

The Sindh Mental Health Rules, 2014.

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**GOVERNMENT OF SINDH
HEALTH DEPARTMENT**

Karachi, dated the 26th February ,2015.

NOTIFICATION

No.OSD(H)/R-II/2015. In exercise of the powers conferred by section 59 of the Sindh Mental Health Act, 2013, the Government of Sindh are pleased to make the the following rules, namely:-

**Chapter - I
Preliminary**

1. (1) These rules may be called the Sindh Mental Health Rules 2014. **Short title and commencement.**
- (2) They shall come into force at once.
2. (1) In these rules unless the context otherwise requires - **Definitions.**
- (a) "Act" means the Sindh Mental Health Act, 2013;
- (b) "applicant" means the person who makes an application to the Licensing Authority for grant of a license under these rules or submits any other application permissible under the Act or these rules;
- (c) "Authority" means the Sindh Mental Health Authority constituted under section 3;
- (d) "Chairperson" means the Chairperson nominated under sections 3 and 4;
- (e) "Form" means Form annexed to these rules;
- (f) "health facility" or "psychiatric facility" shall have the same meaning as assigned to them in the Act.
- (g) "license" means license granted under these rules;
- (h) "licensee" means the holder of a license;
- (i) "Licensing Authority" means an officer or authority as may be specified by Government to be licensing authority for the purposes of these rules;
- (j) "Member" means member of the Authority;
- (k) "Secretary" means the Secretary of the Authority appointed under rule 8;

(l) "section" means a section of the Act.

(2) The words and expressions used in these rules but not defined shall have the same meaning as assigned to them in the Act.

Chapter –II Proceedings of Authority

3. (1) The Authority shall ordinarily meet once in every six months at such time and place as may be fixed by the Chairperson; provided that the Chairperson-

Meetings of the Authority.

(i) may call a special meeting at any time to deal with any urgent matter requiring the attention of the Authority;

(ii) shall call a special meeting if he receives a requisition in writing signed by not less than seven members including at least three professionals and stating the purposes for which they desire the meeting to be called.

(2) The first meeting of the Authority to be held in any calendar year shall be the annual meeting for that year.

4. Where a meeting referred to in the proviso to sub-rule (1) of rule 3 has been convened, only the subjects for the consideration of which the meeting was convened, shall be discussed.

Subjects for special meeting.

5. At the annual meeting of the Authority, the following subjects shall be considered and disposed of, namely,-

Agenda for the annual meeting.

(a) review of the progress of implementation of the various provisions of the Act during the preceding one year;

(b) other business on the agenda, and

(c) any other business brought forward with the consent of the Chairperson or where he is absent with the consent of the Member presiding at the meeting.

6. (1) Every notice calling for a meeting of the Authority shall –

Procedure for holding meetings.

(a) specify the place, date and hour of the meeting;

(b) be served upon every member of the Authority not less than twenty one clear days in the case of half-yearly meeting and not less than ten days in the case of other meetings before the day appointed for the meeting.

(2) The Secretary shall prepare and circulate to the members along with the notice of the meeting, an agenda for such meeting

showing the business to be transacted.

(3) A member who wishes to move a resolution on any matter included in the agenda, shall give notice thereof to the Secretary not less than one week before the date fixed for the meeting.

(4) A member who wishes to move any motion not included in the agenda shall give notice thereof to the Secretary not less than one week before the date fixed for the meeting.

7. (1) The Chairperson or in his absence any member authorized by him, shall preside over the meetings of the Authority.

Proceedings of the authority.

(2) The quorum for the meeting of the Authority shall be seven members, having representation of at least three professionals.

(3) If within half an hour from the time appointed for holding a meeting of the Authority, quorum is not present, the meeting shall be adjourned to reconvene within seven days. The Presiding Officer of such meeting shall inform the members present in that meeting about the time and place and send notice to other members.

(4) If at the adjourned meeting also, quorum is not present within half an hour from the time appointed for holding the meeting, members present shall constitute the quorum.

(5) In the adjourned meeting, if the Chairperson is not present and no Member has been authorized to preside at such meeting, the members present shall elect a member from amongst themselves to preside at the meeting.

(6) Each member including the Chairperson shall have one vote and in case of equality of votes, the Chairperson or any Member presiding over such meeting, shall in addition, have a casting vote.

(7) All decisions of the meeting of the Authority shall be taken by a majority of the members present and voting.

8. (1) The Chairperson shall cause to be appointed a Secretary to the Authority from amongst persons possessing post-graduate degree in psychiatry and having three years experience in the field of psychiatry.

Secretary of the Authority.

(2) The Secretary shall be a full-time or part-time servant of the Authority and shall function as the administrative Officer of the Authority.

(3) The Secretary shall be responsible for the control and management of office accounts and correspondence.

(4) The Secretary shall attend and take notes of the proceedings of the meeting of the Authority.

(5) The Secretary shall cause to be appointed such members of the ministerial and non-ministerial staff which are essential for efficient functioning of the Authority.

(6) The Secretary shall exercise such other powers and discharge such other functions as may be authorized in writing by the Chairperson for the efficient functioning of the Authority.

(7) The Secretary shall forward copies of the proceedings of the Authority to Government periodically.

Chapter-III License

9. No person shall establish or maintain a psychiatric facility unless he holds a valid licence granted to him under these rules in pursuance of clause (e) of section 59 other than the Government owned psychiatric facility:

Establishment or maintenance of Psychiatric Facility.

Provided that a psychiatric facility licensed by Government or Federal Government, as the case may be, or maintained as such immediately before the commencement of these rules shall continue to be maintained and shall be deemed to be a licensed psychiatric facility under these rules, for a period of three months from such commencement, if an application made in accordance with rule 10.

10. (1) Every person who holds, on commencement of this Act, a valid licence shall, if he intends to establish or continue the maintenance of a psychiatric facility shall make an application for grant of licence to -

Application for License.

- (a) the Licensing Authority in Form-I;
- (b) be accompanied by such documents and fees of rupees one hundred thousand by the Authority with the approval of Government in the form of a bank draft drawn in favour of the Authority.

11. (1) On receipt of application under rule 10, the Licensing Authority shall make inquiries as it may deem fit and where it is satisfied that –

Grant or refusal of Licence.

- (a) the establishment or maintenance of psychiatric facility before the commencement of these rules is necessary;
- (b) the applicant is in a position to provide the minimum facilities prescribed for admission, treatment and care of mentally ill persons; and
- (c) the psychiatric facility shall be under the supervision of Medical Officer who is a Psychiatrist,

it shall grant a licence to the applicant in Form-II, and where it is not satisfied, it shall, by order, refuse to grant the licence applied for:

Provided that before making any order refusing to grant a licence, the Licensing Authority shall give to the applicant a

reasonable opportunity of being heard and every order of refusal to grant a license shall set out therein the reasons for such refusal.

(2) Every order refusing or granting a licence under sub-rule (1) shall be communicated to the applicant by sending a copy of the order by registered post on the address given in the application.

(3) A copy of the order shall be conspicuously displayed on the notice-board of the Licensing Authority.

12.(1) Where a licensee is unable to function as such for any reason or where a licensee dies, the licensee, or as the case may be, the legal representative of such licensee shall forthwith report the matter in the prescribed manner to the Licensing Authority and notwithstanding anything contained in this sub-rule, the psychiatric facility concerned may continue to be maintained and shall be deemed to be a licensed psychiatric facility for a period of three months from the date of such report or from the date of the death of licensee if an application is made in accordance with sub-rule (2), for a licence is pending on the expiry of the period of three months, till the disposal of such application.

Licence not to be transferable or heritable.

(2) The legal representative of the licensee referred to in sub-rule (1) shall, if he intends to continue the maintenance of the psychiatric facility after the expiry of the period referred to in sub-rule (1), make, at least one month before the expiry of such period, an application to the Licensing Authority for grant of fresh licence for the maintenance of such psychiatric facility and the provisions of rules 13 and 14 shall apply in relation to such application as they would have applied in relation to an application made under rules 13 and 14.

13. (1) Every licence shall, unless revoked earlier under rule 14, be valid for a period of five years from the date of grant of licence.

Duration and renewal of licence.

(2) A licence may be renewed from time to time, on an application made in that behalf to the Licensing Authority, in Form-II and accompanied by fees of rupees fifty thousand, and every such application shall be made not less than one year before the date on which the period of validity of the licence is due to expire:

Provided that the renewal of a licence shall not be refused unless the Licensing Authority is satisfied that -

- (i) the licensee is not in a position to provide in a psychiatric facility, the minimum facilities prescribed for the admission, treatment and care therein for mentally ill persons; or
- (ii) the licensee is not in a position to provide a medical officer who shall be a Psychiatrist to take care of the psychiatric facility;

- (iii) the licensee has contravened any of the provisions of the Act or these rules.

14. The Licensing Authority may, without prejudice to any other penalty that may be imposed on the licensee, by order in writing, revoke the license if it is satisfied that - **Revocation of licence.**

- (a) the psychiatric facility is not being maintained by the licensee in accordance with the provisions of the Act or these rules; or
- (b) the maintenance of the psychiatric facility is being carried on in a manner detrimental to the moral, mental or physical well-being of other in-patients thereof:

Provided that no such order shall be made except after giving the licensee a reasonable opportunity of being heard, and every such order shall set out therein the grounds for the revocation of the licence and such grounds shall be communicated to the licensee.

(2) Every order made under sub-rule (1) shall contain a direction that the in-patients of the psychiatric facility shall be transferred to such other psychiatric facility as may be specified in that order and it shall also contain such provision including provisions by way of directions as to the care and custody of such in-patients pending such transfer.

(3) Every order made under sub-rule (1) shall take effect –

- (a) where no appeal has been preferred against such order under rule 15, immediately on the expiry of the period prescribed for such appeal; and
- (b) where such appeal has been preferred and the same has been dismissed, from the date of the order of such dismissal.

(4) Every order revoking the licence under sub-rule (1) shall be communicated to the licensee by sending a copy of the order by registered post to the address given in the application for grant of licence.

(5) A copy of the order shall be conspicuously displayed on the notice-board of the office of the Licensing Authority and in the psychiatric facility.

15. (1) Any person aggrieved by an order of the Licensing Authority refusing to grant or renew a licence, or revoking a licence, may prefer an appeal to Government within sixty days of the communication of such order: **Appeal.**

Provided that Government may entertain an appeal preferred after the expiry of the period give under this rule if it is

satisfied that the appellant was prevented by sufficient cause from preferring the appeal in time.

(2) The appeal shall be in Form-V and shall be sent to Government by registered post or by appearing person before and delivering the same to the Secretary to Government of Sindh, Health Department or any other officer nominated by him in this behalf.

(3) Every appeal under sub-rule (1) shall be accompanied by fees of rupees one thousand.

16. (1) An order has been made in accordance with the provisions of section 466 or section 471 of the Code of Criminal Procedure, 1898 (Act V of 1898), section 30 of the Prisoners Act, 1900 (III of 1900), section and section 55 of this Act, section 130 of the Pakistan Army Act, 1952 (XXXIX of 1952), section 143 of the Pakistan Air Force Act, 1953 (VI of 1953) or section 123 of the Pakistan Navy Ordinance, 1961 (XXXV of 1961), directing the reception of a mentally ill prisoner into any psychiatric facility, shall be sufficient authority for the admission of such person in such psychiatric facility, to which such person may be lawfully transferred for detention therein.

Admission and detention of convicted prisoner.

(2) Where an order is made by the Magistrate under sub-rule (1), he may by reasons to be recorded in writing, direct that the mentally ill person in respect of whom the order is made may be detained for such period not exceeding thirty days in such place as he may deem appropriate.

17. The admission, care and treatment of the under trial prisoners or convicted persons shall be regulated in accordance with section 54 and also at such places as may be notified by Authority.

Admission, care and treatment of under trial and convicted prisoner.

18. (1) Every psychiatric facility shall be maintained subject to the condition that -

Manner and conditions of maintaining Psychiatric Facility.

- (a) such psychiatric facility is located only in an area approved by the Authority;
- (b) such psychiatric facility is located in a building constructed with the approval of the Authority;
- (c) the building, where such psychiatric facility is situated, has sufficient ventilation and is free from any pollution which may be detrimental to the patients admitted in such psychiatric facility;
- (d) such psychiatric facility has enough beds to accommodate the patients;
- (e) the nurse(s) and other staff employed in such or psychiatric facility are duly qualified and competent to handle the work assigned to them;

- (f) the supervising officer-in-charge of such psychiatric facility is a person duly qualified having a post-graduate qualification in psychiatry recognized by the Pakistan Medical and Dental Council.

(2) There shall be separate facilities for male and female patients.

Chapter-IV Psychiatric Facility

19. The minimum facilities required for every psychiatric facility for treatment of patients mentioned in the Act shall be as follows:- **Minimum facilities for treatment of out-patients.**

1. Staff for 10-bedded Psychiatric Facility or nursing home:

- (a) one full time qualified Psychiatrist;
- (b) one Medical Officer and Clinical Psychologist or Medical Social Worker;
- (c) at least one staff nurse on duty all the time;
- (d) gender appropriate attendants: patient ratio 1:5.

2. **Physical features:** Adequate floor space depending on the number of beds shall be provided.

3. **Support facilities:** The minimum support/ facilities shall be as under:-

- (a) provision for emergency care for out-patients and for handling medical emergencies for out-patients and in-patients;
- (b) a well-equipped Electro Convulsive Therapy Facility;
- (c) psycho diagnostic facilities;
- (d) provision for recreational or rehabilitation activities; and
- (e) facilities for regular out-patient care.

20. Every psychiatric facility shall maintain the records of the treatment of patients in Form-VI. **Maintenance of records.**

Chapter-V Admission and detention in Psychiatric Facility

21. (1) The application for reception order may be made –

- (a) by the Medical officer-in-charge of a Psychiatric Facility in Form-VII; or
- (b) by the husband, wife or any other relative of the mentally ill person in Form-VIII;

**Application by
Medical Officer-in-charge.**

(2) Every application by the husband or wife, relative or friend of a person who is alleged to be mentally ill shall be accompanied by necessary medical certificates.

(3) Such application shall be signed either by the husband or wife or a relative or a friend as the case may be and verified by two independent witnesses.

(4) The name, address, occupation and other details of all the applicants and the attesting witnesses shall be clearly given in such application.

Chapter VI Registration of Psychiatrists

22. (1) The Authority shall maintain a register for registration of qualified psychiatrist recognized by the Pakistan Medical and Dental Council. **Registration of psychiatrist.**

(2) The Authority shall be competent to struck the name of a registered psychiatrist from the register if he is found guilty of misconduct and/or malpractices.

(3) No psychiatric facility shall engage or employ a Psychiatrist unless he is registered with the Authority.

Chapter VII Informed consent for research

23. Any person who intends to conduct any research related to the mental health shall submit the approval letter from a recognized ethical committee or institutional review board to the Authority. In case authority, at any time considers any ethical flaw, shall take necessary action. **Research to be submitted to the Authority.**

**(IFTIKHAR ALI SHALLWANI)
SECRETARY HEALTH
GOVERNMENT OF SINDH**

Form-I
APPLICATION FOR LICENCE
(See rule 10)

1. Name of the Psychiatric Facility _____
2. Location of the Psychiatric Facility _____
3. Telephone No. _____
4. Fax No. _____
5. E.mail: _____
6. Postal Address: _____
7. Date of establishment of Psychiatric Facility _____
8. Name, address and educational qualification of the persons making application / working in the Psychiatric Facility _____

9. Details of fees during the last and the current financial year.
10. Income and expenditure statement of the last financial year.
11. Details of all (assets, plot, furniture, labs, libraries etc.)
12. Details of the building of the Psychiatric Facility with sketch map (enclose copy)
13. If the building is owned, the property documents and their details of ownership (enclose copy).
14. If the building is rented, the copy of the rent agreement and the documentary evidence into rent agreement with the institution (enclose copy)
15. State, if the building or a part/portion of it is used for other purposes as well, during/after the working hours of the Facility, if so, submit details alongwith documentary evidence _____

16. Any other information about the Psychiatric Facility that the applicant desires to submit: _____

Contd.

17. DECLARATION

We, the undersigned declare that the information provided/enclosed in respect of the above named Psychiatric Facility is correct to the best of our knowledge.

**ADMINISTRATOR/OWNER
OF THE PSYCHIATRIC
FACILITY**

CNIC NO. _____

FORM-II
(see rule 11)

LICENCE UNDER THE SINDH MENTAL HEALTH RULES 2014

This licence is hereby granted to _____ under the Sindh Mental Health Rules, 2014, hereinafter referred to as the licensee on payment of prescribed fee on the following terms and conditions:-

1. A licence shall be valid for one year commencing from [date] _____ and ending on [date] _____.
2. The licence is renewable on payment of prescribed fee by the Sindh Mental Health Authority, hereinafter referred to as the Authority.
3. The licensee shall –
 - (a) function in accordance with the Sindh Mental Health Act, 2013 and rules framed thereunder and the instructions issued from time to time by the Authority;
 - (b) ensure compliance of admission, care, treatment of mentally ill persons specified by the Authority;
 - (c) charge service charges as may be fixed by the Authority;
 - (d) ensure that the Psychiatric Facility is managed and run by the professionals, having qualifications prescribed by the Authority;
 - (e) ensure that the mentally disordered person is provided treatment and care;
 - (f) furnish such reports, information as may be required by the Authority;
 - (g) provide the minimum facilities prescribed for admission, treatment and care of mentally ill persons;
 - (h) continue to function till the decision on his application for renewal of licence.

(sd)

Place: _____

Chairman / Secretary

Day _____ Date: _____

FORM-III
Application for Order
(see section 10)

In the matter of [name of patient] _____ s/d/w of _____ residing at _____ by occupation _____ a person alleged to be a mentally ill person.

To,

The Magistrate / Incharge Hospital Management specially empowered under Sindh Mental Health Act 2013] [place _____].

[The petitioner's name] _____ s/d/w _____ residing at _____ by occupation _____ in the town of _____ [or sub-division of _____ in the district of _____.

1. I am [the petitioner major under the law] aged _____.
2. I desire to obtain an order for the reception of [name of patient] _____ who is mentally ill person in the [name of Psychiatric Facility] situated at _____

3. I am [state relationship with patient] _____

OR

[If the petitioner is not a relative of the patient state as follows.]

I am not a relative of the said patient. The reasons why this patient is not represented by a relative: [State reasons]

The circumstances under which this petition is presented by me are as follows:

[State them]

4. The supporting medical certificate [s] is/are attached with the petition.

5. A statement of particulars relating to the said patient, accompanies this petition and is attached as annexure A.
6. An application for mental capacity of the said patient was made to the [Authority] on the [date]_____ a certified copy of earlier order if any, made on the said petition is annexed hereto. *[if that is the fact.]*

OR

No application for an inquiry into the mental capacity of the said patient has been made prior to this application.

The petitioner therefore prays that a reception order may be made in accordance with the foregoing statement.

(Sd)

Name of the petitioner

The statements contained or referred to in the above paragraphs are true to my knowledge, information and belief.

Place _____

(Sd)

Day _____ Date: _____

Name of petitioner

Copy of CNIC No. _____

Statement of particulars [Annexure A]

[If any of the particulars in this statement is not known, the fact is to be so stated]

The following is a statement of particulars relating to the said patient.

Full name of patient _____ s/d/w of _____

CNIC No./Mark of identification _____

Sex and age _____ Married, single or widowed _____

Occupation _____ Religion _____

Residence at or immediately prior to the [date] hereof _____

Names of any near relatives to the patient who are alive (state the relationship)

Whether this is first attack of mental illness Yes No

Age(if known) at the time of first attack. _____

When and where previously remained under care and treatment as a mentally ill person _____

Duration of existing attack _____ Supposed causes _____

Whether the patient suffers from epilepsy Yes No Don't Know

Whether suicidal Yes No Don't Know

Whether the patient is known to be suffering from any other illness.
Yes No Don't Know

Whether any near relative (stating the relationship) has been affected with mental illness. Yes No Don't Know

Whether the patient is addicted to alcohol, opium, heroin, charas, bhang, cocaine or other intoxicants. Yes No if yes specify

[The statement contained or referred to in paras above are true to my knowledge, information and belief].

[Signature of person making the statement]

Place _____

Day _____ Date _____

Copy of CNIC No _____

FORM-IV
Reception Order on Petition
(see section 37)

I, the undersigned [name of the Magistrate], _____being the Magistrate of the First Class to perform the functions of a Magistrate under Sindh Mental Health Act 2013 upon the petition of [petitioner's name] _____ in the matter of [patient's name] _____mentally ill person accompanied by the medical certificates issued by [name of doctor] _____who is qualified and registered, hereto annexed., hereby authorize you to receive the said patient into your Psychiatric Facility /Nursing home and I declare that I have / or have not personally seen the said patient before making this order.

(Sd)

(Name and Designation of above)

Place: _____

Day _____ Date:_____

Address and description of the Facility / Nursing Home _____

FORM-V
Medical Certificate
(Section 10)

In the matter of [name of patient] _____s/d/w of _____ who is allegedly mentally ill person and is resident of town _____ tehsil _____ district _____

1. I, the undersigned [name of doctor] _____do hereby certify as follows:
I am a gazetted medical officer / or a medical practitioner qualified, registered and in the actual practice of medical profession.

1. [On the day ____ of _____ 20 ____ [at the place/address]

_____ personally examined the said [patient] _____ s/d/w of _____ and came to the conclusion that the said patient is mentally ill person and a proper person to be taken charge of and admitted under care and treatment.

2. I formed this conclusion on the following ground.

- (a) Facts indicating mental illness observed by myself were _____

- (b) Other facts (if any) indicating mental illness communicated to me by others. [name] _____ s/d/w _____
[Here state the information and from whom].

(Sd)

Place: _____

Name and Designation of above

Day _____ Date: _____

PM & DC No. _____

FORM-VI
Reception Order in case of Soldier suffering from Mental Disorder
(see section 54)

Whereas it appears to me that [name of patient] _____s/d/w of _____, a Pakistani subject to laws governing the Armed Forces of Pakistan, who has been declared mentally ill person in accordance with the provisions of Armed Forces laws should be moved to a Psychiatric Facility. I do authorize you [name] _____ incharge of the Psychiatric Facility to receive the said [name of the patient] _____into your Psychiatric Facility.

(Sd)

Administrative / Authorized Medical Officer

Place: _____

Day _____ Date: _____

To be addressed to the person in-charge of Psychiatric Facility duly authorized to receive mentally ill person.

FORM-VII
(see section 30)

Reception order in case of wandering or dangerous person alleged to be mentally ill or such person not under proper control or cruelly treated sent to a Psychiatric Facility established by Government of Sindh

I, [name of the Magistrate] _____ a Magistrate under Sindh Mental Health Act 2013 having caused [patients name] _____ s/d of _____ to be examined by [name of doctor], _____ a Medical Officer/Practitioner being satisfied that [patient name describing him/her] _____ is a mentally ill person who was wandering at large or is a person dangerous by reason of mental illness [or is a mentally ill person not under proper care and control or is cruelly treated / neglected by the persons] having the care or charge of him and proper person to be taken charge of him/her and admitted under care and treatment, hereby direct you to receive the said [patient] _____ into your Psychiatric Facility.

(Sd)

Designation & Stamp

Place: _____

Day: _____ Date: _____

To the Officer in charge of the Psychiatric Facility at _____

FORM-VIII

(see section 34)

Licensed Psychiatric Facility

I, [name of the Magistrate] _____ and being satisfied with the agreement entered into in writing by doctor and said person [name, address and description] who has desired that the said patient [name] _____ may be sent to the Psychiatric Facility at _____ [here insert description of Psychiatric Facility and name of the person incharge of the Facility] _____ to pay the cost of maintenance of the said patient in the said Psychiatric Facility hereby authorize you to receive the said patient into your Psychiatric Facility.

(Sd)

(Name and Designation as above)

Place: _____

Day _____ Date: _____

To the person in-charge of the Psychiatric Facility / Nursing home

FORM-IX
(see section 32)

Bond on the handing over of a mentally ill person to the care of relative or friend

Whereas [patient name] _____ s/d/w of _____
resident of _____ District _____ has been brought
before [a Magistrate of the First Class specially empowered under Sindh mental Act
2013] _____ and is a mentally ill person who is believed to be
dangerous [or deemed to be a mentally ill person who is not under proper care and
control or is cruelly treated or neglected by the person having the charge of him] and
whereas I, _____ s/d/w of _____ resident
of _____ having applied to the Magistrate, that the said [patient
name] _____ may be delivered to my care:

I, [name of person], _____ above named hereby bind
myself that on the said [patient name] _____ being made over to
my care, I will have the said patient properly taken care of and prevented from doing
injury to himself or to others and in case if I commit any default therein, I hereby bind
myself to forfeit to the Government of Sindh the sum of the surety bond.

Date this day _____ of _____ 20

(Sd)

(Where a bond with sureties is to be executed add) I/We [name]
_____ hereby declare myself/ourselves surety/sureties for
the above named [name of person executing of bond] _____
that he will, on the aforesaid [patient name] _____ being
made over to his care, have the said (patients name) _____
properly taken care of and prevented from doing injury to himself or to others and
incase of the (insert name of person executing the bond) _____
making default therein, I/We bind ourselves, jointly and severally, to forfeit to the
Government of Sindh, the sum of rupees _____

Place: _____

Day _____ Date: _____

(Sd)

Copy of CNIC No _____

FORM-X
(see section 19)

Bond on the discharge or temporary release of a mentally ill person from or Psychiatric Facility on the undertaking of relative or friend to take him/her due care

Whereas [patient name], _____ s/d/w of _____ resident of _____ is a mentally ill person who is now admitted in the Psychiatric Facility /Nursing Home at [name of Facility] _____ under Sindh Mental Health Act 2013.

An order made by the court of Magistrate of the First Class specially empowered and whereas I, [person making application for release], _____ son of _____ resident of _____ have applied to the said Magistrate that the said patient may be delivered to my care and custody:

I hereby bind myself that on the said patient being handed over to my care and custody. I will have him properly taken care of and prevent from doing injury to himself or to others (and in case of temporary release under Section _____) and taken back to the Psychiatric Facility/Nursing Home on the expiry of the period of his release or in the event of his becoming unmanageable or dangerous and unfit to be at large and in case of my making default therein, I hereby bind myself to forfeit to the Government of Sindh the sum of rupees _____.

Place: _____

Day: _____ Date: _____

(Sd)

(Whereas a bond with sureties is to be executed add) _____ We do hereby declare ourselves sureties for the above named [name of surety] _____ that he/she will, on the aforesaid [patient name] _____ being delivered to his/her care and custody, have the said patient properly taken care of and prevented from doing injury to himself or to others (and in case of temporary release under Section _____) and taken back to the, Psychiatric Facility /Nursing Home on the expiry of the period of his release or in the event of his becoming unmanageable or dangerous and unfit to be at large; and in case of [name of surety] _____ making default therein, we bind ourselves jointly and severally, to forfeit to the Government of Sindh, the sum of rupees _____.

Place _____

Day: _____ Date: _____

(Sd)

Copy of CNIC No. _____

Name of person executing bond as well as two sureties

Seal of the court

FORM-XI

This Form is to be used only for an Emergency Application

I (name and address of medical practitioner) _____
_____ a
registered medical practitioner, recommend that(full name and address of patient)
_____ be
admitted to a Psychiatric Facility / Nursing Home for assessment in accordance with
Mental Health Act 2013.

I last examined this patient on [day & date] _____/_____ at (time)_____

I have / have not previous acquaintance with the patient before I conducted that
examination. I am approved psychiatrist/medical practitioner/medical officer as defined in
the Mental Health Act 2013.

(Delete if not applicable)

I am of the opinion

- (a) This patient is suffering from mental disorder of a nature or degree which warrants detention of the patient for assessment (or for assessment followed by medical treatment) in Psychiatric Facility for atleast a limited period.

AND

- (b) this patient ought to be so detained
 - (1) in the interests of the patients own Health.
 - (2) in the interests of patient's own safety.
 - (3) with a view to protection of other persons,
(delete not applicable)
- (4) it is of urgent necessity for the patient to be admitted and detained under section 14 of the Act.

My reasons for these opinions are: (Your reasons should cover (a), (b) and (c) above. As part of them: describe the patient's symptoms and behaviour and explain how those symptoms and behaviour lead you to your opinion; and explain why the patient ought to be admitted to Psychiatric Facility urgently and why informal admission is not appropriate; And also state approximately how long you think it would take to obtain a second medical recommendation and in case of any undue delay what risk(s) would be involved to the patient or to other people)

Place: _____

(Sd)

Day: _____ Date: _____

(Medical Officer/Practitioner)

Name: _____

PM & DC No. _____

FORM-XII
(see rule 16)
Renewal of Authority for detention

(To be completed by the responsible Psychiatrist /Medical Officer)

To the managers of (name and address of in which the patient is liable to be detained).
_____ I examined (Print full name of patient)
_____ s/d/w of _____ on [date of examination]
_____. The patient is liable to be detained for a period ending on _____
[date authority for detention is due to expire].

I have consulted [Print full name and profession of person consulted] _____
_____ who has
been professionally concerned with the patient's treatment.

In my opinion,

- (a) this patient is suffering from mental disorder of a nature or degree which makes it appropriate for the patient to receive medical treatment in a **Psychiatric Facility/Nursing Home**,

AND

- (b) it is necessary
(i) for the patient's own Health
(ii) for the patient's own safety
(iii) for the protection of other persons
(Delete not applicable)

- (b) that this patient should receive treatment in **Psychiatric Facility**,

because– (Your reasons should cover both (a) and (b) above. As part of them: describe the patient's symptoms and behaviour and explain how those symptoms and behaviour lead you to your opinion; say whether other methods of treatment or care (e.g. out-patient treatment or social services) are available and, if so, why they are not appropriate.)

(If you need to continue on a separate sheet please indicate here (Yes / No) and attach that sheet to this form) Such treatment cannot be provided unless the patient continues to be detained under the Act, for the following reasons –
(Reasons should indicate why informal admission is not appropriate.)

I am also of the opinion that, taking into account the nature and degree of the mental disorder from which the patient is suffering and all the other circumstances of the case, appropriate medical treatments are available to the patient.

Place: _____

(Sd)

Day: _____ Date: _____

Psychiatrist/Medical Officer

Name: _____

FORM-XIII
(see section 20)

Authority for detention after absence without leave for more than 28 days

[To be completed by the responsible Psychiatrist/Medical Officer]

To the managers of [name and address of hospital in which the patient is liable to be detained]. _____

I examined [name] _____ [Print full name of patient]

[date of examination] _____

Who:

- (a) was absent without leave from hospital or the place where the patient ought to have been beginning on _____ (Date absence without leave began)
- (b) was / is* liable to be detained for a period ending on (* *delete which does not apply*) _____ (*date authority for detention would have expired*)

and

- (c) returned to the hospital or place on (Date) _____

I have consulted [Print full name of approved Mental Health professional]

who is an approved Mental Health professional.

I have also consulted [Print full name and profession of person consulted]

who has been professionally concerned with the patient's treatment.

In my opinion,

- (a) this patient is suffering from mental disorder of a nature or degree which makes it appropriate for the patient to receive medical treatment in a hospital,

AND

- (b) it is necessary
 - (i) for the patient's own Health
 - (ii) for the patient's own safety
 - (iii) for the protection of other persons

(delete which not applicable)

that this patient should receive treatment in hospital, because – *(Your reasons should cover both (a) and (b) above. As part of them: describe the patient's symptoms and behaviour and explain how those symptoms and behaviour lead you to your opinion;*

say whether other methods of treatment or care (e.g. out-patient treatment or social services) are available and, if so, why they are not appropriate.)

Such treatment cannot be provided unless the patient continues to be detained under the Act, for the following reasons– (reasons should indicate why informal admission is not appropriate.)

(If you need to continue on a separate sheet please indicate here (Yes / No) and attach that sheet to this Form)

I am also of the opinion that, taking into account the nature and degree of the mental disorder from which the patient is suffering and all other circumstances of the case, appropriate medical treatments are available to the patient.

The authority for the detention of the patient is / is not* due to expire within a period of two months beginning with the date on which this report is to be furnished to the, Psychiatric Facility or Nursing Home managers. (* Delete which does not apply)

Place: _____
Day: _____ Day: _____

(Sd)
Psychiatrist/Medical Officer

Name: _____

PM & DC No: _____