be taken to be the member.	21 22
(3) Subject to clause 6 (1), the deputy of a member who is the President or a Deputy President has the member's functions as President or Deputy President.	23 24 25
(4) A person while acting in the place of a member is entitled to be paid such remuneration (including travelling and subsistence allowances) as the Minister may from time to time determine in respect of the person.	26 27 28
<b>8 Vacancy in office of member</b>	29
(1) The office of a member becomes vacant if the member:	30
(a) dies, or	31
(b) completes a term of office and is not re-appointed, or	32
(c) resigns the office by instrument in writing addressed to the Minister, or	33 34
(d) is removed from office by the Minister under this clause or by the Governor under Chapter 5 of the <i>Public Sector Employment and Management Act 2002</i> , or	35 36 37



(e)	becomes bankrupt, applies to take the benefit of any law for the relief of bankrupt or insolvent debtors, compounds with his or her creditors or makes an assignment of his or her remuneration for their benefit, or	1 2 3 4
(f)	becomes a mentally incapacitated person, or	5
(g)	is convicted in New South Wales of an offence which is punishable by imprisonment for 12 months or more or is convicted elsewhere than in New South Wales of an offence which, if committed in New South Wales, would be an offence so punishable, or	6 7 8 9 10
(h)	being a full-time member, engages in any paid employment outside the duties of the office of member, except with the consent of the Minister.	11 12 13
(2)	The Minister may remove a member from office at any time.	14
<b>9</b>	<b>Filling of vacancy in office of member</b>	15
	If the office of a member becomes vacant, a person who holds the same qualification, if any, as the member whose office has become vacant is, subject to this Act, to be appointed to fill the vacancy.	16 17 18
<b>10</b>	<b>Effect of certain other Acts</b>	19
(1)	The <i>Public Sector Employment and Management Act 2002</i> does not apply to the appointment of a member and a member is not, as a member, subject to that Act (except Chapter 5).	20 21 22
(2)	If by or under any Act provision is made:	23
(a)	requiring a person who is the holder of a specified office to devote the whole of his or her time to the duties of that office, and	24 25
(b)	prohibiting the person from engaging in employment outside the duties of that office,	26 27
	the provision does not operate to disqualify the person from holding that office and also the office of a part-time member or from accepting and retaining any remuneration payable to the person under this Act as such a part-time member.	28 29 30 31
(3)	The office of a member is not, for the purposes of any Act, an office or place of profit under the Crown.	32 33
<b>11</b>	<b>Preservation of rights of member previously public servant etc</b>	34
(1)	In this clause:	35
	<i>statutory body</i> means any body declared under clause 12 to be a statutory body for the purposes of this Schedule.	36 37

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- superannuation scheme* means a scheme, fund or arrangement established by or under an Act under which any superannuation or retirement benefits are provided. 1  
2  
3
- (2) This clause applies to a member who, immediately before being appointed as a member, was: 4  
5
- (a) an officer of the Government Service, the Teaching Service or the NSW Health Service, or 6  
7
  - (b) a contributor to a superannuation scheme, or 8
  - (c) an officer employed by a statutory body, or 9
  - (d) a person in respect of whom provision was made by any Act for the retention of any rights accrued or accruing to the person as an officer or employee. 10  
11  
12
- (3) Subject to the terms of the member's appointment, the member: 13
- (a) is to retain any rights accrued or accruing to him or her as such an officer, contributor or person, and 14  
15
  - (b) may continue to contribute to any superannuation scheme to which he or she was a contributor immediately before being appointed as a member, and 16  
17  
18
  - (c) is entitled to receive any deferred or extended leave and any payment, pension or gratuity, 19  
20
- as if the member had continued to be such an officer, contributor or person during his or her service as a member. 21  
22
- (4) Service as a member is to be regarded as service as an officer or employee for the purpose of any law under which any such rights accrued or were accruing, under which he or she continues to contribute to any such superannuation scheme or by which any such entitlement is conferred. 23  
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- (5) For the purposes of the superannuation scheme to which the member is entitled to contribute under this clause, the member is to be regarded as an officer or employee and the Government of New South Wales is to be regarded as the employer. 28  
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- (6) If a member would, but for this subclause, be entitled under subclause (3) to contribute to a superannuation scheme or to receive any payment, pension or gratuity under the scheme: 32  
33  
34
- (a) he or she is not so entitled on becoming (whether on appointment as a member or at any later time while holding office as a member) a contributor to any other superannuation scheme, and 35  
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37
  - (b) the provisions of subclause (5) cease to apply to or in respect of him or her in any case where he or she becomes a contributor to any such other superannuation scheme. 38  
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(7)	Subclause (6) does not prevent the payment to a member (on his or her ceasing to be a contributor to a superannuation scheme) of such amount as would have been payable to him or her if he or she had ceased, by reason of resignation, to be an officer or employee for the purposes of the scheme.	1 2 3 4 5
(8)	A member is not, in respect of the same period of service, entitled to claim a benefit under this Act and another Act.	6 7
<b>12</b>	<b>Declaration of statutory bodies</b>	8
	The Governor may, by proclamation published in the Gazette, declare any body constituted by or under any Act to be a statutory body for the purposes of this Schedule.	9 10 11

## Schedule 6 Savings, transitional and other provisions

(Section 198)

### Part 1 General

#### 1 Regulations

- (1) The regulations may contain provisions of a savings or transitional nature consequent on the enactment of the following Acts:  
this Act
- (2) Any such provision may, if the regulations so provide, take effect from the date of assent to the Act concerned or a later date.
- (3) To the extent to which any such provision takes effect from a date that is earlier than the date of its publication in the Gazette, the provision does not operate so as:
  - (a) to affect, in a manner prejudicial to any person (other than the State or an authority of the State), the rights of that person existing before the date of its publication, or
  - (b) to impose liabilities on any person (other than the State or an authority of the State) in respect of anything done or omitted to be done before the date of its publication.

### Part 2 Provisions consequent on enactment of this Act

#### 2 Definitions

In this Part:

*the 1898 Act* means the *Lunacy Act of 1898*.

*the 1958 Act* means the *Mental Health Act 1958*.

*the 1983 Act* means the *Mental Health Act 1983*.

*the 1990 Act* means the *Mental Health Act 1990*.

#### 3 General savings

- (1) Any act, matter or thing done or omitted to be done under a provision of the 1990 Act and having any force or effect immediately before the commencement of a provision of this Act or the *Mental Health (Criminal Procedure) Act 1990* that replaces that provision is, on that commencement, taken to have been done or omitted under the provision of this Act or the *Mental Health (Criminal Procedure) Act 1990*.

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|-----|--|-------------|
| (2) | This clause does not apply:  | 1           |
| (a) | to the extent that its application is inconsistent with any other provision of this Schedule or a provision of a regulation under clause 1, or | 2<br>3<br>4 |
| (b) | to the extent that its application would be inappropriate in a particular case.  | 5<br>6      |

#### 4 Construction of certain references 7

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|-----|---|----------------------|
| (1) | A reference (however expressed) in any other Act, in any instrument made under an Act or in any other instrument of any kind:   | 8<br>9               |
| (a) | to an admission centre or a mental hospital, or both, within the meaning of the 1958 Act or to a hospital within the meaning of the 1990 Act—is to be read as a reference to a declared mental health facility, or              | 10<br>11<br>12<br>13 |
| (b) | to an authorised hospital within the meaning of the 1958 Act or the 1990 Act—is to be read as a reference to a private mental health facility, or   | 14<br>15<br>16       |
| (c) | to a hospital for the insane, a hospital for the criminal insane or a reception-house, or any combination of those expressions, within the meaning of the 1898 Act—is to be read as a reference to a mental health facility, or | 17<br>18<br>19<br>20 |
| (d) | to a licensed house within the meaning of the 1898 Act—is to be read as a reference to a private mental health facility.  | 21<br>22             |
| (2) | A reference (however expressed) in any other Act, in any instrument made under an Act or in any other instrument of any kind:   | 23<br>24             |
| (a) | to a mentally ill person within the meaning of the 1958 Act or the 1990 Act—is to be read as a reference to a mentally ill person within the meaning of this Act, or  | 25<br>26<br>27       |
| (b) | to a voluntary patient within the meaning of the 1958 Act or an informal patient within the meaning of the 1983 or 1990 Act—is to be read as a reference to a voluntary patient within the meaning of this Act, or              | 28<br>29<br>30<br>31 |
| (c) | to a temporary patient within the meaning of the 1958 Act, the 1983 Act or the 1990 Act—is to be read as a reference to an involuntary patient within the meaning of this Act, or   | 32<br>33<br>34       |
| (d) | to a continued treatment patient within the meaning of the 1958 Act, the 1983 Act or the 1990 Act—is to be read as a reference to an involuntary patient within the meaning of this Act, or                                     | 35<br>36<br>37       |
| (e) | to a person under detention under Part 7 of the 1958 Act or a forensic patient within the meaning of the 1983 Act or the 1990   | 38<br>39             |

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- Act—is to be read as a reference to a forensic patient within the meaning of this Act, or
- (f) to a patient within the meaning of the 1958 Act—is to be read as a reference to a patient (other than a voluntary patient) within the meaning of this Act, or
- (g) to a person detained in an admission centre under section 12 of the 1958 Act—is to be read as a reference to a person taken to and detained in a mental health facility under Part 2 of Chapter 3 of this Act, or
- (h) to a patient or an insane patient, or both, within the meaning of the 1898 Act—is to be read as a reference to a patient (other than a voluntary patient) within the meaning of this Act, or
- (i) to a lunatic within the meaning of the 1898 Act—is to be read as a reference to a mentally ill person.
- (3) A reference (however expressed) in any other Act, in any instrument made under an Act or in any other instrument of any kind:
- (a) to a provision of the 1958 Act or of the 1898 Act—is, except as provided by paragraph (c), to be read as a reference to the corresponding provision, if any, of this Act or of the *Protected Estates Act 1983*, as the case requires, or
- (b) to the 1958 Act or the 1898 Act—is, except as provided by paragraph (c), to be read as a reference to this Act or the *Protected Estates Act 1983*, as the case requires, or
- (c) to the keeping in strict custody pursuant to section 23 (3) of the 1958 Act of any person—is to be read as a reference to the detention of that person pursuant to section 25 or 39, as the case requires, of the *Mental Health (Criminal Procedure) Act 1990*.
- 5 Mental health facilities**
- (1) A place that was, immediately before the repeal of section 208 of the 1990 Act, the subject of an order in force under that section is taken to be a declared mental health facility the subject of an order in force under section 109 of this Act and this Act applies accordingly.
- (2) A place that was, immediately before the repeal of section 212 of the 1990 Act, licensed under that section is taken to be the subject of a licence in force under section 116 of this Act and this Act applies accordingly.
- 6 Medical superintendents and deputy medical superintendents**
- (1) A person appointed as a medical superintendent or a deputy medical superintendent of a hospital under the 1990 Act immediately before the repeal of the provision of that Act under which the person was

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	appointed is taken to be appointed under the corresponding provision of this Act as the medical superintendent or deputy medical superintendent of the mental health facility concerned and this Act applies accordingly.	1 2 3
(2)	The term of appointment of any such person as a medical superintendent or deputy medical superintendent ends on the day on which the term under the 1990 Act would have ended, subject to any re-appointment of the person under this Act.	4 5 6 7
<b>7</b>	<b>Directors and deputy directors of health care agencies</b>	8
	A person appointed as the director or a deputy director of a health care agency under the 1990 Act immediately before the repeal of the provision of that Act under which the person was appointed is taken to be appointed under this Act as the director of community treatment or deputy director of community treatment of the mental health facility concerned and this Act applies accordingly.	9 10 11 12 13 14
<b>8</b>	<b>Official visitors</b>	15
(1)	A person appointed as an official visitor under section 226 or 228 of the 1990 Act immediately before the repeal of section 228 of that Act is taken to have been appointed under section 128 or 129, respectively, of this Act and this Act applies accordingly.	16 17 18 19
(2)	The term of appointment of any such person as an official visitor ends on the day on which the term under the 1990 Act would have ended, subject to any re-appointment of the person under this Act.	20 21 22
<b>9</b>	<b>Accredited persons</b>	23
(1)	A person appointed as an accredited person under section 287A of the 1990 Act immediately before the repeal of that section is taken to have been appointed under section 136 of this Act and this Act applies accordingly.	24 25 26 27
(2)	The term of appointment of any such person as an accredited person ends on the day on which the term under the 1990 Act would have ended, subject to any re-appointment of the person under this Act.	28 29 30
<b>10</b>	<b>Mental Health Review Tribunal</b>	31
(1)	A person appointed as a member of the Tribunal under the 1990 Act immediately before the repeal of section 252 of that Act is taken to have been appointed under this Act and this Act applies accordingly.	32 33 34
(2)	The term of appointment of any such person as a member of the Tribunal ends on the day on which the term under the 1990 Act would have ended, subject to any re-appointment of the person under this Act.	35 36 37

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- (3) Any decision, determination, recommendation or finding or order made or other thing done by the Tribunal under the 1990 Act and having any force or effect immediately before the repeal of section 252 of that Act is taken to have been made or done by the Tribunal under the corresponding provision of this Act or the *Mental Health (Criminal Procedure) Act 1990*. 1  
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- 11 Orders by prescribed authority** 7
- An order made by a prescribed authority under the 1990 Act, and in force under that Act immediately before the commencement of this clause, is taken to have been made under the *Mental Health (Criminal Procedure) Act 1990* (as amended by this Act) and that Act applies accordingly. 8  
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- 12 Existing patients and persons detained in mental health facilities** 13
- (1) A person who was a temporary patient or a continued treatment patient under the 1990 Act immediately before the commencement of this subclause is taken to be an involuntary patient detained under this Act and this Act applies accordingly. 14  
15  
16  
17
- (2) A person who was detained in a hospital as a mentally ill person or a mentally disordered person under the 1990 Act immediately before the commencement of this subclause is taken to be so detained under this Act and this Act applies accordingly. 18  
19  
20  
21
- (3) A person who was a forensic patient under the 1990 Act immediately before the commencement of this subclause is taken to be a forensic patient within the meaning of this Act and this Act and the *Mental Health (Criminal Procedure) Act 1990* (as amended by this Act) apply accordingly. 22  
23  
24  
25  
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- (4) For the purposes of the application of this Act or the *Mental Health (Criminal Procedure) Act 1990* to a patient or person referred to in this clause, the person is taken to have been detained or classified as a patient under this Act or that Act on the day the person was so detained or classified under the 1990 Act. 27  
28  
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- 13 Absence from hospitals** 32
- (1) A grant of leave of absence from a hospital (including permission to be absent from hospital) for a patient in force under a provision of the 1990 Act immediately before the commencement of this clause continues in force as if it were granted under the corresponding provision of this Act or, in the case of a forensic patient, the *Mental Health (Criminal Procedure) Act 1990* (as amended by this Act) and this Act and that Act apply accordingly. 33  
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- (2) A patient who was absent without leave from a hospital, or in breach of a condition of any such leave, immediately before the commencement of this clause may be apprehended and dealt with under this Act or the *Mental Health (Criminal Procedure) Act 1990* as if the person were absent without leave from a mental health facility or in breach of a condition of leave granted under this Act or that Act. 1  
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- 14 Existing treatment orders** 7
- (1) A medical practitioner may, for the purposes of administering electro convulsive therapy, rely on a consent or certificate obtained, or a decision made by the Tribunal, in accordance with Part 1 of Chapter 7 of the 1990 Act and any such consent, certificate or decision is taken to have been obtained or made under this Act. 8  
9  
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12
- (2) A consent given under section 201 of the 1990 Act, and in force immediately before the commencement of this clause, continues to have effect for the purposes of carrying out the surgical operation concerned. 13  
14  
15
- (3) A medical practitioner may, for the purposes of carrying out special medical treatment on a patient, rely on a consent obtained from or a decision made by the Tribunal or an authorised officer, in accordance with Part 2 of Chapter 7 of the 1990 Act and any such consent or decision is taken to have been obtained or made under this Act. 16  
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- (4) For the purposes of subclause (3), the consent of an authorised officer is taken to be the consent of an authorised medical practitioner. 21  
22
- 15 Pending proceedings** 23
- Any proceedings pending, immediately before the commencement of this clause, under the 1990 Act before any court, the Tribunal, a Magistrate or any other person: 24  
25  
26
- (a) are taken to be proceedings pending before the court, the Tribunal, Magistrate or other person before which or whom those proceedings could be brought under this Act or the *Mental Health (Criminal Procedure) Act 1990* if those proceedings had been commenced on or after that commencement, and 27  
28  
29  
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31
- (b) are to be continued before and disposed of by the court, Tribunal, Magistrate or person accordingly. 32  
33
- 16 Supreme Court** 34
- (1) A person ordered to be brought before the Court for examination under section 285 of the 1990 Act, who is not examined before the repeal of that section, is to be examined and dealt with under section 166 of this Act. 35  
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- (2) A person appointed as an assessor under section 283 of the 1990 Act immediately before the repeal of that section is taken to have been appointed under section 165 of this Act and this Act applies accordingly.

**17 Interstate matters**

Anything done or omitted under Chapter 10A of the 1990 Act, and having effect immediately before the repeal of that Chapter, is taken to have been done or omitted under the corresponding provision of Chapter 8 of this Act and, subject to that Chapter, has effect accordingly.

**18 Patient accounts and trust funds**

The following funds and accounts established under Part 3 of Chapter 8 of the 1990 Act are taken to be established under the corresponding provisions of the regulations and the regulations apply accordingly:

- (a) any Patients Trust Fund,
- (b) any Patients Amenities Account,
- (c) a fund constituted under section 248 of the 1990 Act,
- (d) the Interest Account.

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## Schedule 7      Amendment of other Acts

(Section 199)

**7.1 Civil Liability Act 2002 No 22****Section 54D Damages supervision orders**Omit “*Mental Health Act 1990*” from section 54D (4).Insert instead “*Mental Health Act 2006*”.**7.2 Civil Procedure Act 2005 No 28****Section 3 Definitions**Omit paragraph (b) from the definition of *person under legal incapacity* in section 3 (1).

Insert instead:

- (b) an involuntary patient or a forensic patient within the meaning of the *Mental Health Act 2006*, and

**7.3 Disability Services Act 1993 No 3****Section 5 Target group**

Omit section 5 (2). Insert instead:

- (2) For the purposes of this Act, the following persons (within the meaning of the *Mental Health Act 2006*) are in the target group, but only if the services provided for their care are not inconsistent with the objects and relevant requirements of that Act:
  - (a) an involuntary patient or a forensic patient,
  - (b) a person subject to a community treatment order,
  - (c) a person under detention in a mental health facility.

**7.4 Guardianship Act 1987 No 257****[1] Section 3 Definitions**Omit paragraph (a) (iii) from the definition of *exempt premises* in section 3 (1).

Insert instead:

- (iii) a mental health facility within the meaning of the *Mental Health Act 2006*,

<b>[2]    Section 3 (2) (c)</b>	1
Omit the paragraph. Insert instead:	2
(c)    who is a mentally ill person within the meaning of the	3
<i>Mental Health Act 2006</i> , or	4
<b>[3]    Section 3C Relationship with Mental Health Act 2006</b>	5
Omit “ <i>Mental Health Act 1990</i> ” wherever occurring.	6
Insert instead “ <i>Mental Health Act 2006</i> ”.	7
<b>[4]    Sections 25K (2) and 34 (2)</b>	8
Omit “ <i>Mental Health Act 1990</i> ” wherever occurring.	9
Insert instead “ <i>Mental Health Act 2006</i> ”.	10
<b>7.5    Interpretation Act 1987 No 15</b>	11
<b>Section 21 Meanings of commonly used words and expressions</b>	12
Omit the definition of <i>mentally incapacitated person</i> from section 21 (1).	13
Insert instead:	14
<i>mentally incapacitated person</i> means a person who is an	15
involuntary patient or a forensic patient within the meaning of the	16
<i>Mental Health Act 2006</i> , or a protected person within the	17
meaning of the <i>Protected Estates Act 1983</i> .	18
<b>7.6    Law Enforcement (Powers and Responsibilities) Act 2002</b>	19
<b>No 103</b>	20
<b>Schedule 1 Acts not affected by this Act</b>	21
Omit “ <i>Mental Health Act 1990</i> No 9”.	22
Insert instead “ <i>Mental Health Act 2006</i> ”.	23
<b>7.7    Mental Health (Criminal Procedure) Act 1990 No 10</b>	24
<b>[1]    Section 3 Definitions</b>	25
Omit the definitions of <i>forensic patient</i> , <i>hospital</i> and <i>Mental Health Review</i>	26
<i>Tribunal</i> from section 3 (1).	27
Insert instead in alphabetical order:	28
<i>forensic patient</i> means a person:	29

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(a)	who is detained in a mental health facility, correctional centre or other place, or released from custody subject to conditions, pursuant to an order:	1
		2
		3
(i)	under section 10 (3) (c), 14, 17 (3), 25, 27 or 39, or	4
(ii)	an order under section 7 (4) of the <i>Criminal Appeal Act 1912</i> (including that subsection as applied by section 5AA (5) of that Act), or	5
		6
		7
(b)	who is granted bail pursuant to section 14 (b) (ii) or 17 (2), or	8
		9
(c)	who is detained in a mental health facility pending the person's committal for trial for an offence or pending the person's trial for an offence, or	10
		11
		12
(d)	who has been transferred to a mental health facility while serving a sentence of imprisonment and who has not been classified by the Tribunal as an involuntary patient.	13
		14
		15
	<i>involuntary patient</i> has the same meaning as it has in the <i>Mental Health Act 2006</i> .	16
		17
	<i>mental health facility</i> has the same meaning as it has in the <i>Mental Health Act 2006</i> .	18
		19
	<i>mentally ill person</i> has the same meaning as it has in the <i>Mental Health Act 2006</i> .	20
		21
	<i>prescribed authority</i> —see section 40.	22
	<i>Tribunal</i> means the Mental Health Review Tribunal constituted under the <i>Mental Health Act 2006</i> .	23
		24
<b>[2]</b>	<b>Section 14 Person found unfit to be tried</b>	25
	Omit “Mental Health Review Tribunal” from section 14 (a).	26
	Insert instead “Tribunal”.	27
<b>[3]</b>	<b>Section 16 Functions of Tribunal on referral after inquiry</b>	28
	Omit “Mental Health Review Tribunal” from section 16 (1).	29
	Insert instead “Tribunal”.	30
<b>[4]</b>	<b>Section 16 (2)</b>	31
	Omit “hospital” wherever occurring. Insert instead “mental health facility”.	32

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<b>[5]</b>	<b>Section 17 Orders Court may make following determination of Tribunal that person will be fit to plead within 12 months</b>	1 2
	Omit “Mental Health Review Tribunal” wherever occurring in section 17 (1) and (4).	3 4
	Insert instead “Tribunal”.	5
<b>[6]</b>	<b>Section 17 (3)</b>	6
	Omit “hospital” wherever occurring. Insert instead “mental health facility”.	7
<b>[7]</b>	<b>Section 19 Court to hold special hearing after advice received from Director of Public Prosecutions</b>	8 9
	Omit “Mental Health Review Tribunal under section 16 (3) of this Act or under section 80 (5) or 82 (3A) of the <i>Mental Health Act 1990</i> ” from section 19 (1).	10 11 12
	Insert instead “Tribunal under section 16 (3), 42 (4) or 44 (2)”.	13
<b>[8]</b>	<b>Section 24 Consequences of nomination of limiting term</b>	14
	Omit “Mental Health Review Tribunal” from section 24 (1) (a).	15
	Insert instead “Tribunal”.	16
<b>[9]</b>	<b>Section 24 (2)</b>	17
	Omit “hospital” wherever occurring. Insert instead “mental health facility”.	18
<b>[10]</b>	<b>Section 27 Orders Court may make following determination of Tribunal after limiting term is imposed</b>	19 20
	Omit “Mental Health Review Tribunal”. Insert instead “Tribunal”.	21
<b>[11]</b>	<b>Section 27 (a) and (b)</b>	22
	Omit “hospital” wherever occurring. Insert instead “mental health facility”.	23
<b>[12]</b>	<b>Section 29 Action to be taken on notification that person is fit to be tried</b>	24
	Omit “Mental Health Review Tribunal” wherever occurring in section 29 (1) and (2).	25 26
	Insert instead “Tribunal”.	27
<b>[13]</b>	<b>Section 30 Procedure after completion of further inquiry</b>	28
	Omit “hospital” wherever occurring in section 30 (2) (a) and (b).	29
	Insert instead “mental health facility”.	30

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<b>[14] Section 32 Persons suffering from mental illness or condition</b>	1
Omit “within the meaning of Chapter 3 of the <i>Mental Health Act 1990</i> ” from section 32 (1).	2 3
<b>[15] Section 32 (3B) (b) and (3C) (b)</b>	4
Omit “authorised justice within the meaning of the <i>Search Warrants Act 1985</i> ” wherever occurring.	5 6
Insert instead “authorised officer within the meaning of the <i>Criminal Procedure Act 1986</i> ”.	7 8
<b>[16] Section 33 Mentally ill persons</b>	9
Omit “within the meaning of Chapter 3 of the <i>Mental Health Act 1990</i> ” wherever occurring in section 33 (1) and (1D).	10 11
<b>[17] Section 33 (1) (a) and (b), (1D) (a) and (b) and (3)</b>	12
Omit “hospital” wherever occurring. Insert instead “mental health facility”.	13
<b>[18] Section 33 (1A) and (1B)</b>	14
Omit “ <i>Mental Health Act 1990</i> ” wherever occurring.	15
Insert instead “ <i>Mental Health Act 2006</i> ”.	16
<b>[19] Section 33 (1B)</b>	17
Omit “sections 131 (2), 132 and 133 (1) (a)”.	18
Insert instead “section 51 (1) and (2)”.	19
<b>[20] Section 33 (1C)</b>	20
Omit “Chief Health Officer” wherever occurring.	21
Insert instead “Director-General of the Department of Health”.	22
<b>[21] Section 35 Transfer from correctional centre or detention centre</b>	23
Omit “hospital under section 97 or 98 of the <i>Mental Health Act 1990</i> ” from section 35 (2).	24 25
Insert instead “mental health facility under section 51”.	26
<b>[22] Section 35 (2) (b)</b>	27
Omit “Chief Health Officer under section 97 or 98 of the <i>Mental Health Act 1990</i> ”.	28 29
Insert instead “Director-General of the Department of Health under section 51”.	30 31

<b>[23]    Section 35 (2) (c)</b>	1
Omit “section 97 or 98 of the <i>Mental Health Act 1990</i> ”.	2
Insert instead “section 51”.	3
<b>[24]    Section 37 Explanation to jury</b>	4
Omit “Mental Health Review Tribunal constituted under the <i>Mental Health Act 1990</i> ” from section 37 (a).	5
Insert instead “Tribunal”.	6
<b>[25]    Section 37 (b)</b>	8
Omit “that Tribunal with respect to forensic patients within the meaning of that Act, including a reference to the requirements of that Act”.	9
Insert instead “the Tribunal with respect to forensic patients, including a reference to the requirements of this Act”.	10
<b>[26]    Section 39 Effect of finding and declaration of mental illness</b>	11
Omit “Mental Health Review Tribunal” from section 39 (3).	12
Insert instead “Tribunal”.	13
<b>[27]    Part 5</b>	14
Insert after Part 4:	15
<b>Part 5    Forensic patients</b>	16
<b>Division 1      Preliminary</b>	17
<b>40    Definitions</b>	18
In this Part:	19
<i>authorised medical officer</i> has the same meaning as it has in the <i>Mental Health Act 2006</i> .	20
<i>correctional centre</i> includes a detention centre.	21
<i>Director-General</i> means the Director-General of the Department of Health.	22
<i>prescribed authority</i> , in relation to the exercise of a function, means the authority prescribed by the regulations for the purposes of the function concerned.	23
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## Division 2      Review and release of forensic patients

- 41    Initial review by Tribunal of cases of persons found not guilty by reason of mental illness**
- (1)    The Tribunal must review a person's case as soon as practicable after the person is found not guilty of an offence by reason of mental illness, after a special hearing, a trial or on an appeal, and ordered to be detained in a mental health facility or other place or to be released from custody subject to conditions.
- Note.** Relevant orders may be made under this Act (including sections 25 and 39) and under section 7 (4) of the *Criminal Appeal Act 1912* (including that subsection as applied by section 5AA (5) of that Act).
- (2)    The Tribunal must, after reviewing a person's case, make a recommendation to the Minister:
- (a)    as to the person's care, detention or treatment, or
- (b)    if the Tribunal is satisfied, on the evidence available to it, that the safety of the person or any member of the public will not be seriously endangered by the person's release, as to the person's release (either unconditionally or subject to conditions).
- (3)    On a recommendation being made under this section for a person's release, the prescribed authority may, subject to the regulations, make an order (either unconditionally or subject to conditions) for the person's release.
- 42    Initial review by Tribunal of patient found unfit to be tried after order for detention**
- (1)    The Tribunal must review a person's case as soon as practicable after:
- (a)    an order is made under section 17 (3) in relation to the person, or
- (b)    an order is made under section 27 in relation to the person.
- (2)    On a review, the Tribunal must determine whether, in its opinion:
- (a)    the person has become fit to be tried for an offence, and
- (b)    the safety of any person or any member of the public will be seriously endangered by the person's release.
- (3)    If the Tribunal is of the opinion that the person has not become fit to be tried for an offence and is satisfied that the safety of any person or any member of the public will not be seriously endangered by the person's release, it must make a recommendation to the Minister for the person's release.

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- (4) The Tribunal must notify the court that made the finding of unfitness and the Director of Public Prosecutions if, on a review, it is of the opinion that the person:
- (a) has become fit to be tried for an offence, or
  - (b) has not become fit to be tried for an offence and will not, during the period of 12 months after the finding of unfitness by the court, become fit to be tried for the offence.

#### **43 Further reviews by Tribunal of forensic patients**

- (1) The Tribunal must review the case of each forensic patient every 12 months but may review the case of any forensic patient at any time.
- (2) The Tribunal must review the case of a forensic patient if requested to do so by the Minister for Health, the Attorney General, the Minister for Justice, the Director-General or the medical superintendent of the mental health facility in which the patient is detained.
- (3) For the purposes of a review, the Tribunal may communicate with any persons, take any action and make any recommendations it thinks fit.
- (4) On a review, the Tribunal may make a recommendation to the Minister as to one or more of the following:
  - (a) if the Tribunal is satisfied, on the evidence available to it, that the safety of the person or any member of the public will not be seriously endangered by the person's release, as to the patient's release (either conditionally or unconditionally),
  - (b) as to the patient's continued detention, care or treatment in a mental health facility, correctional centre or other place.
- (5) The Tribunal may not make a recommendation for the release of a patient if:
  - (a) the patient is a person who has been remanded in custody under section 10 (3) (c) pending an inquiry into the question of the person's unfitness to be tried for an offence, or
  - (b) the patient has been transferred to a mental health facility while serving a sentence of imprisonment and has not served the term of the sentence or, if a non-parole period has been set in relation to the sentence, the non-parole period.

<b>44</b>	<b>Reviews of persons found unfit to be tried</b>	1
(1)	On reviewing under section 43 the case of a forensic patient who is subject to a finding that the person is unfit to be tried for an offence, the Tribunal may make a recommendation as to the fitness of the patient to be tried for an offence.	2 3 4 5
(2)	The Tribunal must notify the court that made the finding of unfitness and the Director of Public Prosecutions if, on a review, it is of the opinion that the person:	6 7 8
(a)	has become fit to be tried for an offence, or	9
(b)	has not become fit to be tried for an offence and will not, during the period of 12 months after the finding of unfitness by the court, become fit to be tried for the offence.	10 11 12 13
<b>45</b>	<b>Release of patients after being found unfit to be tried or on further review</b>	14 15
(1)	On receiving a recommendation under section 42 or 43 for the release of a person, the Minister must notify the Attorney General of the recommendation and at the same time furnish a copy of the notification to the Director of Public Prosecutions.	16 17 18 19
(2)	The Director of Public Prosecutions must, within 21 days after the date of any such notification, indicate to the Attorney General whether the Director intends to proceed with criminal charges against the person concerned.	20 21 22 23
(3)	The prescribed authority must not order the person's release if, within 30 days after being notified of the recommendation, the Attorney General indicates an objection to the person's release on the ground that:	24 25 26 27
(a)	the person has served insufficient time in custody or under detention, or	28 29
(b)	the Attorney General or the Director of Public Prosecutions intends to proceed with criminal charges against the person.	30 31 32
(4)	The prescribed authority may, subject to the regulations, make an order (either unconditionally or subject to conditions) for the person's release if the Attorney General fails to indicate any such objection within that period.	33 34 35 36
(5)	Before ordering the person's release, the prescribed authority must inform the Minister for Police of the date of the person's release.	37 38 39

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- 46    Review of persons transferred from correctional centres** 1
- (1)    The Tribunal must review the case of a person transferred under 2  
Division 3 to a mental health facility from a correctional centre 3  
as soon as practicable after the person is so transferred and must 4  
make a recommendation to the prescribed authority as to the 5  
person's continued detention, care or treatment in a mental health 6  
facility. 7
- (2)    On a review, the Tribunal is to determine whether the person is a 8  
mentally ill person who should continue to be detained in a 9  
mental health facility. 10
- (3)    In addition to any review required under subsection (1), the 11  
Tribunal must informally review the cases of the following 12  
persons each month in order to determine whether their pending 13  
legal proceedings are delayed: 14
- (a)    a person referred to in subsection (1) whose trial for an 15  
        offence has not been completed, 16
- (b)    a person referred to in subsection (1) who is subject to a 17  
        finding that the person is unfit to be tried for an offence and 18  
        a person in respect of whom a special hearing under 19  
        section 19 has not been conducted. 20
- (4)    If the Tribunal determines on an informal review that there is 21  
such a delay, the Tribunal may take such action as it thinks fit. 22
- (5)    On an informal review, the Tribunal may make a 23  
recommendation as to the person's continued detention, care or 24  
treatment. 25
- (6)    If a person is transferred under Division 3 from a correctional 26  
centre to a mental health facility, the Tribunal may, at any time, 27  
make a recommendation to the prescribed authority that the 28  
person be transferred to a correctional centre. 29
- (7)    For the purposes of a review under this section, the Tribunal may 30  
communicate with such persons, take such action and make such 31  
recommendations as the Tribunal thinks fit. 32
- 47    Community treatment orders** 33
- (1)    On a review under this Division, the Tribunal may make a 34  
community treatment order in relation to a patient recommended 35  
to be released conditionally or to be transferred to a correctional 36  
centre or other place. 37
- (2)    Any such community treatment order has effect only if it is 38  
confirmed in writing by the prescribed authority. 39

(3)	Part 3 of Chapter 3 of the <i>Mental Health Act 2006</i> applies to the making of any such order, subject to any modifications prescribed by the regulations under that Act or under this Act.	1 2 3
<b>48</b>	<b>Prescribed authority may make orders as to detention, care or treatment</b>	4 5
	On a recommendation being made by the Tribunal (other than a recommendation as to the release of a person) under this Part as to the detention, care or treatment of a person, the prescribed authority may, subject to the regulations, make an order for the person's detention, care or treatment in a mental health facility, correctional centre or other place specified in the order and in the manner specified in the order.	6 7 8 9 10 11 12
<b>49</b>	<b>Transfer of patients</b>	13
(1)	On a review under this Part, the Tribunal may make a recommendation to the Minister as to the transfer of the patient to a mental health facility, correctional centre or other place.	14 15 16
(2)	On a recommendation being made under this Part for the transfer of a person, the prescribed authority may, subject to the regulations, make an order for the transfer of the patient to a mental health facility, correctional centre or other place.	17 18 19 20
<b>50</b>	<b>Recommendations not required for forensic patients classified as involuntary patients</b>	21 22
	The Tribunal is not required to make any recommendation that it would otherwise be required to make on a review of a forensic patient if it classifies the patient as an involuntary patient under section 67.	23 24 25 26
<b>Division 3</b>	<b>Transfers to and from correctional centres</b>	27
<b>51</b>	<b>Transfer from correctional centre by Director-General</b>	28
(1)	The Director-General may, by order in writing, order that a person imprisoned in a correctional centre be transferred to a mental health facility.	29 30 31
(2)	The Director-General may make an order under subsection (1) on the basis of 2 certificates about the person's condition issued by 2 medical practitioners, one of whom is a psychiatrist. The certificate is to be in the form set out in Schedule 2.	32 33 34 35
(3)	A transfer order may be made without the person's consent if it appears to the Director-General, on the basis of the certificates, that the person is a mentally ill person.	36 37 38

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|---|--|----------------------|
| (4)   | A transfer order may be made with the person's consent if it appears to the Director-General, on the basis of the certificates, that the person is suffering from a mental condition for which treatment is available in a mental health facility. | 1<br>2<br>3<br>4     |
| (5)   | The Director-General may revoke an order made under this section.  | 5<br>6               |
| (6)   | The Director-General must notify the Tribunal in writing of any transfer order.  | 7<br>8               |
| <b>52    Transfer back to correctional centre</b>         |  | 9                    |
| (1)   | This section applies to a forensic patient transferred to a mental health facility under any provision of this Division.   | 10<br>11             |
| (2)   | The patient must be transferred back to the correctional centre within 7 days unless the Director-General, or a person authorised by the Director-General for the purposes of this section, is of the opinion that:                                | 12<br>13<br>14<br>15 |
| (a)   | the patient is a mentally ill person or is suffering from a mental condition for which treatment is available in a mental health facility, and   | 16<br>17<br>18       |
| (b)   | other care of an appropriate kind would not be available to the person in the correctional centre.   | 19<br>20             |
| (3)   | The patient may be transferred back to the correctional centre at any time if the Director-General or a person authorised by the Director-General is of the opinion that:  | 21<br>22<br>23       |
| (a)   | the patient has ceased to be a mentally ill person or to be suffering from a mental condition for which treatment is available in a mental health facility, or   | 24<br>25<br>26       |
| (b)   | other care of an appropriate kind would be reasonably available to the patient in a correctional centre.   | 27<br>28             |
| (4)   | Nothing in this section affects the powers of the Tribunal to receive and make recommendations in respect of a patient transferred to a mental health facility from a correctional centre.   | 29<br>30<br>31       |
| <b>53    Requests for transfer to correctional centre</b> |  | 32                   |
| (1)   | A forensic patient who is detained in a mental health facility may, at any time, request the Tribunal to make a recommendation to a prescribed authority for an order that the patient be transferred to a correctional centre.                    | 33<br>34<br>35<br>36 |

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- (2) The Tribunal, after considering any such request, may make the recommendation requested by the forensic patient or may refuse to make that recommendation. 1  
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- (3) The Tribunal must make the recommendation if it is satisfied that the person is not a mentally ill person. 4  
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**Note.** Section 49 empowers the prescribed authority to make the transfer order. 6  
7
- 54 Review by Tribunal of patients awaiting transfer to mental health facility** 8  
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- (1) The Tribunal must informally review the case of a person who is subject to an order for transfer to a mental health facility under this Division but who is not transferred within the period prescribed by the regulations. 10  
11  
12  
13
- (2) The Tribunal must carry out such a review each month until the person is transferred to a mental health facility or the Tribunal recommends to the Director-General that the transfer not take place. 14  
15  
16  
17
- (3) On a review, the Tribunal may make a recommendation to the prescribed authority as to the person's detention, care or treatment in a mental health facility or other place and in the manner specified in the order. 18  
19  
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21  
**Note.** Section 48 empowers the prescribed authority to make an order giving effect to a recommendation of the Tribunal. 22  
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- (4) For the purposes of a review under this section, the Tribunal may communicate with such persons, take such action and make such recommendations as the Tribunal thinks fit. 24  
25  
26
- Division 4 Leave of absence for forensic patients** 27
- 55 Leave of absence for forensic patients** 28
- (1) An authorised medical officer of a mental health facility may allow a forensic patient to be absent from the mental health facility for the period, and subject to the conditions (if any), that the officer thinks fit. 29  
30  
31  
32
- (2) The authorised medical officer must not grant leave of absence if the Tribunal has previously, under similar circumstances, refused to recommend that leave of absence in similar terms be granted to the patient. 33  
34  
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- (3) A forensic patient may apply to the medical superintendent for special leave of absence for any of the following purposes: 37  
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- (a) to visit a sick or dying relative,

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- |           |   |                                  |
|-----------|---|----------------------------------|
| (b)       | to attend the funeral of a near relative,   | 1                                |
| (c)       | to deal with circumstances constituting, in the opinion of the medical superintendent and the Director-General, an emergency.   | 2<br>3<br>4                      |
| (4)       | On receiving an application for special leave of absence, the medical superintendent may recommend to the Director-General that leave be granted, if the medical superintendent is of the opinion that, having regard to the leave proposed, the safety of the patient or any member of the public will not be seriously endangered if the special leave of absence is granted.           | 5<br>6<br>7<br>8<br>9<br>10      |
| (5)       | The Director-General may approve the recommendation and grant special leave of absence to the forensic patient for the period and subject to the conditions (if any) that the Director-General thinks fit.  | 11<br>12<br>13<br>14             |
| <b>56</b> | <b>Leave of absence for medical reasons</b>   | 15                               |
| (1)       | An authorised medical officer of a mental health facility may allow a forensic patient to be absent from the facility for the period, and subject to the conditions (if any), that the officer thinks fit for the purpose of undergoing medical investigation or treatment.   | 16<br>17<br>18<br>19<br>20       |
| (2)       | The authorised medical officer must notify the Director-General of any absence permitted under this section.  | 21<br>22                         |
| <b>57</b> | <b>Leave of absence on review of case</b>   | 23                               |
| (1)       | The Tribunal may, as a consequence of the review of the case of a forensic patient, and if of the opinion that it will benefit the health of the patient to do so, make a recommendation to the prescribed authority that the patient be allowed to be absent from a mental health facility for such period and subject to such terms and conditions, if any, as the Tribunal thinks fit. | 24<br>25<br>26<br>27<br>28<br>29 |
| (2)       | If any such recommendation is made in respect of a forensic patient, the prescribed authority may, subject to the regulations, make an order allowing the patient to be absent from a mental health facility for such period and subject to such terms and conditions, if any, as are specified in the order.   | 30<br>31<br>32<br>33<br>34       |
| (3)       | The Tribunal may not make a recommendation unless it is satisfied that, having regard to the leave proposed to be granted, the safety of the patient or any member of the public will not be seriously endangered if the leave of absence is granted.   | 35<br>36<br>37<br>38             |



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## **Division 5 Breaches of orders and escapes by forensic patients**

### **58 Breach of orders for release**

- (1) The prescribed authority may make an order under this section in respect of a person if it appears to the prescribed authority that:
  - (a) the person has breached a condition of an order for the person's conditional release under this Part, or
  - (b) the person has committed a breach of an order releasing the person from custody under section 39, or
  - (c) the person has breached a condition of leave of absence granted under this Part, or
  - (d) the person has been granted conditional release or leave of absence under this Part and has suffered a deterioration of mental condition and become a serious danger to himself or herself or to any member of the public because of his or her mental condition.
- (2) The prescribed authority may order the patient's apprehension and detention, care or treatment in a mental health facility, correctional centre or other place, and in the manner, specified in the order.
- (3) A police officer to whose notice a detention order is brought must:
  - (a) apprehend and take or assist in taking the person to the mental health facility, correctional centre or other place specified in the order, or
  - (b) cause or make arrangements for some other police officer to do so.
- (4) A police officer may enter premises to apprehend a person under this section, and may apprehend any such person, without a warrant and may exercise any of the powers conferred on a person who is authorised under section 81 of the *Mental Health Act 2006* to take a person to a mental health facility.

### **59 Apprehended person may seek reconsideration by Tribunal**

- (1) A person who is apprehended under section 58 may request the Tribunal to investigate the evidence on which the order for the person's apprehension was made and may adduce other evidence for the consideration of the Tribunal.

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- (2) On a reconsideration under this section, the Tribunal may make such recommendations as it thinks fit concerning the person to the prescribed authority. 1  
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- 60 Retaking of escapees** 4
- (1) A forensic patient who escapes from a mental health facility may be retaken at any time by any of the following persons: 5  
6
- (a) the medical superintendent of the mental health facility or any other suitably qualified person employed in the mental health facility who is authorised to do so by the medical superintendent, 7  
8  
9  
10
  - (b) a police officer, 11
  - (c) a person authorised by the Director-General or the medical superintendent, 12  
13
  - (d) a person assisting a person referred to in paragraph (a), (b) or (c). 14  
15
- (2) On being retaken, the patient is to be conveyed to and detained in the mental health facility from which the patient escaped. 16  
17
- 61 Aiding or permitting escape** 18
- (1) A person must not release or attempt to release a person who is being conveyed to or detained in a mental health facility under this Act. 19  
20  
21
- (2) A medical superintendent or any other person employed in a mental health facility must not: 22  
23
- (a) through wilful neglect or connivance, permit any person detained in the facility under this Act to escape from the facility, or 24  
25  
26
  - (b) abet or connive at the escape of any such person from a mental health facility. 27  
28
- Maximum penalty: 29
- (a) on conviction on indictment—imprisonment for 3 years, or 30  
31
  - (b) on summary conviction—imprisonment for 1 year or 10 penalty units, or both. 32  
33
- 62 Issue of warrants for apprehension of persons outside State** 34
- A Magistrate or authorised officer within the meaning of the *Criminal Procedure Act 1986* may issue a warrant for the apprehension of a person if a credible person, on oath before the 35  
36  
37

Magistrate or officer, shows reasonable cause to suspect that the person is a forensic patient:

- (a) who has escaped from a mental health facility and is outside the State, or
- (b) is the subject of an order under section 58.

## **Division 6      Termination of classification as forensic patient**

### **63      Termination of classification as forensic patient on unconditional release**

- (1) A forensic patient ceases to be a forensic patient if any of the following events occurs:
  - (a) the person is released unconditionally in accordance with an order under this Part of the prescribed authority,
  - (b) if the person has been released in accordance with such an order subject to conditions—the time specified in the conditions as being a time during which those conditions, or any of them, are to be complied with expires.
- (2) This section applies in addition to sections 64–67.

### **64      Additional circumstances for termination of classification as forensic patient**

- (1) A person who has been detained in a mental health facility, correctional centre or other place following a special hearing under section 19 ceases to be a forensic patient if any of the following events occurs:
  - (a) the limiting term (where that term is less than life) imposed in respect of the person expires,
  - (b) the person is classified as an involuntary patient.
- (2) A person who has been found by a court to be unfit to be tried for an offence ceases to be a forensic patient if the Tribunal notifies the court and the Director of Public Prosecutions that it is of the opinion that the person has become fit to be tried for an offence (whether or not a special hearing has been conducted in respect of the offence) and:
  - (a) a finding is made, at a further inquiry by the court as to the person's unfitness, that the person is fit to be tried for the offence, or
  - (b) the Director of Public Prosecutions advises the Minister for Health that the person will not be further proceeded

	against in respect of the offence and the person is released from detention pursuant to section 29.	1 2
<b>65</b>	<b>Termination of classification of forensic patient serving sentence of imprisonment</b>	3 4
	A person who became a forensic patient because the person was transferred to a mental health facility from a correctional centre under this Part ceases to be a forensic patient if any of the following events occurs:	5 6 7 8
	(a) the person is transferred to a correctional centre from the mental health facility,	9 10
	(b) the person's sentence of imprisonment expires,	11
	(c) if the person's non-parole period has expired—the person is released unconditionally by order of the prescribed authority following a recommendation of the Tribunal,	12 13 14
	(d) if the person has been released in accordance with such an order subject to conditions—the time specified in the conditions as being a time during which those conditions, or any of them, are to be complied with expires.	15 16 17 18
<b>66</b>	<b>Termination of classification as forensic patient of person on remand</b>	19 20
	A person on remand who is a forensic patient because the person has been transferred to a mental health facility ceases to be a forensic patient if any of the following events occurs:	21 22 23
	(a) the person is released (which the Minister for Health is hereby authorised to order or to otherwise ensure) following advice by the Director of Public Prosecutions that the person will not be further proceeded against in respect of the offence in relation to which the person has been remanded,	24 25 26 27 28 29
	(b) the person is transferred to a correctional centre.	30
<b>67</b>	<b>Classification as involuntary patient</b>	31
	(1) The Tribunal may, on a review of a forensic patient under this Act, classify the patient as an involuntary patient if the patient would, by virtue of the operation of this Act or any other law, cease to be a forensic patient within 6 months after the date of the review and the patient:	32 33 34 35 36
	(a) has been detained in a mental health facility, correctional centre or other place following a special hearing under section 19, or	37 38 39

(b)	has been transferred to a mental health facility from a correctional centre while serving a sentence of imprisonment.	1 2 3
(2)	On classification as an involuntary patient under this section, the person ceases to be a forensic patient.	4 5
<b>68</b>	<b>Release on ceasing to be a forensic patient</b>	6
(1)	A person who ceases to be a forensic patient must be discharged from the mental health facility in which the person is detained if the person ceases to be a forensic patient.	7 8 9
(2)	Nothing in this section prevents a person who ceases to be a forensic patient from being dealt with under Chapter 3 of the <i>Mental Health Act 2006</i> .	10 11 12
<b>Division 7</b>	<b>General</b>	13
<b>69</b>	<b>Security conditions for forensic patients</b>	14
(1)	A forensic patient who is detained in a mental health facility, correctional centre or other place or absent in accordance with this Part is to be subject to any security conditions that the Director-General considers necessary.	15 16 17 18
(2)	Despite subsection (1), a forensic patient detained in any part of the Long Bay Prison Hospital that is a mental health facility is to be subject to any security conditions that the Director-General of the Department of Corrective Services considers necessary.	19 20 21 22
(3)	For the purposes of subsection (2):	23
(a)	any part of the Long Bay Prison Hospital that is a mental health facility is taken to be a correctional centre within the meaning of the <i>Crimes (Administration of Sentences) Act 1999</i> , and	24 25 26 27
(b)	a forensic patient who is detained in that facility is taken to be an inmate within the meaning of that Act and that Act and the regulations made under that Act, apply to any such patient, subject to any modifications and to the extent specified by the regulations.	28 29 30 31 32
<b>70</b>	<b>Transport of forensic patients</b>	33
(1)	A forensic patient may be transported to or from a mental health facility, correctional centre or other place if it is necessary or convenient to do so for the administration of this Act or the <i>Mental Health Act 2006</i> . Any such transport is to be subject to	34 35 36 37

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	any security conditions that the Director-General considers necessary.	1 2
(2)	An authorised medical officer may, by order in writing, order the transfer of a forensic patient detained in a mental health facility to another mental health facility.	3 4 5
(3)	The order is sufficient authority for the transfer.	6
(4)	A forensic patient may be taken to or from a mental health facility by a person referred to in section 81 (1) of the <i>Mental Health Act 2006</i> and any other person prescribed by the regulations.	7 8 9
(5)	Section 81 of that Act applies to or in respect of the transport of a forensic patient to or from a mental health facility in the same way as it applies to or in respect of the transport of a person under that Act.	10 11 12 13
<b>71</b>	<b>Other Ministers may make transfer orders as prescribed authority</b>	14
	An order that may be made under this Part by a prescribed authority for the transfer of a person between a correctional centre and a mental health facility or other place or between a mental health facility and a place other than a correctional centre may, in the absence or unavailability, for any cause, of the prescribed authority be made by any Minister of the Crown.	15 16 17 18 19 20
<b>72</b>	<b>Appeals against decisions of authorised medical officers</b>	21
(1)	A forensic patient may appeal to the Tribunal against a failure or refusal by an authorised medical officer to grant the patient leave of absence under this Part.	22 23 24
(2)	An appeal may be made orally or in writing and is to be made in accordance with the regulations. An oral appeal is to be recorded in accordance with the regulations.	25 26 27
(3)	The authorised medical officer must provide the Tribunal with a report about the patient, including the officer's reasons for refusing or failing to grant leave of absence.	28 29 30
(4)	The Tribunal, for the purpose of determining an appeal, has and may exercise the functions of the authorised medical officer with respect to the granting of leave and may make an order accordingly.	31 32 33 34
(5)	In addition, the Tribunal may determine that no further right of appeal may be exercised under this section before the date on which the person is next reviewed by the Tribunal under this Act, if it thinks it appropriate to do so.	35 36 37 38

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**73 Planning for release and leave**

- (1) The authorised medical officer of a mental health facility in which a forensic patient is detained must, if the person is to be released or granted leave under this Part, take all reasonably practicable steps to ensure that the person and any primary carer of the person are consulted in relation to planning the person's release and leave and any subsequent treatment or other action considered in relation to the person.
- (2) In planning the release of any such person and any subsequent treatment or other action considered in relation to any such person, the authorised medical officer must take all reasonably practicable steps to consult with agencies involved in providing relevant services to the person, any primary carer of the person and any dependent children or other dependants of the person.
- (3) The authorised medical officer must take all reasonably practicable steps to provide a person who is released or given leave of absence from the mental health facility, and the person's primary carer, with appropriate information as to follow-up care.
- (4) In this section, *primary carer* has the same meaning as it has in the *Mental Health Act 2006*.

**74 Effect of detention in mental health facility on sentence and parole**

- (1) Any period of detention of a person in a mental health facility or other place, following a transfer under this Part from a correctional centre, is to be treated as if it were a period of imprisonment in a correctional centre for the purposes of the person's sentence and parole.
- (2) For the purposes of Part 6 of the *Crimes (Administration of Sentences) Act 1999*, a forensic patient who is detained in a mental health facility is taken to be serving a full-time sentence of detention in a correctional centre.

**Note.** Part 6 of that Act contains provisions permitting the grant of parole to certain persons serving full-time sentences of detention.

**75 Right of appearance of Director-General in Tribunal proceedings**

The Director-General has the right to appear and be heard, and be represented, in any proceedings before the Tribunal under this Part.

<b>76 Orders under this Part</b>	1
(1) An order under this Part must be in writing.	2
(2) An order under this Part has effect according to its tenor.	3
<b>77 Person who ceases to be a forensic patient may be detained as an involuntary patient</b>	4
Nothing in this Part prevents the application of Chapter 3 of the <i>Mental Health Act 2006</i> to a person who ceases to be a forensic patient or a person from remaining in a mental health facility as a voluntary patient.	5
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<b>[28] Part 6</b>	10
Renumber existing Part 5 (Miscellaneous) as Part 6.	11
<b>[29] New sections 78 and 79</b>	12
Renumber existing sections 40 and 41 as sections 78 and 79.	13
<b>[30] Schedule 1 Savings and transitional provisions</b>	14
Insert at the end of clause 1A (1):	15
<i>Mental Health Act 2006</i>	16
<b>[31] Schedule 2</b>	17
Insert after Schedule 1:	18
<b>Schedule 2 Medical certificate as to examination of inmate</b>	19
	20
(Section 51 (2))	21
<b>Mental Health (Criminal Procedure) Act 1990</b>	22
I ..... (*Medical Practitioner/Psychiatrist)	
(name in full—use block letters)	
of ..... do hereby certify	23
that on the ..... day of ..... 20.....	24
at.....	25
(state name of correctional centre where examination took place)	26



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separately from any other medical practitioner, I personally examined ..... 1

(name of inmate in full) ..... 2

and I am of the opinion that \*he/she is \*mentally ill/suffering from a mental condition ..... 3

for which treatment is available in a mental health facility. ..... 4

I have formed this opinion on the following grounds: ..... 5

(1) Facts indicating \*mental illness/mental condition observed by myself. ..... 6

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(2) Other relevant information (if any) communicated to me by others (state name ..... 7

and address of each informant). ..... 8

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Made and signed this ..... day of ..... 20..... 9

Signature ..... 10

\*Delete whichever does not apply. ..... 11

## 7.8 Protected Estates Act 1983 No 179 ..... 12

### [1] Section 4 Definitions ..... 13

Omit the definitions of *hospital* and *informal patient* from section 4 (1). ..... 14

Insert instead in alphabetical order: ..... 15

*involuntary patient* has the same meaning as it has in the *Mental Health Act 2006*. ..... 16

*mental health facility* has the same meaning as it has in the ..... 17

*Mental Health Act 2006*. ..... 18

### [2] Section 4 (1), definitions of “MHRT” and “patient” ..... 20

Omit “*Mental Health Act 1990*” wherever occurring. ..... 21

Insert instead “*Mental Health Act 2006*”. ..... 22

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<b>[3]</b>	<b>Section 15 Notice that person's capability to manage affairs will be considered</b>	1 2
	Omit "A medical superintendent who intends to bring a person before a Magistrate under section 38 of the <i>Mental Health Act 1990</i> shall".	3 4
	Insert instead "An authorised medical officer who intends to bring a person before a Magistrate for a mental health inquiry under section 34 of the <i>Mental Health Act 2006</i> must".	5 6 7
<b>[4]</b>	<b>Section 15 (a) and (b)</b>	8
	Omit "section 38" wherever occurring.	9
	Insert instead "section 76".	10
<b>[5]</b>	<b>Section 16 Consideration by Magistrate of capability of patients to manage affairs</b>	11 12
	Omit "Where, under section 51 of the <i>Mental Health Act 1990</i> , a Magistrate directs the detention of a person in a hospital as a temporary patient the Magistrate shall" from section 16 (1).	13 14 15
	Insert instead "If, after holding a mental health inquiry under the <i>Mental Health Act 2006</i> , a Magistrate directs the detention of a person in a mental health facility as an involuntary patient the Magistrate must".	16 17 18
<b>[6]</b>	<b>Section 18 Consideration of capability of forensic patients to manage affairs</b>	19 20
	Omit "section 81, 82 or 86 of the <i>Mental Health Act 1990</i> ".	21
	Insert instead "Division 2 of Part 5 or section 54 of the <i>Mental Health (Criminal Procedure) Act 1990</i> ".	22 23
<b>[7]</b>	<b>Section 18</b>	24
	Omit "hospital". Insert instead "mental health facility".	25
<b>[8]</b>	<b>Section 23 Management of estates of persons who are protected persons</b>	26 27
	Omit "hospital". Insert instead "mental health facility".	28

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<b>[9] Section 37 Absence of patient from mental health facility</b>	1
Omit “hospital”. Insert instead “mental health facility”.	2
<b>[10] Section 40 Receipt to be release</b>	3
Omit “hospital”. Insert instead “mental health facility”.	4
<b>[11] Section 79 Directions by Protective Commissioner as to visitors</b>	5
Omit “an authorised officer under the <i>Mental Health Act 1990</i> or any other”	6
from section 79 (a).	7
Insert instead “a”.	8