



Transcript: Return of Patients Absent Without Permission

Name	Dialogue / Actions
Richard	<p>Hi again. Richard here. This scenario focuses on the return provisions in the <i>Mental Health Act 2000</i>. The return provisions apply in the following circumstances:</p> <ul style="list-style-type: none">• where a patient is detained for assessment, treatment or care and they leave the Authorised Mental Health Service without approval or abscond from the Authorised Mental Health Service;• where a patient authorised to have limited community treatment does not return at the end of a limited community treatment period authorised;• where a patient is required to return to the Authorised Mental Health Service before the end of the limited community treatment period authorised due to a change in their <i>treatment plan</i>. That is, if there's a change in the category of the patient's involuntary treatment order from community to inpatient; and• where a patient does not return from an approved temporary absence when required. <p>It's also important to know when the return provisions do not apply. The return provisions do not apply:</p> <ul style="list-style-type: none">• when an involuntary assessment has not commenced• when a person leaves an Authorised Mental Health Service while being detained under an <i>emergency examination order</i> , and• if a patient on an involuntary treatment order is non compliant with their <i>treatment plan</i> but does not require inpatient treatment. <p>In the case of a patient being non compliant with their treatment plan, the process for requiring the patient to return to the Authorised Mental Health Service is set out in section 117 of the Mental Health Act.</p> <p>To further explain the return provisions, this scenario will outline a case discussion regarding two patients, Sophie and Ryan. Let's start by listening to William talking about Sophie.</p>
William	<p>The case I want to talk about is Sophie who was on an involuntary treatment order (community category). Sophie's authorised doctor determined that she was becoming unwell and needed inpatient treatment. To facilitate this, the authorised doctor completed a <i>change of category of involuntary treatment order</i> form, which changed her category of involuntary treatment order from involuntary treatment order (community) to involuntary treatment order (inpatient). Sophie's doctor attempted to explain the reasons for the change in category; however Sophie did not accept that she was becoming unwell. Details of the conversation were noted in her clinical file.</p> <p>Her authorised doctor then completed the <i>requirement to return to authorised mental health service</i> form. Sophie's case manager and another health practitioner went to Sophie's home to present her with the <i>notice of change of category of involuntary treatment order</i> and to discuss her admission to the inpatient unit; however Sophie refused to accompany them back to the Authorised Mental Health Service. The staff returned to the</p>



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	authorised mental health service and completed a <i>request for police assistance</i> form. The staff liaised with local police regarding a suitable time to return to Sophie's place later that day. However, Sophie had left her home before police and staff had arrived.
Isobel	What happened next?
William	<p>The staff then liaised with the authorised doctor who completed the authority to return patient to authorised mental health service form as it was not possible to determine Sophie's whereabouts and she had been assessed as a risk of harm to herself. The form allowed the police to return Sophie without a health practitioner being present. The form was faxed to the police and the Warrant Bureau in accordance with the Absent Without Permission flipchart. A copy of the form was also given to the Administrator Delegate as well as being placed on Sophie's clinical file.</p> <p>The original version of this form was filed safely in case police wanted to sight it. Remember though, the requirement to return patient to authorised mental health service form is not provided to the police as this form contains clinical information that is not required by the police. Two days later Sophie was located by the Police and brought into the inpatient unit.</p>
Isobel	Doesn't the Director of Mental Health have to be notified when a patient doesn't return when the requirement to return to authorised mental health service form is issued?
Edward	For patients on an involuntary treatment order or assessment documents, the notification to Director of Mental Health unauthorised absence of a patient form, needs to be completed when the patient is either assessed as high risk or is an inpatient of a medium or high security unit, or both. The form is always completed for forensic or classified patients. As Sophie doesn't meet any of those criteria, this form wasn't required.
Edward	Mary, what information needs to be placed on Sophie's file?
Mary	A copy of the requirement to return to authorised mental health service and the authority to return patient to authorised mental health service forms must be placed in the clinical file.
Isobel	What if Sophie had been at home and wouldn't let the health practitioners or the police in?
Mary	They wouldn't have been able to enter unless the occupier permitted it. However, it should be noted that if there was an imminent risk of injury to a person (including to Sophie herself), the police are authorised under section 609 of the Police Powers & Responsibilities Act 2000 to enter a place.
Isobel	What happened after Sophie was returned by the Police?
William	The administrator (or delegate) of the Authorised Mental Health Service completed the recall notice – cancellation of the authority to return patient to authorised mental health service form and faxed it to the local police and to the Warrant Bureau. If the authority to return patient to authorised mental health service form had been faxed to the Police Communications Centre as well, a copy of the recall notice would also need to be sent to that unit.
Anne	Why was it so important to complete the recall notice form?



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William	It's important to complete this notice so the police don't continue to look for the person. If Sophie hadn't been located, the recall notice would also need to be completed if the involuntary treatment order was revoked by an authorised doctor or if the involuntary treatment order had ceased because Sophie had not received treatment for 6 months.
Anne	What would have been different if Sophie had been detained for involuntary assessment?
Mary	All of the same procedures would have occurred, however if Sophie hadn't returned within the 24 hour assessment period, a decision would need to be made about whether it was appropriate to extend the assessment timeframe for a further 24 hours to enable her return. This extension can only be made for a maximum of 72 hours. If the assessment period was extended, an amended authority to return patient to authorised mental health service form is required to be sent to the police every time the period is extended.
Richard	The second client discussed is Ryan who was on a forensic order and was in the inpatient unit. As part of his treatment plan, Ryan was allowed unescorted limited community treatment, which had been occurring for a number of weeks without incident. Yesterday however, Ryan failed to return at 16:00 hrs and attempts to contact him on his mobile were unsuccessful. This scenario reviews whether the team completed all of the requirements as outlined in the absent without permission flipchart.
Edward	I'd like to review the procedures we used when Ryan failed to return from limited community treatment yesterday afternoon, to make sure that we followed the absent without permission flipchart.
William	I was on duty when Ryan was supposed to return and when he hadn't returned by 16:00 hrs, I tried a number of times to phone his mobile without success. I also tried his parents' home and mobile numbers but they hadn't seen him. I then notified the authorised doctor on duty and the Clinical Director that I was unable to contact Ryan and that he was absent without permission. I also documented the outcomes of my search efforts in his clinical file.
Mary	Once I was notified, I completed the requirement to return to authorised mental health service and the authority to return patient to authorised mental health service. As Ryan could not be contacted I was unable to discuss with him the reasons why the requirement to return was completed. I completed the authority to return patient form to inform police of Ryan's absent without permission status and enable them to return Ryan without a health practitioner being present if necessary. I faxed a copy of the form to the local police station and followed up with a phone call to confirm that the fax has been received.
William	Doesn't a copy of the authority to return patient to authorised mental health service also have to be faxed to the Police Information Centre (Warrant Bureau)?
Mary	I also did that. However I didn't fax a copy of the form to the Regional Police Communications Centre as I didn't regard Ryan as being "high risk". If Ryan had been a Special Notification Forensic Patient, a Classified Patient, or a high risk Forensic Patient, I would have also faxed it to the Regional Police Communications Centre, as required by the absent without permission flipchart. The other things that I did included providing a copy of the forms to



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	the Administrator Delegate and I asked William to put the forms on Ryan's clinical file.
Isobel	Who else needs to be notified if a forensic patient is absent without permission?
Mary	As required in the absent without permission flipchart - forensic order patients section, being the psychiatrist on call I contacted the Director of Mental Health immediately. Then I completed and emailed the notification to Director of Mental Health unauthorised absence of a patient to the Director of Mental Health, the Health Service Chief Executive, the Clinical or Executive Director of the Authorised Mental Health Service, the Forensic Liaison Officer and the Administrator Delegate.
Edward	The last issue that you need to be aware of, although it is likely to be a rare occurrence, is where a forensic disability service client is taken to an Authorised Mental Health Service after a period of being absent without permission from the forensic disability service. If this happens, while the client is in the Authorised Mental Health Service, staff of the service may provide care to the forensic disability service client for a period of up to 3 days, unless the Director of Mental Health agrees to a longer period of detention. During this time seclusion and restraint may be authorised where there is an imminent risk of harm to the client or others. Limited community treatment up to the level approved or ordered by the Mental Health Court or Mental Health Review Tribunal may also be authorised if appropriate. The forensic disability service remains ultimately responsible for the client and the Authorised Mental Health Service should liaise with the forensic disability service to return the client as soon as clinically appropriate.