

Island of  Guernsey

Ordinance of the States **XXVI**
1956

Made	..	..	..	2nd July, 1956
Came into Operation	..	..	..	2nd July, 1956
Laid before the States	..	..	..	25th July, 1956

**The Mental Treatment (Forms)
(Regulations) Ordinance, 1956.**

THE STATES LEGISLATION COMMITTEE, under and by virtue of the powers conferred upon them by paragraph (3) of Article sixty-six of the Reform (Guernsey) Law, 1948, and on the representations of the States Board of Health, hereby order:—

1. The books and other records to be kept in any mental hospital or other place, and the forms to be used, for the purposes of the Mental Treatment Law (Guernsey), 1939, as amended from time to time, shall be those set out respectively in the First and Second Schedules to the Regulations set out in the Schedule to this Ordinance which Regulations are hereby approved.

2. Regulations 19, 20, 21 and 22 of and the Second Schedule to the Ordinance entitled "Ordonnance approuvant des Règlements faits par le Conseil des Etats dit 'The States' Mental Health Services Board' et prescrivant les Formes à être usitées pour les besoins de la Loi dite 'The Mental Treatment Law (Guernsey), 1939'" made on the 2nd day of March, 1940, are hereby repealed.

3. This Ordinance shall come into force on the 2nd day of July, 1956.

SCHEDULE

The Mental Treatment (Forms) Regulations, 1956

Reception of
certified
patients.

1. The documents required by the provisions of Article 16 of the Law to be delivered, upon the admission of a certified patient, to the person in charge of a mental hospital or authorised place, shall be respectively in the forms set out in the Second Schedule to these Regulations, namely—

- (i) the petition: Form 1;
- (ii) the statement of particulars: Form 2;
- (iii) the medical certificate: Form 3;
- (iv) the admission order: Form 4 or Form 4A, as the case requires.

Reception of
voluntary
patients.

2. (1) The written application required by the provisions of Article 31 of the Law to be made by a person not under the age of sixteen years desirous of submitting himself to treatment as a voluntary patient in a mental hospital shall be made in the form set out in Form 5 in the Second Schedule to these Regulations, as the case requires.

(2) In the case of a person under the age of sixteen years—

- (a) written application for such person's treatment as a voluntary patient shall be made by that person's parent or guardian in the form set out in Form 6 in the said Schedule; and
- (b) the medical recommendation accompanying the application shall be in the form set out in Form 7 in the said Schedule.

3. The documents required by the provisions of Article 34 of the Law for the making of a temporary admission order and the reception of a person as a temporary patient into a mental hospital or into charge as a single patient shall be respectively in the forms set out in the Second Schedule to these Regulations, namely—

Reception of temporary patient.

- (i) the application: Form 8;
- (ii) the recommendation: Form 9;
- (iii) the temporary admission order: Form 10.

4. The medical statement required by the provisions of paragraph (5) of Article 16 of the Law to be sent to the President of the Board shall be in the form set out in Form 11 in the Second Schedule to these Regulations.

Medical statement.

5. The special report of the Medical Superintendent required by the provisions of paragraph (3) of Article 17 of the Law to be sent to the Board shall be in the form set out in Form 12 in the Second Schedule to these Regulations.

Special report.

6. The medical certificate required by the provisions of Article 2 of the 1956 Law for the reception

Medical certificate.

of a person into a mental hospital shall be in the form set out in Form 3 in the Second Schedule to this Ordinance.

Urgency
order.

7. The urgency order, medical certificate and statement of particulars required by the provisions of the 1956 Law for the reception and detention of a person in a mental hospital or as a single patient shall be respectively in the forms set out in Form 13, Form 3 and Form 2 in the Second Schedule to these Regulations.

Transfer
order.

8. A transfer order made by a Law Officer of the Crown under the provisions of Part V of the Law shall be in the form set out in Form 14 in the Second Schedule to these Regulations.

Interpreta-
tion.

9. For the purposes of these Regulations the following expressions have the meanings hereby respectively assigned to them, that is to say:—

“the Board” means the States Board of Health;

“the Law” means the Mental Treatment Law (Guernsey), 1939, as amended from time to time;

“the 1956 Law” means the Mental Treatment (Guernsey) Law, 1956, as amended from time to time;

“the Medical Superintendent” means the Medical Superintendent of the States Mental Health Services.

Citation.

10. These Regulations may be cited as the Mental Treatment (Forms) Regulations, 1956.

SCHEDULES

THE FIRST SCHEDULE

Prescribed Books

Register of Admission of Certified Patients, Voluntary Patients, Temporary Patients and Patients admitted under an Urgency Order.

Register of Patients' Personal Belongings.

Register of Patients' Correspondence.

Mechanical Restraint Order Book.

Discharge Book.

Such Books of Account as may be necessary for the accurate record of Income and Expenditure.

FORM I

THE SECOND SCHEDULE

*Prescribed Forms***The Mental Treatment (Guernsey) Laws,
1939 to 1956.**

FORM I

Petition for an Admission Order

Insert: In the matter of (1)
 (1) full name, of (2) , (3)
 (2) address, and
 (3) usual a person alleged to be of unsound mind (hereinafter
 occupation of referred to as "the Patient").
 patient.

Insert: The Petition of (4) of
 (4) full name, (5) (6)
 (5) address, and
 (6) usual occupation of
 petitioner.
 (7) A person 1. I am (7) years of age.
 may not complete
 this petition 2. I desire to obtain an order for the admission
 unless he is of the Patient as a certified patient in the (8)
 20 years of age at least. situate at (9)

Insert:
 (8) name and 3. I last saw the Patient at on
 (9) locality of place to the (10) day of , 19
 which admission is sought.

(10) A day (11) 4. (a) I am of the Patient.
 within 7 days before the presentation of the petition.

(11) Here (b) *If the petitioner is not the Husband or Wife
 state the relationship or connection with the Patient, state
 as follows:—*
 patient.

This petition is not presented by the husband or wife or a near relative, or the guardian of the Patient because (give the reasons)

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

5. I am not related to or connected with either of the persons signing the certificates which accompany this petition as (where the petitioner is a man) husband, father, father-in-law, son, son-in-law, brother, brother-in-law, partner or assistant (or where the petitioner is a woman) wife, mother, mother-in-law, daughter, daughter-in-law, sister, sister-in-law, partner or assistant.

6. Until a Guardian is appointed I undertake that the Patient shall be visited either personally or by someone specially appointed by me at least once in every three months during the detention of the Patient in a mental hospital or authorised place.

7. A statement of particulars relating to the Patient accompanies this petition.

8. The usual medical attendant of the Patient has (12) [not] signed one of the medical certificates accompanying this petition by reason of the fact that

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

(Signed)

Dated this day of , 19 .

(12) If one of the certificates is signed by usual medical attendant, delete "not" and the words following "petition". If one of the certificates is not so signed, give reason.

NOTE

(This Note is for information only)

Article 43 of the Mental Treatment Law (Guernsey)
1939, as amended—

“ Any person who knowingly makes a false declaration or any wilful misstatement of any material fact in any petition, statement of particulars, admission order, medical or other certificate, or in any statement or report of bodily or mental condition, under this Law, shall be guilty of an offence and shall, in respect of every such offence, be liable, on conviction, to a fine not exceeding fifty pounds or to imprisonment, with or without hard labour, for a term not exceeding six months, or to both such fine and such imprisonment.”

**The Mental Treatment (Guernsey) Laws,
1939 to 1956.**

FORM 2

Statement of Particulars (1)

(1) If any particulars are not known, the fact is to be stated.

Full Christian and surname of Patient

Sex and age

Married, single or widowed

Rank, profession or previous occupation
(if any)

Religious persuasion

Residence at or immediately previous to
the date hereof

Whether first attack

Age on first attack

Where and when previously under care
and treatment as a patient suffering
from mental illness

Duration of existing attack

Supposed cause

Whether subject to epilepsy

Whether suicidal

Whether dangerous to self or others, and
in what way

Whether any near relative has suffered
from mental derangement

If the Patient is under guardianship, the name and address of the guardian and, if the latter was legally appointed, the date of the Act of Court under which the appointment was made

Full Christian and surnames and full postal address of one or more relatives of the Patient

Full Christian and surname and full postal address of the person to whom notice is to be sent in the event of the death of the Patient

Name and full postal address of the usual medical attendant of the Patient

(Signed)

Dated this day of , 19 .

(2) Delete whichever is inapplicable.

When the petitioner ⁽²⁾ [the person who signed the Urgency Order] is not the person who signs the statement of particulars *add the following statement of particulars concerning the person who signs such statement.*

Full Christian name and surname

Rank, profession or occupation (if any)

Full postal address

How related to or otherwise connected with the Patient

NOTE

(This Note is for information only)

Article 43 of the Mental Treatment Law (Guernsey)
1939, as amended—

“ Any person who knowingly makes a false declaration or any wilful misstatement of any material fact in any petition, statement of particulars, admission order, medical or other certificate, or in any statement or report of bodily or mental condition, under this Law, shall be guilty of an offence and shall, in respect of every such offence, be liable, on conviction, to a fine not exceeding fifty pounds or to imprisonment, with or without hard labour, for a term not exceeding six months, or to both such fine and such imprisonment.”

(b) facts communicated to me by others, (8) that the certifier is at liberty to sub-join them in a separate paragraph.—

(N.B.—In the case of a certified patient Article 11 of the Mental Treatment Law (Guernsey) 1939 provides that an admission order shall not be made upon a medical certificate founded only upon facts communicated to the certifier by others.) (8) The full names of informants to be given with their addresses and descriptions.

4. I consider that it is expedient (9) } for the welfare of the Patient for the public safety that the Patient should be placed forthwith under care and treatment. (9) Strike out after "expedient" whichever bracketed phrase does not apply. If both apply insert "and" between them.

5. The Patient appeared to me (10) [not] to be in a fit condition of bodily health to be removed to a mental hospital or authorised place. (10) Delete "not" if not applicable.

6. I give this certificate having first read the Article of the Mental Treatment Law (Guernsey), 1939, printed below.

(Signed)

Medical Qualifications

Dated this day of , 19 .

NOTE

(This Note is for information only)

Article 43 of the Mental Treatment Law (Guernsey)
1939, as amended—

“ Any person who knowingly makes a false declaration or any wilful misstatement of any material fact in any petition, statement of particulars, admission order, medical or other certificate, or in any statement or report of bodily or mental condition, under this Law, shall be guilty of an offence and shall, in respect of every such offence, be liable, on conviction, to a fine not exceeding fifty pounds or to imprisonment, with or without hard labour, for a term not exceeding six months, or to both such fine and such imprisonment.”

FORM 4

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 4

Order for the Admission of a Certified Patient to a
Mental Hospital and Detention therein

In the matter of (1)
of (2) _____, (3)
(hereinafter referred to as "the Patient").

Insert:
(1) full name,
(2) address,
and
(3) usual
occupation
of patient.

I, the undersigned, having read the petition of
dated the _____ day of _____,
19 _____, and the statement of particulars accompanying
the same and the Medical Certificates of
and

dated the _____ day of _____,
19 _____, and _____ day of _____,
19 _____, respectively, and being satisfied that the
Patient is a person of unsound mind and in need of
care and treatment, do hereby authorise you to
receive the Patient as a certified patient into
and there to detain the Patient.

(Signed)

A Law Officer of the Crown.

Dated this _____ day of _____, 19 _____.

To
.....
.....
.....

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 4A

Order for the Admission of a Certified Patient to a
place other than Mental Hospital, and Detention
therein

In the matter of (1)

Insert:

- (1) full name,
- (2) address,
- and
- (3) usual
occupation
of patient.

of (2) , (3)
(hereinafter referred to as "the Patient").

I, the undersigned, having read the petition of
dated the day of ,
19 , and the statement of particulars accompanying
the same and the Medical Certificates of
and

dated the day of ,
19 , and day of ,
19 , respectively, and being satisfied that the Patient
is a person of unsound mind and in need of care and
treatment, do hereby authorise you to receive the
Patient as a certified patient into
and there to detain the Patient.

(4) See the
Mental
Treatment
Law (Guern-
sey) 1939,
Art. 19 (1).

(4) This Order is made under the authority of an Act
of the Royal Court passed on the
day of , 19 .

(Signed)

A Law Officer of the Crown.

Dated this day of , 19 .

To

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

FORM 5

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 5

Application for Reception as a Voluntary Patient by
a Person NOT under the age of Sixteen years

—————
To

The Medical Superintendent,
Castel Hospital,
Guernsey.

I (1) hereby (1) Insert full
make application to be received into the Castel Hos- name.
pital as a Voluntary Patient for care and treatment
and I undertake that whilst I am a patient of that
Hospital I will conform to the rules and regulations
of the Hospital.

I am _____ years of age.

(Signed)

Address

Occupation

Dated this _____ day of _____, 19 .

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 6

Application by Parent or Guardian for reception of a
Person under sixteen years of age as a Voluntary
Patient

To
The Medical Superintendent,
Castel Hospital,
Guernsey.

Insert:

(1) full name,
and
(2) address
of patient.

(3) Insert
relationship
or connec-
tion of
applicant
with the
proposed
patient.

I hereby make application for the reception
of (1) of (2)
, a person
under the age of sixteen years, whose (3)
I am, into the Castel Hospital as a Voluntary Patient
for care and treatment and I undertake that the said
whilst a patient of
that Hospital will conform to the rules and regula-
tions of the Hospital.

(Signed)
Address
Occupation

Dated this day of , 19 .

NOTE

(This Note is for information only)
Extract from Article 31 (which deals with the Admis-
sion, etc., of Voluntary Patients) of the Mental
Treatment Law (Guernsey) 1939, as amended—
“(6) For the purposes of this Article, the expres-
sion “guardian” in relation to a person under the age
of sixteen includes any person having the charge of
the person under sixteen.”

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 7

Recommendation of Medical Practitioner for recep-
tion of a Person under sixteen years of age as a
Voluntary Patient

Recommendation for reception and treatment of (1)
of (2)
as a Voluntary Patient in

Insert:
(1) full name,
and
(2) address
of patient.

I, (3) of (4)
, hereby declare that—

Insert:
(3) full name,
and
(4) address
of medical
practitioner.

1. I am a person authorised to practise the profes-
sion of medicine in the Island of Guernsey.

2. I examined the said
on the day of , 19 .

3. I am of the opinion that the said
is likely to be benefited by being received as a Volun-
tary Patient for treatment for mental illness pursuant
to Article 31 (entitled " Admission, etc., of Voluntary
Patients ") of the Mental Treatment Law (Guernsey)
1939, as amended.

4. (5) I am the usual medical attendant of the person
to whom this recommendation relates.

(5) Strike out
whichever
paragraph is
inapplicable.

I am the Medical Superintendent of the States'
Mental Health Services.

(Signed)

Medical Qualifications

Dated this day of , 19 .

NOTE

(This Note is for information only)

Extracts from Article 31 (which deals with the Admission, etc., of Voluntary Patients) of the Mental Treatment Law (Guernsey) 1939, as amended—

“(3) The medical recommendation referred to in the last paragraph shall—

- (a) be signed by a medical practitioner, who shall be either the usual medical attendant of the person to whom the application relates or the Medical Superintendent; and
- (b) state the qualifications of the said medical practitioner, the date or dates on which he examined the said person, and that the said person is likely to be benefited by being received as a voluntary patient for treatment for mental illness under this Article.

(4) A medical recommendation shall cease to have effect for the purposes of this Article on the expiration of fourteen days from the last date on which the person to whom the recommendation relates was examined by the medical practitioner for the purposes of making the recommendation.”

The Mental Treatment (Guernsey) Laws, 1939 and 1956.

FORM 8

Application for a Temporary Admission Order

In the matter of (1)
of (2) , (3)
a person alleged to be suffering from mental illness
and likely to benefit by temporary treatment (herein-
after referred to as "the Patient").

Insert:
(1) full name,
(2) address,
and
(3) usual
occupation of
patient.

I (4) of (5)
, (6)
hereby apply for a temporary admission order for the
reception of the Patient into (7)
situate at (8)

Insert:
(4) full name,
(5) address,
and
(6) usual
occupation of
applicant.

(9) I am related to the patient in the following
manner—

Insert:
(7) name, and
(8) locality
of place
to which
admission is
sought.

OR

I am the Constable of the parish of
in which the said parish the Patient now is.

(9) Delete
whichever
paragraph
is not
applicable.

OR

I am not related to the Patient nor am I the Con-
stable of the parish in which the Patient now is. The
reasons why this application is not made by a relative
of the Patient or by the Constable of the parish in
which he/she now is and my connection with him/
her and the circumstances under which I make this
application are as follows:—

Accompanying this application is a recommenda-
tion for temporary treatment of the Patient signed by
and

FORM 9

The Mental Treatment (Guernsey) Laws, 1939 and 1956.

FORM 9

Recommendation for Temporary Treatment

Insert:
(1) full name,
(2) address,
and
(3) usual
occupation
of patient.

In the matter of (1)
of (2) , (3)
and
(hereinafter referred to as "the Patient").

I, , am a person
authorised to practise the profession of medicine in
the Island of Guernsey. I am the usual attendant
of the Patient. I examined the Patient on
the day of , 19 ,
at in the parish of .
I have formed the conclusion certified below on the
following grounds, namely:—

(4) Delete
whichever
is not
applicable.

I, , am a person
authorised to practise the profession of medicine in
the Island of Guernsey. I am (4) [not] the usual
medical attendant of the Patient. I examined the
patient on the day of , 19 ,
at in the parish of .
I have formed the conclusion certified below on the
following grounds, namely:—

Now therefore We, the above-mentioned medical
practitioners, hereby certify that the Patient—

- (a) is suffering from mental illness;
- (b) is likely to benefit by temporary treatment;
- (c) is for the time being incapable of expressing (4)

himself/herself as willing or unwilling to receive such treatment.

(Signed)

Medical Qualifications

Dated this day of , 19 .

(Signed)

Medical Qualifications

Dated this day of , 19 .

NOTE

(This Note is for information only)

Extracts from Article 34 of the Mental Treatment Law (Guernsey) 1939, as amended—

“(3) The application shall be accompanied by a recommendation certifying that the person to whom the recommendation relates is suffering from mental illness and is likely to benefit by temporary treatment and is for the time being incapable of expressing himself as willing or unwilling to receive such treatment made in the prescribed form signed by two medical practitioners, of whom one shall be, if practicable, the usual medical attendant of the person to whom the application relates.

himself/herself as willing or unwilling to receive such treatment.

(Signed)

Medical Qualifications

Dated this day of , 19 .

(Signed)

Medical Qualifications

Dated this day of , 19 .

NOTE

(This Note is for information only)

Extracts from Article 34 of the Mental Treatment Law (Guernsey) 1939, as amended—

“(3) The application shall be accompanied by a recommendation certifying that the person to whom the recommendation relates is suffering from mental illness and is likely to benefit by temporary treatment and is for the time being incapable of expressing himself as willing or unwilling to receive such treatment made in the prescribed form signed by two medical practitioners, of whom one shall be, if practicable, the usual medical attendant of the person to whom the application relates.

(4) Each of the medical practitioners by whom a recommendation under this Article is made shall, before signing the recommendation, examine the person to whom the recommendation relates, either separately or in conjunction with the other medical practitioner, and shall specify in the recommendation the date on which he so examined the said person and the facts on which he bases his recommendation.

(5) A recommendation shall be of no effect for the purposes of this Article if there is a greater interval than five clear days between the dates on which the person to whom the recommendation relates was examined by the two medical practitioners respectively, and any such recommendation shall cease to have effect on the expiration of fourteen days from the date on which the person to whom the recommendation relates was examined by the two medical practitioners, or, if he was examined by those practitioners on two different dates, on the expiration of fourteen days from the later of those dates."

The Mental Treatment (Guernsey) Laws, 1939 and 1956.

FORM 10

Temporary Admission Order

In the matter of (1)
of (2) , (3)
(hereinafter referred to as "the Patient").

Insert:
(1) full name,
(2) address,
and
(3) usual
occupation
of patient.

I, the undersigned, having read the application of
dated the day
of , 19 , and the recommenda-
tion of
and
signed on the day of ,
19 , and the day of , 19 ,
respectively, accompanying the same and being satis-
fied that the Patient is suffering from mental illness,
is likely to benefit by temporary treatment but is for
the time being incapable of expressing (4) himself/
herself as willing or unwilling to receive such treat-
ment (4) [and being satisfied that the States Board of
Health has given its consent to the Patient being
received into charge as a single patient], do hereby
authorise you to receive the Patient as a temporary
patient into (5) situate at
(6) and there to detain the
Patient.

(4) Delete
where
inapplicable.

Insert:
(5) name and
(6) locality
of place
to which
admission
is sought.

(Signed)

A Law Officer of the Crown.

Dated this day of , 19

To (7)

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

(7) The
Medical
Superin-
tendent or
person in
charge of an
authorised
place, as the
case may be.

FORM II

The Mental Treatment (Guernsey) Laws, 1939 and 1956.

FORM II

Medical Statement as to mental and bodily condition
of patient (1)

(1) Any marks, bruises or injuries present on admission, or the absence of them, should be noted.

(2) This must be some day after the expiration of the second day and before the end of the seventh day after the day on which the patient was admitted.

I have this (2) _____ day of _____, 19____, seen and examined _____ as a (3) certified admitted into _____ temporary patient on the _____ day of _____, 19____, and hereby certify that the mental and bodily condition of the said Patient are as follows—

(Signed)

(4) Medical Superintendent.
Medical Practitioner in charge
of the case.

Dated this _____ day of _____, 19____.

(4) Where the form is sent by the person in charge of an authorised place the medical practitioner in charge of the case should sign. Delete whichever is not applicable.

To
The President,
States Board of Health,
Lukis House,
Guernsey.

NOTE

(This Note is for information only)

Extract from Article 16 of the Mental Treatment Law (Guernsey) 1939, as amended—

“(5) The Medical Superintendent, or in the case of an authorised place, the person in charge, shall, after the expiration of the second day and before the expiration of the seventh day after the day on which a temporary or certified patient was admitted, send to the President of the Board a medical statement as to the mental and bodily condition of such patient in the form prescribed.”

FORM 12

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 12

Special Report and Certificate of the Medical
Superintendent

Name of Patient

Date of admission order

Date of reception in the place named
in the admission order

I have this day seen and examined the above named
Patient and report that the mental and bodily con-
dition of the Patient is as follows—

I hereby certify that he is still of unsound mind
and a proper person to be detained under care and
treatment.

(Signed)

Medical Superintendent.

Dated this day of , 19 .

To

The President,
States Board of Health,
Lukis House,
Guernsey.

NOTE

(This Note is for information only)

Extract from Article 17 of the Mental Treatment Law (Guernsey) 1939, as amended—

“(3) An admission order shall remain in force for one year after the date on which the patient has been received in the place named in the order and thereafter for two years and thereafter for three years, and after the end of such periods of one, two and three years for successive periods of five years, if not more than one month nor less than seven days before the end of the expiration of each of those periods a special report of the Medical Superintendent is sent to the Board in the form prescribed as to the mental and bodily condition of the patient with a certificate under his hand certifying that the patient is still of unsound mind and a proper person to be detained under care and treatment.”

FORM 13

The Mental Treatment (Guernsey) Laws 1939 and 1956.

FORM 13

Urgency Order

Insert: I, (1) _____ of (2) _____
 (1) full name, (2) address, (3) _____,
 and (3) usual occupation. being a person of not less than twenty years, hereby
 authorise you to receive (4) _____
 Insert: of (5) _____, (6) _____,
 (4) full name, (5) address, (hereinafter referred to as "the Patient") into (7) _____
 and (6) usual occupation as a person alleged to be of
 of patient. unsound mind.
 (7) A mental hospital or authorised place, as the case may be. I last saw the Patient at _____ (8) a.m.
 (8) Delete whichever is inapplicable. on the (9) _____ day of _____ p.m.
 (9) The person making the order must have seen the patient within the forty-eight hours previously. 19, at _____ in the parish
 of _____
 (8) I am related to the Patient in the following manner:—

OR

I am the Constable of the parish of _____
 in which said parish the Patient now is.

Accompanying this order is a medical certificate signed by _____ and a statement of particulars both relating to the Patient.

(Signed)

Dated this day of , 19 .

To (10)

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

(10) The Medical Superintendent or the person in charge of the authorised place, as the case may be.

NOTE

(This Note is for information only)

Article 3 of the Mental Treatment (Amendment) (Guernsey) Law, 1956—

“ 3. (1) Notwithstanding anything in the principal Law in all cases of urgency where it is expedient either for the welfare of a person alleged to be a person of unsound mind or for the safety of others that the said person should be forthwith placed under care and treatment, he may be received and detained in a mental hospital provided by the States or as a single patient on an urgency order in the form prescribed made, if possible, by the husband or wife or a relative of the said person, or a Constable of the parish in which he then is, accompanied by one medical certificate in the form prescribed.

(2) An urgency order may be signed before or after the medical certificate.

(3). No person shall sign an urgency order unless he is at least twenty years of age and has

within the forty-eight hours before the making of the order personally seen the person alleged to be of unsound mind.

(4) An urgency order shall not remain in force for longer than seven days from its date.

(5) An urgency order shall as far as possible have sub-joined or annexed thereto a statement of particulars in the form prescribed."

**The Mental Treatment (Guernsey) Laws,
1939 and 1956.**

FORM 14

Transfer Order

By virtue of the provisions of Part V (entitled
"Transfer, etc., of Certified Patients") of the Mental
Treatment Law (Guernsey) 1939, I, the undersigned,
hereby order that _____, a
patient in _____ be transferred
from _____ to _____.

(Signed)

A Law Officer of the Crown.

Dated this _____ day of _____, 19 _____.

JAMES E. LE PAGE,

Her Majesty's Greffier.

