

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."
(Le 2 mars 1940)

LA COUR, ouïes les conclusions des Officiers du Roi,
(a) a approuvé, en vertu de l'Article 3 de la Loi dite "The Mental Treatment Law (Guernsey), 1939," les Règlements et les Cédules s'y rattachant préparés par le Conseil des Etats dit "The States Mental Health Services Board" aux fins du dit Article et soumis à la Cour par le dit Conseil ce jour, lesquels Règlements et Cédules se trouvent dans la Cédule annexée à cette présente Ordonnance; et

(b) a prescrit, en vertu de l'Article 46 de la dite Loi, que les formes à être usitées pour les besoins de la dite Loi seront celles contenues dans la Deuxième Cédule aux dits Règlements et que les livres et autres registres à être gardés dans tout hôpital dit "Mental Hospital" ou autre lieu pour les besoins de la dite Loi seront ceux spécifiés dans la Première Cédule aux dits Règlements.

CEDULE

**THE STATES' MENTAL HEALTH SERVICES
BOARD**

**LE VAUQUIEDOR HOSPITAL, PSYCHIATRIC
CLINIC AND MENTAL HEALTH
SERVICES IN GENERAL**

REGULATIONS made by the States' Mental Health Services Board (hereinafter referred to as "the Board"), in pursuance of Article 3 (entitled "General Powers and Duties of the Board") of the Mental Treatment Law (Guernsey), 1939, and submitted to the Royal Court for approval.

Arrangement of Regulations and Schedules

PART I.—MANAGEMENT AND CONDUCT OF LE VAUQUIÉDOR HOSPITAL, PSYCHIATRIC CLINIC AND STATES' MENTAL HEALTH SERVICES IN GENERAL.

Regulation

- 1 General power of management and control of
Le Vauquiédor Hospital, Psychiatric Clinic
and States' Mental Health Services in General
- 2 Medical Superintendent
- 3 Chaplain and other Ministers of Religion
- 4 Clerk of the Hospital
- 5 Matron
- 6 Chief Male Nurse
- 7 Head Night Nurses
- 8 Nurses in charge of wards (Day)
- 9 Subordinate nurses on day duty.
- 10 Subordinate nurses on night duty.
- 11 Occupational Therapists or Crafts Officers
- 12 Hospital Porter
- 13 Rules for the bathing of patients
- 14 Rules for patients' walking parties
- 15 Rules for visits to patients
- 16 General instructions
- 17 Staff holidays and other leave of absence
- 18 Sick pay and allowances of salaried staff

PART II.—TERMS AND CONDITIONS REGARDING THE RECEPTION, TREATMENT AND DISCHARGE OF PATIENTS

- 19 Reception of certified patients
- 20 Reception of voluntary patients
- 21 Reception of temporary patients
- 22 Modification of Forms
- 23 Conditions regarding treatment and discharge
- 24 Payments by or on behalf of patients

PART III.—AUTHORISED STAFF

- 25 Authorised staff of States' Mental Health Services

PART IV.—PROVISIONS REGARDING MECHANICAL RESTRAINT

- 26 Authorised mechanical means of bodily restraint
27 Use of mechanical means of bodily restraint

PART V.—GENERAL AND MISCELLANEOUS

- 28 General provisions regarding duties of staff
29 Members and contracts
30 Penalties
31 Interpretation
32 Commencement
33 Short Title

SCHEDULES

The First Schedule (Section (4) of Regulation No. 4)
Prescribed Books

The Second Schedule (Part II. of the Regulations)
Prescribed Forms

The Third Schedule (Regulation No. 25)
Authorised Staff of States'
Mental Health Services

The Fourth Schedule (Regulation No. 16, section (6),
and Part IV. of the Regula-
tions)

Specified Mechanical Means of
Bodily Restraint

APPENDIX

ARTICLE 36 OF THE MENTAL TREATMENT LAW (GUERNSEY), 1939

THE STATES' MENTAL HEALTH SERVICES BOARD

LE VAUQUIEDOR HOSPITAL, PSYCHIATRIC CLINIC AND MENTAL HEALTH SERVICES IN GENERAL

REGULATIONS made by the States' Mental Health Services Board (hereinafter referred to as "the Board"), in pursuance of Article 3 (entitled "General Powers and Duties of the Board") of the Mental Treatment Law (Guernsey), 1939, and submitted to the Royal Court for approval.

THE REGULATIONS

PART I.—MANAGEMENT AND CONDUCT OF LE VAUQUIEDOR HOSPITAL, PSYCHIATRIC CLINIC AND STATES' MENTAL HEALTH SERVICES IN GENERAL

1.—General Power of Management and Control of Le Vauquiédor Hospital, Psychiatric Clinic and States' Mental Health Services in General

(1) Subject to the authority of the Board, the general power of management and control of the States' Mental Hospital, known as Le Vauquiédor Hospital, the States' Psychiatric Clinic and the States' Mental Health Services in general, including the direction of and disciplinary authority over all staff employed in such Hospital, Clinic or Services, except staff employed under the direction of Departments of the States other than the Mental Health Services, shall be vested in the Medical Superintendent. The said Hospital and Clinic are hereinafter, in general, together referred to as "the Hospital."

(2) The Medical Superintendent may, for misconduct, suspend from duty any member of the staff under his direction and, pending the instructions of the Board, or, if the President has the authority of the Board to act in the matter, of the President or a member of the Board authorised to act for him, may arrange provisionally for the discharge of the duties of any person so suspended.

(3) The Medical Superintendent may order to desist from duty any person who is engaged in the Hospital under the direction of another States' Department, but shall immediately report the case and his action therein to the Head of such other Department.

(4) Any case dealt with under either of the last two foregoing sections of this Regulation shall be reported to the Board at their next meeting.

2.—Medical Superintendent

(1) The Medical Superintendent within the meaning of the Law shall be the Medical Superintendent of the Hospital. He shall be appointed by the States' Appointments Board.

(2) Subject to any other duties which may be specifically assigned to the Medical Superintendent by arrangement between him and the Board and to the duties implied in the exercise of the powers vested in him under No. 1 of these Regulations (entitled "General Power of Management, etc."), the duties of the Medical Superintendent shall be as follows:—

(3) He shall be responsible for the management and condition of the Hospital and shall be responsible for and have the direction of the medical, surgical, psychological and moral treatment of the patients, their medical classification and their management, exercise, amusements and occupations.

(4) (a) With the consent of the Board, he may see and treat, or arrange for the treatment of, persons who are resident in any part of the Bailiwick and who appear to be suffering from mental illness.

(b) He may, at the request of the Bailiff or of a Law Officer of the Crown, visit any person charged in the Bailiwick with a criminal offence and examine into such person's mental condition and report thereon.

(5) He shall report to the Board, at its earliest available meeting,

- (a) every occurrence of unusual importance in the Hospital;
- (b) every accident to, escape or death of and inquest upon a patient;
- (c) upon the case of any patient who is, in his opinion, fit for discharge;
- (d) any neglect or abuse in any department of the Hospital that may come to his knowledge;
- (e) all other facts, observations and suggestions which he deems to be of importance, relative to the condition or management of the Hospital or to the treatment of the patients; and
- (f) any other matters as directed from time to time by the Board.

(6) He shall inquire immediately into the cause of all accidents and injuries occurring at the Hospital and report the result of his inquiries to the Board at their next meeting.

(7) He shall give instructions to any assistant medical officers as may be necessary with reference to the duties to be performed by them and the medical and other treatment of the patients.

(8) He shall investigate all complaints made to him by patients, members of the staff and others and shall report to the Board at its next ordinary meeting complaints of sufficient importance to require the attention of the Board.

(9) He shall himself visit the wards as often as practicable and see the patients therein.

(10) He shall from time to time examine the provisions issued for the use of patients and report to the Board whenever they appear to be unsatisfactory.

(11) He shall make occasional visits at uncertain times to the wards and bedrooms during the night or before the patients rise in the morning and report to the Board any serious irregularity which may come to his notice.

On making such visits to the wards and rooms for female patients he shall be accompanied by the matron, head night female nurse, or other responsible female officer.

(12) He shall thoroughly examine, or take care that an assistant medical officer receives and thoroughly examines, every patient on admission, or as soon as possible thereafter, and shall record the result of the examination at the time of such examination, or, as the case may be, cause such record to be made by the assistant medical officer making the examination.

He shall report to the Board the case of any patient who is received at the Hospital under restraint, or in a dirty condition, or suffering from serious injuries, or in a bodily condition which in his opinion should have precluded the patient's removal to the Hospital, and any extraordinary circumstances requiring special notice. He shall call the attention of the officers or any other persons who brought the patient to the Hospital to any such facts before they leave the Hospital.

(13) He shall cause to be entered on separate cards or other special records the names of all patients who are suicidal, tuberculous or dysenteric and such cards or other records respecting such patients shall be handed to the nurses of every ward concerned and shall be preserved and referred to by the said nurses and shall be revised whenever these patients are transferred from one ward to another.

(14) He shall allow any patient, at the special request of such patient or of his or her friends, to be visited at reasonable times by a minister of religion, unless, in his opinion, such a visit would be prejudicial, having regard to the patient's condition.

(15) He may, in special cases of emergency or difficulty amongst patients or resident staff, obtain the advice or professional assistance of an experienced surgeon or other medical practitioner. Whenever such action is taken, the Medical Superintendent shall as soon as possible report to the President the grounds on which such assistance was considered necessary, and the matter shall also be reported to the Board at its next ordinary meeting.

(16) He shall present to the Board once a quarter a list of the cases in which he has exercised his powers of permitting patients to be absent from the Hospital, under the provisions of Article 28 (entitled "Absence of Certified Patient, etc.") of the Law.

(17) He shall make suitable arrangements for the instruction and training of members of the nursing staff, with a view to their securing the recognised nursing certificates.

(18) He shall deal with, as they arise, all applications for night leave made by resident members of the staff.

(19) For the assistance of the Board in the proper exercise of its statutory powers and performance of its statutory duties, the Medical Superintendent shall, as occasion arises, and in any event in the month of January each year in respect of the twelve months ended on the preceding thirty-first day of December, report in writing to the Board regarding

- (a) the adequacy of the staff in respect of its grades, organisation, number and individual efficiency;
- (b) the progress of the patients;
- (c) the methods of treatment in use in the Hospital; and
- (d) the work of the Hospital in general.

(20) The Medical Superintendent shall take care that the Regulations are faithfully observed.

(21) The Medical Superintendent, in addition to being the Medical Superintendent of the Hospital, shall be the Medical Superintendent of the States' Mental Health Services in general.

3.—Chaplain and other Ministers of Religion

(1) The Board may appoint a Chaplain for the Hospital.

(2) The Chaplain shall be a Priest of the Church of England holding the Bishop's licence to officiate in the Island of Guernsey.

(3) DUTIES OF THE CHAPLAIN

(i) To conduct divine service according to the rites of the Church of England at such time and place as is approved by the Board and to perform such other functions germane to his spiritual office as are assigned to him by the Board in relation to the care of patients;

(ii) If required by the Board, to have charge of the Patients' Library: provided that, in the selection of books and other publications for inclusion in the Library and before ordering the purchase thereof, he shall confer with the Medical Superintendent and obtain the approval of the Board to the proposed acquisitions; and the same conditions shall be observed with regard to gifts of books and other publications offered to the Hospital;

(iii) To conduct the Burial Service when required by the Board;

(iv) To keep for the information of the Board at its ordinary meetings, a journal in which he shall record the hours of his attendances on the day of each of his visits; the parts of the Hospital which he has visited on each occasion; the services which he has held; particulars of special cases which have received his attention; and any other facts of which the Board may desire him to make note.

(4) The Board may, after consulting the Medical Superintendent, approve of arrangements for the visit to the Hospital of other Ministers of Religion.

4.—Clerk to the Hospital

(1) The Board of Administration, in consultation with the Board, shall appoint a Clerk of the Hospital (hereinafter referred to as "the Clerk"), whose engagement in

that capacity shall, as circumstances require, be of a whole-time or part-time character.

(2) All the duties set out in this Regulation shall, until it is otherwise provided by Regulations made in pursuance of the Law, be duties of the Clerk.

(3) The Clerk shall, during his hours of duty at the Hospital, be under the general direction and control of the Medical Superintendent.

(4) He shall keep such Registers, Account Books and other Records relative to the Hospital as are mentioned in the First Schedule to these Regulations or are from time to time prescribed by the Board.

(5) He shall place before the Board at every ordinary meeting thereof a tabular statement giving the number of patients of every classification, including voluntary and temporary patients, then in the Hospital, and the numbers, similarly classified, received into and discharged from the Hospital since the last meeting at which a similar statement was presented.

(6) Patients on their admission to the Hospital may retain in their possession such personal belongings as, in the opinion of the Medical Superintendent, it is desirable for them to retain. The Clerk shall keep a record of any other articles which patients bring with them and shall keep such articles in safe custody until they are in due course returned to the patients or other persons entitled to them. The Clerk shall obtain a signed acknowledgment of the return of any such article.

(7) When a certified patient is allowed to be absent on trial or for the benefit of his health, or in virtue of the provisions of paragraph (3) of Article 28 (entitled "Absence of Certified Patient, etc.") of the Law, the Clerk, if on duty, shall deliver to such patient's friends written or printed instructions to the effect that (a) in the event of a relapse, the patient is to be brought back to the Hospital immediately and (b) at the end of the permitted period of absence the patient is to return to the Hospital unless a medical certificate certifying that his detention

as a certified patient is no longer necessary is delivered to the Hospital.

(8) The Clerk shall file every admission order, petition, statement of particulars, medical certificate and any other requisite document delivered at the Hospital in connexion with the admission of any patient until he has ascertained, with any necessary verification by the Medical Superintendent or other appropriate person, that the necessary documents have all been furnished and that they are all in order.

(9) He shall conduct such correspondence relating to the patients and the affairs of the Hospital as the Medical Superintendent requires of him, and his files and registers and other books and records shall be open to the inspection of the Medical Superintendent and, with the President's permission, of any member of the Board.

(10) He shall keep an inventory of all household goods, furniture, utensils and other effects appertaining to the Hospital and shall once a year, or more frequently if so directed, carry out a check of the inventory, except with regard to (a) drugs and medical and surgical appliances and instruments, which shall be under the care of the Medical Superintendent, and (b) the stock for the checking of which the Matron is responsible under No. 5 of these Regulations.

(11) During his hours of duty, he shall himself be present at the opening and closing of the Hospital stores.

(12) He shall carry out the directions given to him from time to time by the appropriate authority regarding the keeping of accounts, the custody and issue of stores, the payment and receipt of money and the keeping of records and documents, prescribed under section (4) of this Regulation or otherwise, and shall be responsible to the Board for the proper keeping and recording of all stock held by him.

(13) He shall be responsible for the clean and orderly condition of the stores and for the safety of any patients employed on them.

(14) He shall give such assistance as may be required of him from time to time by the Medical Superintendent.

(15) He shall, if required to do so, under the direction of the Medical Superintendent, as soon as practicable after the receipt of all goods except drugs and medical, surgical and laboratory appliances, examine and judge them for purity and quality and make such tests as appear necessary. In particular he shall:—

- (a) in the case of goods received under contract, compare them with the contract and satisfy himself that the goods are properly receivable in accordance with the terms of the contract and specifications;
- (b) where there is a standard sample, satisfy himself that the goods delivered are in every way equal to the standard sample;
- (c) in all other cases satisfy himself that the goods are the best of their kind; and
- (d) immediately report to the Medical Superintendent any failure in the description, quality or quantity thereof and carry out any instructions given to him by the Medical Superintendent in the matter.

If he is in doubt on any matter mentioned in the foregoing provisions of this section, the Clerk shall refer to the Medical Superintendent.

(16) Issues from stores for dietary supplies shall be made strictly in accordance with the dietary scale fixed by the Board. No other food for patients shall be issued except for sick and extra diet, as ordered by the Medical Superintendent.

(17) Condemned articles shall be replaced by the issue of new articles from the stores but no new stock shall be issued except on a requisition signed by the Matron and countersigned by the Medical Superintendent.

(18) No article of clothing or furniture shall be issued until it has been marked with the Hospital mark.

(19) During his hours of duty, the Clerk shall not, on any pretext whatever, while the stores are open, absent himself from the stores without locking the door upon leaving and placing the keys for safe keeping in the Matron's Office.

(20) During his hours of duty, he shall open the stores and be in charge thereof at such times as the exigencies of the service make necessary. On closing the stores he shall always deposit the keys for safe keeping in the Matron's Office.

(21) He shall not, without the consent of the Medical Superintendent, absent himself from the Hospital during his hours of duty.

5.—Matron

(1) The Board shall, subject to the approval of the Board of Administration, appoint as Matron of the Hospital a woman who shall be either a Registered Mental Nurse or possess the Final Certificate in Mental Nursing of the Royal Medico-Psychological Association and such other qualification as the Board from time to time determines when such appointment is to be made.

(2) The Matron shall reside at the Hospital and shall be under the general authority and direction of the Medical Superintendent.

(3) She shall be responsible to the Board and the Medical Superintendent for the supervision and nursing of all the patients in the Hospital and for the supervision of the wards, nurses, domestic servants, laundry, work-rooms and all administrative quarters.

(4) Subject to the authority of the Board and the Medical Superintendent, she shall have entire control of all nursing officers, nurses, and servants; shall instruct them in their duties and see that the same are efficiently performed; and shall report to the Medical Superintendent whatever she may know to be improper, or a major infraction of the rules, in the conduct of those subordinate to her, or that may prejudice the economical administration of the Hospital.

(5) She shall endeavour in every way to promote the interests, well-being and happiness of the patients and the welfare of all committed to her charge and use her best endeavours to induce the patients to occupy themselves in suitable employments.

(6) Either the Matron or a Nurse specially deputed by her for the purpose, with the approval of the Medical Superintendent, shall be present throughout the general bathing of the female patients and see that the Bathing Rules contained in No. 13 of these Regulations are strictly carried out and keep observation for, and without delay report to the Medical Superintendent, any marks or bruises found upon the persons of any of such patients.

(7) The Matron shall visit as many wards as possible every day and all the wards at least twice a week. She shall visit all other departments under her supervision with reasonable frequency, at irregular intervals.

(8) She shall make occasional visits to the wards at uncertain hours during the night.

(9) She shall be responsible for all stock in the female wards and in all departments and apartments in which female staff are employed by the Board. She shall check completely once a year, or as often as the Board requires, the stock in the said wards, departments and apartments and report the results of the stock-taking to the Medical Superintendent and the Clerk.

(10) She shall check the requisitions prepared by the nurses in charge of wards for supplies to be used in the wards, satisfying herself that the articles requisitioned are actually necessary and that no waste is occurring.

(11) She or a deputy shall be present at all religious services and entertainments which are held within the precincts of the Hospital and at which patients are present.

(12) She or a deputy shall see all the night staff before they go on duty.

(13) She shall see that all occurrences affecting the pay of the staff under her control are promptly notified to the Clerk.

(14) She shall not absent herself from the Hospital without the knowledge of the Medical Superintendent.

(15) She shall keep such records as the Board or the Medical Superintendent directs.

(16) She may require from any member of the nursing and other staff subordinate to her any reports, either written or oral, which she considers necessary for the proper execution of her duties.

(17) She shall be responsible for the efficient management of the staff quarters and for all matters appertaining to the supply of a properly cooked and served dietary to the staff.

(18) She shall ascertain by all means within her power the names of all members of the female staff who are sick or unable to be on duty from any cause whatsoever and shall report such names each day to the Medical Superintendent. She shall also report to him at any time all cases of serious or urgent illness or accident occurring to the staff and shall keep such records with regard to such staff as may be prescribed.

(19) She shall keep a record of all annual, weekly and daily leave, as allowed to members of the nursing staff by authority of the Board or the Medical Superintendent and shall report to the Medical Superintendent any default in returning to duty on the part of any member of the nursing staff who has been on leave.

(20) Should it appear to her necessary, she may, in company with the Chief Male Nurse, visit at irregular times all the rooms and quarters occupied by male members of the staff, in order to see that all such rooms and quarters are kept in a neat, clean and hygienic manner.

(21) When the Clerk is not on duty, the provisions of sections (7), (11), (19) and (20) of Regulation 4 (entitled "Clerk of the Hospital") shall be construed as applying to the Matron in his stead.

(22) In the Matron's absence, her duties shall be carried out by any acting or assistant Matron who has been appointed by the Board; and if no such person has been appointed or is available, then by any member of the nursing staff whom the Medical Superintendent deposes to act as Matron.

6.—Chief Male Nurse

(1) The Board shall appoint as Chief Male Nurse of the Hospital an experienced male nurse, who shall possess such qualifications as the Board from time to time determines when such appointment is to be made.

(2) The Chief Male Nurse shall carry out his duties under the control of the Matron, subject always to the authority of the Medical Superintendent.

(3) Subject to the authority of the Matron, he shall be responsible for the supervision of the male patients and their wards, the male nurses, male domestic servants, the work-rooms for males and living quarters for males.

(4) Subject to the authority of the Board and the Medical Superintendent and under the control of the Matron, he shall be responsible for the discipline of the male officers, nurses and servants who are subordinate to him; shall instruct them in their duties and see that the same are efficiently performed; and shall report to the Matron whatever he may know to be improper, or a major infraction of the rules, in the conduct of those subordinate to him or that may prejudice the economical administration of the Hospital.

(5) He shall endeavour in every way to promote the interests, well-being and happiness of the patients and the welfare of all committed to his charge and use his best endeavours to induce the male patients to occupy themselves in suitable employments.

(6) Either the Chief Male Nurse or a nurse specially deputed by him for the purpose, with the approval of the Matron, shall be present throughout the general bathing of the male patients and see that the Bathing Rules contained

in No. 13 of these Regulations are strictly carried out and keep observation for, and without delay report to the Matron, any marks or bruises found upon the persons of any of such patients.

(7) He shall be responsible for all stock in the male wards and in all departments and apartments in which male staff under his control are employed by the Board. He shall check completely once a year, or as often as the Board requires, the stock in the said wards, departments and apartments and report the results of the stock-taking to the Medical Superintendent and the Clerk.

(8) He shall check the requisitions prepared by the nurses in charge of wards for supplies to be used in the wards by male nurses, satisfying himself that the articles requisitioned are actually necessary and that no waste is occurring.

(9) He or a deputy shall be present at all religious services and entertainments which are held within the precincts of the Hospital and at which male patients are present.

(10) He or a deputy shall see all the male night staff before they go on duty.

(11) He shall see that all occurrences affecting the pay of the staff under his control are promptly notified to the Matron.

(12) He shall not absent himself from the Hospital without the permission of the Medical Superintendent.

(13) He shall visit, with or without the Matron, at regular and irregular times, all the rooms and quarters occupied by male members of the staff, and shall see that such rooms or quarters are kept in a neat, clean and hygienic manner and he shall report to the Matron any quarters found not to be so kept.

(14) He shall ascertain by all means within his power, at least once in each day, the names of all those male members of the nursing staff who are sick or unable to be on duty from any cause whatsoever and shall cause the Matron to be informed immediately.

(15) He shall report immediately to the Matron the name of any member of the staff and of any patient who is seriously ill or who is suddenly taken ill or who is the victim of an accident.

7.—Head Night Nurses

(1) The head night nurses, with the Matron, shall see all the night nurses preparatory to their going on duty.

(2) On commencing duty each night they shall receive from the Matron or Chief Male Nurse reports as to any change in the patients' sleeping arrangements and any special instructions regarding the sick.

(3) Each head night nurse before going off duty shall make a report in accordance with the form provided.

(4) They shall exercise general supervision of the wards and nurses' apartments, and shall have charge of the night staff during the night.

(5) In case of an alarm of fire, they shall proceed with all speed to the alleged site of the fire, and unfasten all doors in the vicinity and close ward and corridor windows.

(6) In the absence of a Head Night Nurse, the duties of that office shall be carried out by such member of the nursing staff as the Medical Superintendent directs.

Special Provisions regarding Head Night Male Nurse.

(7) A senior nursing officer (male) shall be on duty by night, designated the Head Night Male Nurse.

(8) He shall carry out his duties under the direction of the Chief Male Nurse, subject to the control of the Matron and under the authority of the Medical Superintendent.

(9) He shall visit such of the male wards and such parts of the Hospital as may be required of him and be responsible for the proper carrying out of the whole of the nursing on the male side of the Hospital during the period of night duty.

(10) He shall keep such records as may be required concerning the night duties, the staff on night duty, and the patients on the male side of the Hospital.

(11) He shall see that all the resident members of the male nursing staff not on duty are in their proper quarters not later than the hour prescribed, and he shall report any absentees to the Chief Male Nurse, who in turn shall report to the Matron.

(12) He shall see that such doors as the Medical Superintendent directs are check-locked or un-check-locked, as the case may be, at the proper times.

Special Provisions regarding Head Night Female Nurse.

(13) A senior nursing officer (Female) shall be on duty by night, designated the Head Night Female Nurse.

(14) She shall carry out her duties under the control and direction of the Matron, upon whose instructions she shall act, subject to the authority of the Medical Superintendent.

(15) She shall be responsible to the Matron for the proper carrying out of the whole of the nursing on the female side of the Hospital during the period of night duty and she shall keep such records as may be required concerning the night duties, the staff on night duty and the patients under her charge.

(16) She shall see that all the resident members of the female staff, other than those on duty, are in their proper quarters not later than the hour prescribed and shall report the names of any absentees to the Matron.

(17) She shall see that such doors as the Medical Superintendent directs are check-locked or un-check-locked, as the case may be, at the proper times.

8.— Nurses in Charge of Wards (Day)

(1) In the observance of section 7 of No. 16 (entitled "General Instructions") of these Regulations (which provides that the nurse in charge of a ward is to report

all accidents, injuries, sudden illness, attempts to escape or to commit suicide and struggles, to the Matron) Charge Nurses shall bear in mind that in any case of acute emergency, endangering the life of a patient. any means which the circumstances warrant should be taken to secure immediate help, apart from and in addition to the procedure laid down by the general rule.

(2) The nurse in charge of each ward shall be held directly responsible for the care of all the patients in the ward. He or she shall see that the rules and regulations are strictly observed by the staff and probationer nurses. and report any breach to a superior officer, to whom the nurse shall also communicate freely all matters or occurrences which may in any way affect the well-being of the patients or the Hospital. The nurse shall bear in mind that upon his or her supervision and example depend the tone of the ward and the happiness and welfare of its inmates. Nurses in charge of wards shall be most scrupulous as to cleanliness and ventilation of the wards and the cleanliness of the patients.

(3) Nurses in charge of wards shall be held responsible for the carrying out of all orders in regard to the prevention of the occurrence of infectious diseases, such as the washing of hands before meals and on other specified occasions, and also of those orders which are detailed on the caution cards in respect of patients who have been, or then are, suffering from dysentery, typhoid, tuberculosis, and other infectious conditions.

(4) They shall give special attention to the personal hygiene of patients in every aspect, particularly in regard to the care of patients' mouths and teeth.

(5) They shall take care that no medicine is given to patients except on the order of a medical officer; and they shall be held responsible for the correct administration of medicines so ordered. They shall keep the key of the medicine cupboard of their wards.

(6) The nurse in charge of each ward is held accountable for all bed and other linen, the patients' clothing,

and the various articles belonging to the ward, according to the inventory; and on being removed to another ward, or on leaving the hospital, the nurse shall deliver everything up to the satisfaction of a head nurse, or other officer deputed for this duty, who will certify accordingly in writing.

(7) Nurses in charge of a ward shall enter in the ward casualty book particulars of all casualties which occur while they are on duty. They shall enter the required particulars of patients on the list of patients and see daily that they are correct. Nurses in charge during the morning shall enter in a ward day report all particulars of casualties and all special reports of occurrences within their knowledge which happen while they are on duty, and shall sign the report. They shall hand over the patients to the nurses who succeed them in the charge of the wards, and the nurses thus succeeding in turn of duty shall sign a record of having taken over the said patients. The nurse in charge of the ward during the evening shall complete the entries in the ward day report, so far as is necessary for matters which happen while that nurse is on duty and sign the report, and shall hand over the patients to the night nurse, who shall in turn sign for them.

(8) The nurse in charge for the time being of each ward shall take particular care that the reports are not completed until the patients are put to bed, and that all casualties are inserted; and shall go round the dormitories and single rooms with the night nurse, and hand over the patients in his or her charge to the night nurse when the latter comes on duty, and shall, in like manner, receive them from the night nurse on returning to duty in the morning.

(9) In case of an alarm of fire, they shall proceed with all speed to the alleged site of the fire, and unfasten all doors in the vicinity, and close ward and corridor windows.

9.—Subordinate Nurses on Day Duty

(1) The staff and probationer nurses are subject to the guidance and direction of the nurse in charge of the ward. They are expected to communicate freely to their superior officers any matter or occurrence affecting the welfare of the patients or the institution.

(2) The nurses detailed for day duty shall be in their wards at the appointed time, and shall proceed to assist the patients, except those who are specially directed by the Medical Superintendent, Matron or Chief Male Nurse to be treated otherwise, in getting up, performing their toilet and dressing. Any soreness or discolouration of a patient's skin is to be reported at the first visit of an officer. As soon as the patients have risen and dressed, the dormitories are to be cleaned out. The utmost cleanliness shall be observed in every part of each ward; and everything required for use in the ward shall be kept in its appointed place.

(3) The sudden sickness of any patient, or any particular change observed, is to be reported to the Matron at all times without delay. In case of emergency or serious casualty the nurse shall, without delay, summon the Matron, who may call the Medical Superintendent.

(4) Nurses working with patients, either indoors or outdoors, are expected, in addition to supervising them, to participate in the work.

(5) When in the recreation grounds, the nurses shall not converse and walk about together, but dispose themselves so as to supervise the patients properly.

(6) After every meal the knives and forks shall be collected and handed to the nurse in charge of the ward, who shall see that the number is correct before the patients are permitted to leave the tables: if a knife or fork is missing, the fact shall be reported at once to the Matron. The knives and forks shall be immediately cleaned and locked up in the proper box. *In no circumstances whatever may any patient be permitted to use a carving knife or fork.*

(7) Even when a patient is under the special charge of a particular nurse, the other nurses (day and night) in the ward, when on duty, shall be held responsible for the care and safety of that patient as well as of the others in the ward.

(8) When, owing to a patient's threatening demeanour, violence, or other menacing circumstances, it is necessary to obtain assistance as rapidly as possible, the whistle (supplied to each nurse) shall invariably be used, and all nurses within hearing are required to pay immediate attention to the summons. It is therefore of the greatest importance that the whistle be used in cases of emergency only. In no case where it is avoidable should a nurse attempt to use force to a patient without assistance.

(9) When a patient's condition renders it desirable that he should be placed in a single room, the nurse in charge of the ward (or the night nurse, if the incident occurs at night) may place the patient in the single room for safety. In the day report the name of the patient secluded, and the reason for and duration of the seclusion are to be given. During the time of seclusion the state of the patient must be observed frequently in accordance with the instructions given by the Medical Superintendent.

(10) When a patient expresses a wish to see a minister of religion, the wish shall be made known to the Matron without delay.

(11) The nurses shall give heed to all complaints made by patients and shall report the same.

(12) No meals shall be taken by any nurse in the ward, in the bedrooms, or elsewhere than at the general mess table, without the special direction of the Medical Superintendent or the Matron.

(13) A nurse shall in no circumstances punish a patient. Any nurse guilty of striking or ill-using or wilfully neglecting a patient may be suspended from duty by the Medical Superintendent. Under provocation of any kind the nurse is required to be calm and forbearing.

(14) When the patients go to bed their clothes shall be folded up and put in the place provided for the purpose, or as otherwise directed. Only sufficient light is to be kept to enable the night staff to supervise the patients. No patients shall be allowed to light or extinguish lights. A list of the patients who are deemed by the medical officer to require special attention from the night staff shall be handed by the nurse in charge to the night nurse. Care shall be taken that nothing is concealed about the patients' persons or beds: this instruction refers specially to pipes, cigarettes, matches and food.

(15) In case of an alarm of fire nurses, if they are in a ward, shall remain there, or if they are in the mess-room shall return to their wards and await instructions, and shall not crowd to the alleged site of the fire.

10.—Subordinate Nurses on Night Duty.

(1) The foregoing regulations for day nurses shall apply as far as possible to night nurses.

(2) The night nurses shall come on duty at the appointed time, take over from the day charge nurses every patient in the wards, in which they are to take duty, signing for them; and shall receive from the day charge nurses reports and instructions regarding any particular patients.

(3) They shall examine the lists of patients who require special attention, food or medicines during the night, and shall ascertain that the articles required are left ready for use. They shall also see that no more than sufficient lights are in use. They shall report any nurses who do not extinguish their lights at the appointed time or are absent from their rooms during the night.

(4) When it is necessary to place a patient in a separate room during the night, the night nurse shall report the fact as soon as possible to the head night nurse, who shall enter it in his or her report.

(5) They are not to go off duty in the morning until the charge day nurse has seen each patient and has examined and signed the night report.

11.—Occupational Therapists or Crafts Officers.

(1) The Board may appoint one or more whole or part-time Occupational Therapists or Crafts Officers, who shall possess such qualifications as the Board from time to time determines when such appointment is to be made.

(2) The Occupational Therapists or Crafts Officers shall instruct in occupational therapy such of the patients and staff as the Medical Superintendent directs to be so instructed.

(3) They shall take the instructions of the Matron on any matter affecting the proper care of patients attending occupational therapy sessions and shall be responsible for the proper working of any Occupational Therapy Department, shop or repair room under the charge of such officer.

(4) An Occupational Therapist or Crafts Officer shall keep an inventory of all stock in the occupation departments or in use by employees under instruction or supervision and report any deficiency of stock to the Matron.

12.—Hospital Porter.

(1) The Hospital Porter shall exercise general observation to prevent the escape of patients and to keep them from communicating improperly with persons outside and shall be careful to prevent the removal by any person of any property belonging to the establishment.

(2) He shall be guided by such instructions and orders as are from time to time given for his direction.

(3) He shall keep a record of the names of officers and employees leaving the Hospital premises.

(4) He shall have charge of a book in which he shall enter the names of all persons visiting the Hospital and the dates of their visits.

(5) He shall see that all visitors to patients produce a Pass as provided for in No. 15 of these Regulations.

(6) He shall not admit to the Hospital any person other than those having business at the Hospital.

(7) He shall be responsible for the safe custody of official keys left in his charge.

(8) He shall unlock the main gate of the Hospital at such time as is directed by the Board. During the period for which the main gate is unlocked he shall remain in charge of the Porter's Lodge or other entrance office and the main gateway, except when relieved by some person approved by the Medical Superintendent or the Matron.

(9) He shall see that no patient leaves the Hospital without a pass signed by the Matron or her deputy; and he shall receive and retain such pass on the patient's return.

(10) He shall observe the conduct of any patient present in the yard under his view and shall at all times give all assistance possible to any of the staff in keeping order and discipline in the Hospital.

(11) He shall record all gifts brought by visitors for patients, except such gifts as are taken to the wards by permission of the Matron or her deputy. He shall take charge of any parcels not intended for patients which visitors to the Hospital have with them and shall return the same to the visitors when they are leaving.

(12) He shall see that no parcels are taken out by members of the Staff or patients without a permit from the Matron.

(13) He shall carry out such other instructions as may from time to time be given by the Medical Superintendent, the Matron, or the Clerk.

13.— Rules for the Bathing of Patients.

(1) Every patient shall be bathed at least once a week, unless exempted by medical order. The name of every patient who does not have his or her usual bath shall be entered in the daily ward report.

(2) In preparing a bath the cold water shall be turned on first. Before the patient enters the bath the temperature shall be ascertained by the Fahrenheit thermometer, and it shall not be less than 90 degrees, nor above 100 degrees, unless specially ordered. In case of the thermometer becoming inefficient from injury, etc., all bathing operations in that bath shall be discontinued until another thermometer is obtained.

(3) No hot or cold water shall be added to the bath while the patient is in it, and care shall be taken that the hot and cold water are thoroughly mixed before the patient is allowed to enter the bath.

(4) Only one patient shall be bathed in the same water.

(5) During the use of the bath the room shall never be left without a nurse. At all other times the bath taps shall remain locked.

(6) In no circumstances whatever shall a patient's head be put under water.

(7) In the bath the body of each patient shall be well cleansed with soap. After they come out of the bath special care shall be taken to dry those patients who are feeble and helpless and to clothe them as rapidly as possible.

(8) The bath key shall not be used by patients. It shall be kept in the appointed place, and in no circumstances shall a key be left on the tap of a slipper bath.

(9) Any marks, bruises, wounds, sores, local pain or evidence of disease of any kind complained of by the patients or noticed by the nurses during any of the bathing operations shall be reported immediately to the Matron and also be entered in the daily report sheets.

(10) The nurses shall bear in mind that the baths are to be used solely for the cleansing of the patients, except where, under medical orders, they are given as medical treatment. A cold bath shall not be given except by medical order.

(11) When a bath is given in the ward the nurse in charge shall see it administered.

(12) The depth of water in the bath shall not exceed that indicated by the level mark, or, where there is no such mark, seven inches.

(13) The foregoing Rules (Nos. (1) to (12)) apply to slipper baths. When spray baths are used close attention shall be paid to the following special regulations:—

(a) The water used in spray baths is supplied from an automatic mixer, and the nurse in charge of the bathing is responsible for seeing that the proper temperature is registered before the bathing is commenced.

(b) Should the nurse in charge be unable to regulate the temperature properly the bathing shall be discontinued and the engineer informed.

(c) In no circumstances shall the apparatus for mixing hot and cold water be touched or interfered with in any way by any employee except the nurse in charge or a member of the engineer's staff.

(d) Care shall be taken that the water is turned off completely after bathing is finished, so as to prevent waste.

(14) A printed copy of these Bathing Rules shall be conspicuously displayed in every bathroom and the Rules shall be scrupulously observed by all members of the staff who are concerned.

14.— Rules for Patients' Walking Parties.

(1) The patients who are permitted to take walking exercise beyond the boundary of the Hospital estate shall be selected carefully under the direction of the Medical Superintendent or the Matron.

(2) The number of patients in any walking party shall not exceed 20, and there shall be a sufficiency of nurses with such party, the minimum being three. In the case of shopping parties the number of patients shall not exceed 10, with a minimum of two nurses when the number exceeds two.

(3) The routes taken by walking parties shall be those authorised by the Medical Superintendent or the Matron, and as far as possible quiet country roads shall be chosen.

(4) During the walk the nurses shall be so stationed that all the patients are under supervision, and no patient shall, in any circumstances, be allowed out of sight. Nurses shall exercise the greatest vigilance in the supervision of patients when out walking.

(5) The nurses in charge of walking parties shall take every care to ensure that the public do not suffer molestation or annoyance from the patients forming such parties.

(6) In no circumstances whatever shall a nurse with a walking party enter a licensed house, or allow a patient to do so. If it becomes known to a nurse's superior officer that the nurse has transgressed this Rule, steps shall at once be taken for the nurse to be suspended from duty.

(7) The nurse actually in charge of the walking party shall make a written report of the route taken by the walking party, calling attention to any special incident which may have occurred, such as noisy or disorderly conduct on the part of a patient, or the occurrence of a fit or other illness.

15.—Rules for Visits to Patients

(1) (a) In general, visits to patients shall be allowed only on the days and at the times assigned by the Board for that purpose.

(b) Subject to the provision that the Medical Superintendent may, in suitable cases, issue a Pass (written authorisation) of indefinite duration, every

visitor, before entering the Hospital, shall be required to produce for inspection a Pass signed by the Medical Superintendent or the Matron authorising that visitor to visit a named patient on a specified day.

(c) Patients who are dangerously ill may, by direction of the Medical Superintendent or the Matron, be visited on days other than those referred to in the foregoing sub-sections.

(2) No visitors to patients shall at any time enter a ward without the express permission of the Medical Superintendent or Matron.

(3) Unless in exceptional circumstances and with the consent of the Medical Superintendent, not more than two persons at one time, and no child under sixteen years of age, shall be permitted to visit a patient.

(4) A visitor shall not bring into the Hospital or on any account give to any patient any wine, spirit or intoxicating liquor of any kind, any medicine or drug, or any knife, scissors, cutting instrument, cord, matches or any other article which could be used by a patient to harm himself or others.

(5) No gratuity or perquisite of any kind shall be given by a visitor to any officer, nurse or other person employed at the Hospital. Any such officer, nurse or other employee accepting any such gift may be summarily dismissed therefor by the Board.

(6) The consent of the Board and the Medical Superintendent shall be required to the signing by a patient of any legal or other document which a visitor wishes the patient to sign.

(7) Any visitor desiring to make a complaint or to have an interview respecting a patient's condition shall signify his wish to the charge nurse, who shall thereupon inform the Matron.

(8) A nurse shall be present during every visit, unless the contrary has been arranged with the express authority of the Medical Superintendent, but shall not be present

in such a way as to prevent private conversation between visitor and patient.

(9) No patient shall be permitted to accompany any visitor into the Hospital grounds except by authority of the Medical Superintendent or Matron.

(10) A visitor who does not conform to this Regulation or whose visits are deemed to be harmful to the patient or otherwise inexpedient, may, by order of the Board or the Medical Superintendent, be denied visits to the Hospital for such period as the authority making the said order thinks advisable.

16.—General Instructions

(1) The male and female patients shall be kept in separate wards, and no male nurse, servant or patient, except workmen in discharge of their necessary duties, and under proper supervision, shall be allowed to enter female wards nor any female to enter male wards except where the Medical Superintendent deems it advisable to appoint nurses or female servants to attend for that purpose. No male person excepting the Medical Superintendent, engineer (which term includes a mental hospital engineer and his chief assistants and also a foreman engineer and builder's foreman) and the chaplain, shall at any time have keys admitting them to any of the female wards.

(2) The Board shall provide as many nurses as shall, in its opinion, after consultation with the Medical Superintendent, be sufficient for the effective care of the patients by day and night.

(3) During the day the patients of both sexes shall be employed as much as practicable, especially out of doors: the men in gardening, husbandry and handicrafts, the women in occupations suited to their ability; and as a principle in treatment, endeavours shall continually be used to occupy and employ the minds and bodies of the patients, to induce them to take extended exercise in the open air, and to promote cheerfulness and happiness

amongst them. Such patients as the Medical Superintendent directs shall, in such numbers and at such times as he thinks fit, be allowed under proper supervision to take walks beyond the grounds of the Hospital.

(4) The charge nurses, or deputies appointed for the purpose by the Matron or Chief Male Nurse, shall invariably be present continuously at the general bathing of the patients, see that the bath directions are strictly carried out and look for and at once report any marks or bruises found upon any of the patients and record in their daily report particulars of the report so made.

(5) No patients shall be restrained or secluded at any time, or shall, except for the purpose of cleanliness, be subjected to any bath, unless by authority of a medical officer.

(6) Mechanical restraint shall not be used with regard to any patient except in accordance with the provisions of Article 36 (entitled 'Mechanical Restraint') of the Mental Treatment Law (Guernsey), 1939, and of this Regulation and Part IV. of these Regulations and under the directions, in writing, of the Medical Superintendent. Every direction for mechanical restraint shall be entered in an order book with a counterfoil, kept for that purpose, and on the order and counterfoil the precise time at which, and period for which, restraint is directed shall be entered. No direction for mechanical restraint shall be issued for a longer period than four hours at any one time, except when it is used for surgical reasons only. On the forms of order there shall be placed general instructions to the nurses as to food and exercise, and the course to be followed in case of symptoms of collapse or other emergencies. Whenever mechanical restraint is used the patient shall be placed under continuous observation, both by night and by day, by an experienced nurse, and due opportunity shall be afforded to the patient of attending to the calls of nature, and changing a position which, from continuance, may cause suffering. The appliances for mechanical restraint shall be kept in charge of the Matron;

and the first of any series of applications of such restraint shall be made under the personal superintendence of the Matron. Subsequent imposition of restraint after the patient's release from it for either of the reasons mentioned in this Regulation shall be effected in the presence of the Matron or a head nurse, who shall immediately report to the Medical Superintendent, or his deputy, any struggle with the patient which has taken place at such time.

The Board desires that the application of mechanical restraint shall always be restricted within the narrowest possible usage; that it should not be long continued without intermission; and that it should be dispensed with immediately it has effected the purpose for which it was employed.

The following are not to be considered as mechanical means of bodily restraint within the meaning of these Regulations, but they shall only be used under medical order, and a record of their use shall be made in the clinical records:—

- (a) The continuous bath. A cover shall not be used unless the aperture therein for the patient's head is large enough for his body to pass through.
- (b) The dry and wet pack. No straps or ligatures of any kind shall be used, and the patient shall be released for necessary purposes at intervals not exceeding two hours.
- (c) Splints, bandages, and other like appliances when used in accordance with recognised surgical practice for operations or the treatment of fractures or other local injuries, and not so as to interfere with the free movement of the body or limbs more than is necessarily incident to their use for such purpose.
- (d) Gloves, if so fastened as to be removable by the wearer.

- (e) Sheets or towels used only for the purpose of artificial feeding, and merely held, not tied or fastened.
- (f) Trays or rails fastened to the front of chairs to prevent patients from falling out and thereby injuring themselves.

A copy of Article 36 of the Mental Treatment Law, referred to above, is appended to these Regulations.

(7) All accidents and injuries, however slight, sudden illness, attempts to escape or commit suicide and struggles between patients or between patients and nurses, shall immediately be reported by the nurse in charge to the Matron, who shall inform the Medical Superintendent.

(8) Books, newspapers and publications provided by the Board shall regularly be circulated through the different wards. Various means of amusement shall be placed at the disposal of the patients, and they shall be encouraged to have frequent recourse thereto.

(9) The airing grounds attached to the wards shall be generally accessible to the patients every day when the weather is favourable.

(10) No dormitory for male patients (excepting rooms for single patients) shall contain less than three beds and all the patients (male and female) shall sleep in single beds.

(11) No female patient shall be employed in any private official residence or male officer's quarters at any hospital.

(12) Nurses shall be responsible for the ventilation and proper warmth of their respective wards.

(13) No reward, either in money or kind, shall be given by any nurse to any patient for work done or otherwise.

(14) Male officers (except the Medical Superintendent) who are allowed to have keys of the female side in their possession, are required, whenever they go out of the Hospital, to deliver such keys to the Hospital Porter, or, in his absence, to the Matron, for safe custody during their absence, or to deposit them in some suitable place to be approved by the Medical Superintendent.

(15) No patient shall be allowed to attend religious services or entertainments or shall be employed or be taken out for exercise or recreation either within or without the boundaries of the Hospital estate without the approval of the Medical Superintendent or the Matron.

(16) Patients who assist the nurses in their various ward duties shall not be indulged in extra food at the expense of other patients, nor shall they be permitted to exercise any authority over other patients. No patient shall be allowed without the sanction of the Medical Superintendent or the Matron to perform a duty for another patient which should generally be undertaken by a nurse.

(17) Nurses and other employees who have the charge of patients engaged in work shall see to the safe custody of all knives, forks, tools and other instruments used and examine and count over their stock frequently. They shall on no account take any such article away from the Hospital premises and shall ensure that on the cessation of work all such articles are given up, checked, and stored in safe custody. They shall on no account entrust any patient with the possession of any dangerous instruments out of their sight.

(18) Resident nurses and other resident employees shall be most careful to see that sharp instruments, such as razors, scissors, hatpins, etc., in their bedrooms, and any medicines, liniments, etc., supplied to or obtained by them for their private use, are kept under lock and key.

(19) Nurses and other employees shall see that all ladders, steps, or other things used by them, which might enable patients to escape and all articles which the patients could use for dangerous or improper purposes, are carefully guarded, and, directly the work in connection with which such objects are employed is completed or if such work is suspended shall see that they are removed out of the patients' reach.

(20) Nurses and other employees, when out of the Hospital, shall not mention the names or talk of the conduct of any patient nor shall they convey any letters or

messages from the patients to anyone out of the Hospital without permission from the Medical Superintendent or the Matron. All letters from patients shall be delivered to the Matron.

(21) No nurse or other employee shall, on pain of suspension and dismissal, take charge in a personal or private capacity of money or property of any patient, or sell to, buy from, or borrow of a patient, or receive money or any gift whatsoever from the friends of patients, or from visitors to the Hospital. No person, unless specially authorised by the Medical Superintendent, shall make purchases for a patient, or in any circumstances shall receive from a patient any, or part of any, goods purchased. Any money or valuables found on a patient, except those which he is permitted by the Medical Superintendent or the Matron to retain, shall be handed to the Clerk for safe custody.

(22) No nurse or other employee whilst in charge of a patient (whether as part of the prescribed duty, or on an occasion on which the nurse or other employee has volunteered to take charge of the patient for an outing) shall enter a public-house, or shall permit a patient to do so or to obtain any intoxicating liquor.

(23) No person shall solicit subscriptions for any purpose from any person in the establishment without obtaining the consent of the Medical Superintendent.

(24) The nurses and other employees shall be responsible for the keys and other property in their charge. In no circumstances shall a patient be entrusted with an official key; and the nurses and others shall carry their keys and whistles on the chain and belt provided for that purpose, but these shall be worn and used in as unobtrusive a way as possible. Whenever the nurses and others concerned leave the Hospital they shall deliver up their keys at the appointed place.

(25) Visitors to subordinate officers and servants shall not be allowed without the special permission of the Matron.

(26) The association of male and female staff in the Hospital and grounds shall be permitted only in circumstances approved by the Medical Superintendent.

(27) No resident nurse or employee shall pass a night out of the Hospital without leave first obtained from the Matron.

(28) Nurses and other employees who are resident shall not have fires in their bedrooms without special permission. Smoking in bedrooms is strictly prohibited. The use by employees in their rooms of spirit or oil lamps, or of any unauthorised gas or electric appliances, is prohibited.

(29) In the event of infectious disease occurring in his family, an employee living out of the Hospital may be required to live in the Hospital during such time as the Medical Superintendent considers necessary, unless other arrangements are made to the satisfaction of the Medical Superintendent. If the employee does so live in the Hospital he will not be required to pay for board, lodging or washing.

(30) Should any employee be required to absent himself from duty in consequence of infectious disease at his home the Board is empowered, in its discretion, to pay him an amount equal to wages which he would have received had he been on duty, and if he should be required to reside away from home for a like reason the Board may pay him such sum as it thinks fit to defray extra expense which he has actually incurred.

(31) No member of the staff shall, otherwise than under his own contract of employment under the Board,

- (a) have any interest, direct or indirect, in any contract or pecuniary transaction connected with the Hospital; or
- (b) directly or indirectly take any fee, reward or perquisite of any kind from any tradesman, patient, or other person.

Any infraction of this Regulation shall render the person committing it liable to immediate dismissal.

(32) In no circumstances shall any officer or employee of the Hospital receive a favour from any Hospital contractor or tradesman in respect of private supplies or otherwise.

(33) (a) No patient shall, on any account whatever, be struck or threatened; and no patient shall be placed in seclusion except by the order of the Medical Superintendent or in the case of extreme violence, as provided for in sub-section (b) of this section.

(b) If a patient becomes extremely violent the fact shall be immediately reported to the Medical Superintendent or Matron. The nurse to whom the patient's condition first becomes known shall immediately procure the assistance of at least one other nurse and send for the Matron or the Chief Male Nurse, as the case may be. The knees shall not be placed on the patient's body nor shall his limbs be twisted.

(34) (a) All nurses shall treat their patients kindly and shall not speak harshly to them. They shall be responsible for the safety, cleanliness and general condition of their patients and for the good order of their wards. They shall attend to the dressing and undressing of their patients, keeping careful observation for injuries, bruises and other marks and reporting any such immediately to the Matron or the Chief Male Nurse who, as soon as possible, shall report the matter to the Medical Superintendent.

(b) Acts of harshness or violence to patients, dishonesty, intemperance, improper behaviour, or disobedience to orders shall render any nurse or servant guilty thereof liable to instant dismissal, without any payment in lieu of notice.

(35) The person who brings a patient to the Hospital for admission may be requested to remain until the personal examination of the patient provided for in section (12) of No. 2 (entitled "Medical Superintendent") of these Regulations has been made, in order that he may be (a) informed of any signs of injury or other unusual

condition revealed by the examination and (b) furnished with a written note thereof, signed by the medical officer who examined the patient.

(36) No officer, nurse or other employee of the Board shall permit, or knowingly afford facility for, the execution or signature by any patient of any document affecting the patient's property or income. This rule does not apply to a will or codicil, permission for the execution of which may be allowed by the Medical Superintendent.

(37) Except by order of the Royal Court, or a Division thereof, made after hearing evidence by the Medical Superintendent or his deputy, no patient shall be served with legal process or any legal document.

(38) Any officer or nurse who receives any information respecting the property or estate of any patient, or regarding any legal proceedings touching the affairs of a patient, shall without delay communicate such information to the Medical Superintendent, who shall as soon as possible cause inquiries to be made by the Clerk and any other official or person concerned in order to determine or verify the classification of the patient as a private or an assisted patient.

(39) On the death of a patient in the Hospital, the Matron shall immediately give notice thereof, by telephone or messenger, to the nearest known relation of the deceased, and this notice shall be confirmed in writing by the Clerk. The body shall be delivered to such relation upon his or her request. If not claimed and removed on the fourth day after death, the body shall be buried in accordance with the directions of the Board. If the Medical Superintendent is of opinion that earlier burial is essential he may order it in virtue of this Regulation.

(40) A post-mortem examination, if not objected to by the relation of the deceased having the right to claim the body, may be made by the Medical Superintendent or any assistant medical officer upon any patient who dies in the Hospital. Notice of the intention to make

such examination shall be sent with the notice of death provided for in the last foregoing section of this Regulation. In case of doubt, a Law Officer of the Crown may conclusively determine what person has the right to claim the body within the purview of this Regulation.

(41) No stranger shall be admitted into any part of the Hospital occupied by any patient, except by authority of law, or by the direction, in writing, of the Board, or by permission of the Medical Superintendent, nor unless accompanied by the Medical Superintendent or some person deputed by him for the purpose, nor at any unreasonable time. No officer, nurse, servant or other person employed under the direction of the States or the Board shall introduce any stranger to any part of the Hospital without permission from the Medical Superintendent. A stranger within the purview of this Regulation is any person who is neither a Member of the Board nor a person employed under the direction of the Board.

(42) All members of the nursing staff shall make themselves familiar with the rules and regulations pertaining to the care, treatment and management of patients. A copy of all such rules and regulations for the time being in force shall be available for inspection by any member of such staff on application to the Matron or the Clerk.

17.—Staff Holidays and other Leave of Absence

(1) Except as otherwise provided by the express or implied terms of an individual's contract of employment under the States, or by the ensuing provisions of this Regulation, the annual holiday leave allowable to members of the salaried and nursing staff shall be in accordance with the following scale:—

After one year's service	
under the States Fourteen days.
Under one year's service	
under the States	One day for each month's service.

(2) Any member of the nursing staff who has obtained the final certificate of either the General Nursing Council or the Royal Medico-Psychological Association shall be entitled to seven days' holiday leave in addition to the leave allowable under the provisions of the preceding section of this Regulation.

(3) The annual holiday leave allowable to any member of the salaried staff not otherwise entitled to more than fourteen days' leave shall, after fifteen years' service under the States, be twenty-one days.

(4) Annual holiday leave not provided for in the foregoing sections of this Regulation shall be such as the Board allows.

(5) Additional leave, late leave, and special or casual leave of any kind, may be allowed by the Medical Superintendent.

(6) The arrangements for the members of the staff to have leave of absence on public holidays, or, as the exigencies of the service may require, on days to be allowed in lieu of public holidays, shall be made by the Medical Superintendent

(7) The Medical Superintendent, in consultation with the Matron, shall prepare, and submit for the approval of the Board, as soon as may be after the commencement of these Regulations, a scheme providing for the members of the resident nursing staff leave of absence for half-days and whole days at monthly, weekly or other suitable intervals.

(8) All leave of absence allowable under this Regulation shall be subject to the exigencies of the service.

18.—Sick Pay and Allowances of Salaried Staff

(1) Subject to the ensuing provisions of this section, any member of the salaried staff who is wholly incapacitated by illness from performing his or her duties shall be allowed, in accordance with the following scale, (i) free medical service by a medical officer of the

Hospital if he or she is received as an in-patient in the Staff Sick Bay of the Hospital, and (ii) the payment of full salary, that is to say:

Scale of Allowances

Length of service of member of staff	Period of free medical service and full salary while incapacitated
Three years or more	Four weeks.
Less than three years	Two weeks.

(2) Payment of salary during such incapacity shall be allowed only on the production of a certificate from a registered medical practitioner that at the material time the member of the staff to whom the certificate relates was, for reasons given in the certificate, incapacitated for duty. Where the member of the staff in question is not a staff in-patient, any such certificate as aforesaid shall be given by the medical practitioner in attendance upon him or her.

(3) In the case of any member of the salaried staff in which the Board deems it proper to do so, the Board may allow free medical service as aforesaid by a medical officer of the Hospital and the payment of full salary for a period after the expiration of the relevant period specified in the above scale, or may allow for such further period such free medical service and the payment of a proportion of the full salary or either such free medical service or the payment of the full salary or a proportion thereof.

(4) Where any illness is the result of an accident, any payment of salary allowed under this Regulation shall be reduced by the value of any States' insurance benefits receivable by the member of the staff in question.

**PART II.—TERMS AND CONDITIONS REGARDING
THE RECEPTION, TREATMENT AND
DISCHARGE OF PATIENTS.**

19.— Reception of Certified Patients

The documents which are required by the provisions of Article 16 (entitled "Authority for Admission, etc.")

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 accordance with the undermentioned Forms contained in the Second Schedule to these Regulations, namely:—

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

20.— Reception of Voluntary Patients

(1) The written application required in pursuance of Article 31 (entitled “Admission, etc., of Voluntary Patients”) of the Law to be made by a person not under the age of sixteen desirous of submitting himself to treatment as a voluntary patient in a mental hospital shall be made in accordance with Form 5 or Form 6 in the Second Schedule to these Regulations, as the case requires.

- (2) In the case of a person under the age of sixteen —
 - (a) application for such person’s treatment as a voluntary patient shall be made by that person’s parent or guardian in accordance with Form 7 in the said Schedule; and
 - (b) the medical recommendation accompanying the application shall be in accordance with Form 8 in that Schedule.

21.— Reception of Temporary Patients

The written application required in pursuance of Article 34 (entitled “Admission of Temporary Patients, etc.”) of the Law to be made for the admission and treatment of a temporary patient shall be in accordance with Form 9 or Form 10 in the Second Schedule to these Regulations, as the case requires, and the medical recommendation accompanying the application shall be in accordance with Form 11 in that Schedule.

22.— Modification of Forms

Such minor modification of detail as the circumstances of a case may require may be made in any Form prescribed in the foregoing Regulations,

23.—Conditions regarding Treatment and Discharge

Subject to the requirements of the Regulations of the Board for the time being in force respecting payments to be made by or on behalf of patients, the Board may from time to time and at any time in consultation with the Medical Superintendent formulate such conditions as they deem it advisable to specify respecting the treatment to be given to patients and the conditions upon which patients may be discharged.

24.— Payments by or on behalf of Patients

(1) Subject to the provisions of section (5) of this Regulation, any payment which the Board requires to be made by or on behalf of a patient in the Hospital or otherwise under the care of the Board shall be based upon scales of charges fixed by the Board, having regard to

- (a) the average weekly cost for a patient of the same kind, undergoing similar treatment; and
- (b) the cost of any special treatment or special measures adopted in the case of the patient by or on behalf of whom payment is being required.

(2) The scales of charges referred to in section (1) of this Regulation may be revised from time to time and at any time deemed advisable by the Board and shall be reviewed by the said Board not less often than once in every twelve months.

(3) The Clerk shall, as regards every patient under the care of the Board, not being a patient who is one of the Stranger Poor within the meaning of the Public Assistance Law, 1937, obtain such information as he can

reasonably procure as to the ability of the patient, or any person answerable for the patient, to pay, or contribute towards, the cost of maintaining and treating the patient and shall, in the light of such information, record whether or not, in his opinion, payment should be required in the case and, if so, make and record an assessment of the amount of such payment, not exceeding the maximum fixed in the scale of charges appropriate to such case.

(4) (a) The Board shall appoint a Committee, to be designated the Assessment Committee, to whom the Clerk shall submit the information and records provided for in the last foregoing section. That Committee shall, after reviewing such information and records and any other relevant facts reasonably obtainable, determine in every case whether a charge is to be made and, if so, the amount thereof and shall authorise the same accordingly.

(b) Where, in the case of a patient who has not a Settlement in the Island of Guernsey, the whole cost incurred by the Board in maintaining and treating the patient is not paid to the Board by the patient or the person or persons answerable for him, the Board shall communicate to the States' Public Assistance Authority the facts of the case, including the cost so incurred by the Board, in order that (a) the Stranger Poor Assistance Committee of that Authority may deal with the case in pursuance of Article XII of the Public Assistance Law, 1937, and (b) the Public Assistance Authority may reimburse the Board the amount of the said cost. The Board shall also remit to the said Authority any contribution which may have been made to the Board, towards such cost, by the patient or the person or persons answerable for him, since the case became referable to the Authority under this Regulation.

(5) In cases of any unusual kind for which there has not been occasion to fix a scale of charges under the foregoing provisions of this Regulation, the Clerk shall obtain such information as is reasonably procurable

relative to the cost incurred or to be incurred by the Board in maintaining and treating the patients concerned, and the appropriate charges may be determined by the Board accordingly.

(6) Any person aggrieved by any charge determined in accordance with this Regulation may appeal in respect thereof to the Board.

(7) The Board may claim from any patient under its care or from any person answerable for such patient, any appropriate charge determined in accordance with this Regulation; and the President of the Board may take action in the Royal Court for the enforcement of the claim and the recovery of costs.

PART III.—AUTHORISED STAFF

25.—Authorised Staff of States' Mental Health Services

Until further order by Ordinance of the Royal Court modifying this Regulation, the authorised staff of the States' Mental Health Services shall be that set out in the Third Schedule to these Regulations.

PART IV.—PROVISIONS REGARDING MECHANICAL RESTRAINT

26.—Authorised Mechanical Means of Bodily Restraint

The mechanical means of bodily restraint which may be used in the Hospital shall be those specified in the Fourth Schedule to these Regulations and such other means as may from time to time be determined by the Board, in consultation with the Medical Superintendent, and no other mechanical means of bodily restraint shall be employed.

27.— Use of Mechanical Means of Bodily Restraint

(1) Any means of mechanical restraint shall be employed only in accordance with the provisions of section (6) of No. 16 (entitled "General Instructions") of these Regulations and with such other directions as the Board, in consultation with the Medical Superintendent, deems it proper to give. A printed copy of any such directions shall be supplied to every member of the nursing staff; and every person receiving the same shall sign a record of having received and read it, such record being retained by the Medical Superintendent.

(2) At each visit of Jurats to a mental hospital or other place in pursuance of Article 40 (entitled "Visitation of Patients") of the Mental Treatment Law (Guernsey), 1939, all instruments and mechanical appliances which may have been employed in the application of bodily restraint to a patient since the last preceding visit, together with the record of any sanction given by the Board in virtue of section (4) of the Fourth Schedule to these Regulations, shall be produced to the said Jurats by the Medical Superintendent or the person having charge of a single patient, as the case may be.

PART V.—GENERAL AND MISCELLANEOUS

28.—General Provisions regarding Duties of Staff

All duties specified in these Regulations, whether or not they are declared in these Regulations to be performed under the direction of any person, are subject to the authority of the Board, which may, for the purpose of exercising its powers or fulfilling its duties under the Law, assign to any individual officer or employee of the Board duties which are (a) reasonably related to his duties as specified in these Regulations and (b) within his proved or presumable competence.

29.— Members and Contracts

The Board shall not enter into any contract for goods to be supplied to the Board, or to any hospital or other institution in its charge, with —

- (a) any member of the Board, or
- (b) a partner or any agent in that behalf of any member of the Board, or
- (c) any company or other association of which a member of the Board is a director or manager:

Provided that this Regulation shall not preclude the Board from buying from a member or his partner or agent or from a company or association such as is referred to in section (c) of this Regulation, or the said member, partner, agent, company or association from selling to the Board, any goods which, in the opinion of the President, are urgently required and cannot, without undue delay, be otherwise obtained.

30.— Penalties

(1) Subject to the provisions of section (3) of this Regulation, any person who is employed under the direction of the Board and who contravenes any of these Regulations shall, if the contravention is not a criminal offence, be liable to disciplinary action by the Board in the exercise of its general powers under the Law and any other powers inherent in the Board.

(2) Any other individual person, not being an in-patient, contravening any of these Regulations, other than the Regulations in Part II. prescribing the use of specified forms, shall be guilty of an offence, and without prejudice to any other proceedings to which he may by law be liable, shall, on conviction, be liable to a fine not exceeding two pounds for a first offence and not exceeding five pounds for any subsequent offence.

(3) If any person employed under the direction of the Board does any act, or is guilty of any omission,

injurious, or likely to be injurious, to a patient under the care of the Board, and if such act or omission constitutes a contravention of any of these Regulations, such person shall be guilty of an offence and, without prejudice to any other proceedings to which he may by law be liable, may be prosecuted summarily therefor and, on conviction, shall be liable for every such offence to a fine not exceeding ten pounds or to imprisonment, with or without hard labour, for a term not exceeding two months, or to both such fine and such imprisonment.

31.— Interpretation

(1) The provisions of Article 1 (entitled “Interpretation”) of the Law shall apply in like manner to the words and expressions therein mentioned, when they occur in these Regulations.

(2) In these Regulations, unless the context otherwise requires or it is otherwise specially provided, the following words and expressions have the meanings hereby respectively assigned to them, namely:—

“Hospital” includes any mental hospital within the meaning of the foregoing section of this Regulation;

The “Law” means the Mental Treatment Law (Guernsey), 1939, and any Law amending, supplementing or superseding that Law;

“The President” includes, when necessary for the due operation of the Regulations, the Vice-President and any Acting President or Vice-President or any member of the Board authorised by the Board to act as President or Vice-President;

The “Seclusion” of a patient means that he is, at any time between 7 a.m. and 7 p.m., isolated in a room the door of which is so fastened or held that the patient is unable to leave the room at will; but the patient is deemed to be not secluded if he is isolated in a room in which the lower half of the door is thus fastened or held, but the upper part is left open.

32.—Commencement

These Regulations shall come into operation on the day on which they are approved by the Royal Court.

33.—Short Title

These Regulations may be cited as the Mental Treatment Regulations, 1940.

SCHEDULES

THE FIRST SCHEDULE

(Section (4) of Regulation No. 4)

PRESCRIBED BOOKS

Register of Admissions of Certified Patients

Register of Voluntary Patients

Register of Temporary Patients

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.

THE SECOND SCHEDULE

(Part II. of the Regulations)

PRESCRIBED FORMS

States' Mental Health Services Board
THE MENTAL TREATMENT LAW
(GUERNSEY), 1939

FORM 1

Petition for an Admission Order

In the matter of (1)
of (2) , (3)
a person alleged to be of unsound mind.

The Petition of (4)
in the Island of Guernsey, (6)

1. I am (7) years of age.

2. I desire to obtain an order for the admission of
the said (8)

as a certified private
assisted (9) patient in the
(10) situate at
(11) in the said Island.

3. I last saw the said
at on the
(12) day of 19 .

4. (a) I am the (13) of the said

(b) *If the petitioner is not the Husband or Wife
or a near relative, or the guardian of the patient, state
as follows:—*

This petition is not presented by the husband (9),
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

Insert:
(1) full name,
(2) address,
and
(3) usual
of (5) occupation
of patient.

Insert:
(4) full name,
(5) address,
and
(6) usual
occupation
of petitioner.
(7) A person
may not complete
this
petition unless
he is 20
years of age
at least.

(8) Insert
name of
patient.
(9) Strike out
word which is
inapplicable.

Insert:
(10) name
and
(11) locality
of place to
which admission
is
sought.

(12) Some
day within
7 days
before the
presentation
of the
petition.

(13) Here
state the
relationship
or connexion
with the
patient.

a woman) wife, mother, mother-in-law, daughter, daughter-in-law, sister, sister-in-law, partner or assistant.

6. I undertake to visit the said personally or by someone specially appointed by me at least once in every six months during the detention of the said _____ in a mental hospital or authorised place

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

8. The usual medical attendant of the said _____ has (not) ⁽¹⁴⁾ signed one of the medical certificates accompanying this petition/by reason of the fact that

(14) 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.

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

(Signed).....

Dated this _____ day of _____ 19 _____

NOTE

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

False Declarations and Mis-statements

Any person who knowingly makes a false declaration or any wilful mis-statement 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 2

Statement of Particulars (1)

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 surnames 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

When the petitioner 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.

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

*Where the patient is an idiot omit the particulars marked *..

NOTE

*Article 43 of the Mental Treatment Law (Guernsey),
1939*

False Declarations and other Misstatements

Any person who knowingly makes a false declaration or any wilful mis-statement 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 3

Certificate of Medical Practitioner

In the matter of (1) ' of (2) , (3) a person alleged to be of unsound mind.

I, the undersigned (4) of (5), do certify as follows:

1. I am a person authorised to practise the profession of medicine in the Island of Guernsey and am actually engaged in the practice thereof.

2. On the day of 19 , (6) at o'clock in the at in the parish of I personally examined the said

no other medical practitioner being present at such examination, and I came to the conclusion that the said is a person of unsound mind and is, by reason of mental ailment, in need of care and treatment and is a proper person to be taken charge of and detained under care and treatment.

3. I formed this conclusion on the following grounds, viz:—

(a) Facts indicating unsoundness of mind observed by myself at the time of the examination, (7) viz:—

(b) Facts communicated to me by others, (8) viz:— (N.B.—Article 11 of the Mental Treatment Law (Guernsey), 1939), provides that an admission order shall not be made upon a

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

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

(6) The day of the certifier's personal examination of the patient must have been not more than seven clear days before the date of the presentation of the petition.

(7) If the same or other facts were observed

previous to the time of the examination the certifier is at liberty to subjoin them in a separate paragraph.

(8) The full names of informants to be given with their addresses and descriptions.

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)
I, the undersigned, having read the petition of
dated the day of
, 19... and the statement of parti-

(1) Insert the full name of patient.
(2) Insert usual residence of patient.
(3) Insert patient's usual occupation.

culars accompanying the same and the Medical Certificates of and
dated the day of 19
and day of 19
respectively and being satisfied that the said

is a person of unsound mind and in need of care and treatment, do hereby authorise you to receive the said as a certified patient into and there to detain the said

(Signed)
A Law Officer of the Crown
in Guernsey.

Dated this day of 19

To.....

FORM 4A

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

- (1) Insert the full name of patient.
- (2) Insert usual residence of patient.
- (3) Insert patient's usual occupation.

In the matter of (1)
of (2) , (3)
I, the undersigned, having read the petition of
dated the day of
, 19... and the statement of parti-
culars accompanying the same and the Medical Certifi-
cates of and
dated the day of 19
and day of 19
respectively and being satisfied that the said
is a person of unsound mind and in
need of care and treatment, do hereby authorise you to
receive the said as a certified
patient into and
there to detain the said

- (4) See the Mental Treatment Law (Guernsey), 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
in Guernsey.

Dated this day of 19 .

To.....

FORM 5

*Application for Reception as a Voluntary Patient, by a
Person not under the age of Sixteen.*

To

The Medical Superintendent,
States' Mental Health Services,
Le Vauquiédor Hospital,
Guernsey,

I hereby make application to be received into Le Vauquiédor Hospital 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.

I undertake to pay the full expenses of my care and treatment and maintenance in the said Hospital as determined by the States' Mental Health Services Board in accordance with (a) the scale of charges fixed from time to time under the Mental Treatment Regulations, 1940 and (b) the cost of any special treatment or special measures adopted in my case.

I am unable to pay the full expenses, but am willing to contribute towards the cost, of my care, treatment and maintenance in the said Hospital and I request that the amount of my weekly contributions towards the cost of such care, treatment and maintenance be fixed after enquiry by the States' Mental Health Services Board and I make an offer to pay.....per week in that respect.

Strike out the paragraphs which do not apply.

I am unable at present to make any contribution towards the expenses of my care, treatment and maintenance in the said Hospital. I am willing that an authorised representative of the States' Mental Health Services

Board shall, if the Board desires it, examine with me the question whether, at any time after my reception into the Hospital, I should be required to make any such contribution and if so the amount thereof.

(Signed) Name

Address

Occupation

Dated this day of 19 .

MEMORANDUM

Rate of Weekly Contributions agreed

between the States' Mental

Health Services Board and

.....per week.

Signature of President of the Board.....

Signature of Applicant.....

Dated this day of 19 .

I am unable to pay the full expenses, but am willing to contribute towards the cost, of the care, treatment and maintenance of the said

in the said Hospital and I request that the amount of my weekly contributions towards the cost of such care, treatment and maintenance be fixed after enquiry by the States' Mental Health Services Board and I make an offer to pay _____ per week in that respect.

(Signed) Name.....

Address.....

Occupation.....

Dated this _____ day of _____ 19 .

MEMORANDUM

Rate of Weekly Contributions
agreed between the States'
Mental Health Services Board
and

.....per week.

Signature of President of the Board.....

Signature of Applicant.....

Dated this _____ day of _____ 19 .

FORM 7

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

N.B.—For the purposes of Article 31 (which relates to the admission, etc., of voluntary patients) of the Law the expression “guardian” in relation to a person under the age of sixteen includes any person having the charge of that person.

To
The Medical Superintendent,
States' Mental Health Services,
Le Vauquiédor Hospital,
Guernsey.

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

I undertake to pay the full expenses of the care,
treatment and maintenance of the said

in the said Hospital as
determined by the States' Mental Health Services
Board in accordance with (a) the scale of charges fixed
from time to time under the Mental Treatment Regu-
lations, 1940, and (b) the cost of any special treatment
or special measures adopted in the case of the said
patient.

Strike out
paragraphs
which are
inapplicable.

I am unable to pay the full expenses, but am willing to contribute towards the cost, of the care, treatment and maintenance of the said

in the said Hospital and I request that the amount of my weekly contributions towards the cost of such care, treatment and maintenance be fixed after enquiry by the States' Mental Health Services Board and I make an offer to pay per week in that respect.

I am at present unable to make any contribution towards the expenses of the care, treatment and maintenance of the said in the said Hospital. I am willing that an authorised representative of the States Mental Health Services Board shall, if the Board desires it, examine with me, at any time after the above-named person's reception into the Hospital, the question whether I should be required to make any such contribution and if so the amount thereof.

(Signed) Name.....

Address.....

Occupation.....

Dated this day of 19...

MEMORANDUM

Rate of Weekly Contributions
agreed between the States'
Mental Health Services Board
and
.....per week.

Signature of President of the Board.....

Signature of Applicant.....

Dated this day of 19...

FORM 8

*Recommendation of Medical Practitioner for reception
of a person under sixteen years of age as a
Voluntary Patient*

N.B.—Article 31 of the Mental Treatment Law (Guernsey), 1939—

(1) requires that a recommendation for this purpose shall be signed by either

- (a) the usual medical attendant of the person to whom the application relates or
- (b) the Medical Superintendent of the States' Mental Health Services; and

(2) provides that such medical recommendation shall cease to have effect for the purposes of the Article (which deals *inter alia* with the reception of voluntary patients in a mental hospital) 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.

Recommendation for the reception and treatment of (1) _____
of (2) _____ as a Voluntary
Patient in Le Vauquiédor Hospital.

(1) Full Christian names and surname of intending patient.
(2) Full postal address.
(3) Full name and (4) address of medical practitioner.

I. (3) _____ of (4)

hereby declare that—

1. I am a person authorised to practise the profession of medicine in the Island of Guernsey and am actually engaged in the practice of that profession.

FORM 9

Application for Reception of a Person as a Temporary Patient into Le Vauquiédor Hospital

N.B.—Before completing this Form, the applicant should read the extracts from the Mental Treatment Law (Guernsey), 1939, printed on the back hereof.

To

The Medical Superintendent,
States' Mental Health Services,
Le Vauquiédor Hospital,
Guernsey.

1. I ⁽¹⁾ of ⁽²⁾ hereby request you to receive of as a temporary patient into Le Vauquiédor Hospital.

(1) Full name and (2) full postal address of applicant

2. ⁽³⁾ I am related to the said in the following manner:—
OR

(3) Strike out the alternative declarations which do not apply.

I am a Constable of the Parish of in which Parish the said now is and I make this application at the request of of who is related to the said in the following manner:—

OR

I am not related to the said The reasons why this application is not made by a relative of the said , and my connection with him/her, ⁽⁴⁾ and the circumstances in which I make this application, are as follows:—

(4) Strike out the inapplicable word

3. Accompanying this application is a recommendation for the temporary treatment of the said signed by two medical practitioners according to law.

(Signed).....

Dated this day of 19 .

Back of Form 9

**THE MENTAL TREATMENT LAW
(GUERNSEY), 1939)**

*Extracts of paragraphs from
Article 34.—Admission of Temporary Patients and
Requirements regarding them*

(1) Subject to the provisions of this Article, a person who is suffering from mental illness and is likely to benefit by temporary treatment may, on a written application duly made in accordance with the provisions of this Article but without an admission order, be received as a temporary patient for the purpose of treatment—

(i) into a mental hospital; or

(ii) with the consent of the Board, into charge as a single patient.

(2) An application under this Article shall be made in the prescribed form to the Medical Superintendent; and shall, if possible, be made by the husband or wife, or by a relative of the person to whom it relates, or, on the request of the husband or wife or of a relative, by a Constable of the parish in which the said person then is, and if the application is not so made, it shall contain a statement of the reason why it is not so made, of the connection of the applicant with the person to whom it relates and of the circumstances in which he makes the application.

(3) The application shall be accompanied by a recommendation 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.

(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.

(14) Any consent granted by the Board under paragraph (1) of this Article may be granted subject to such conditions as the Board thinks proper and may be revoked at any time.

FORM 10

Application for Reception of a person as a Temporary Single Patient

N.B.—Before completing this Form the applicant should read the extracts from the Mental Treatment Law (Guernsey), 1939, printed on the back hereof.

To
The Medical Superintendent,
States' Mental Health Services,
Le Vauquiédor Hospital,
Guernsey.

- (1) Full name and (2) full postal address of applicant.
- (3) Give name and full postal address of the authorised place into which the patient's reception is desired.
- (4) Strike out the alternative declarations which do not apply.
- (5) Strike out the inapplicable word.

1. (I ⁽¹⁾ of ⁽²⁾ hereby apply for the consent of the States' Mental Health Services Board to the reception of of into ⁽³⁾ for treatment as a temporary single patient.

2. ⁽⁴⁾ I am related to the said in the following manner:—

OR

I am a Constable of the Parish of in which Parish the said now is and I make this application at the request of of , who is related to the said in the following manner:—

OR

I am not related to the said . The reasons why this application is not made by a relative of the said , and my connection with him/her, ⁽⁵⁾ and the circumstances in which I make this application are as follows:—

3. Accompanying this application is a recommendation for the temporary treatment of the said signed by two medical practitioners according to law.

(Signed).....

Dated this day of 19 .

Back of Form 10

**THE MENTAL TREATMENT LAW
(GUERNSEY), 1939**

*Extracts of paragraphs from
Article 34.—Admission of Temporary Patients
and requirements regarding them*

(1) Subject to the provisions of this Article, a person who is suffering from mental illness and is likely to benefit by temporary treatment may, on a written application duly made in accordance with the provisions of this Article but without an admission order, be received as a temporary patient for the purpose of treatment —

(i) into a mental hospital; or

(ii) with the consent of the Board, into charge as a single patient.

(2) An application under this Article shall be made in the prescribed form to the Medical Superintendent; and shall, if possible, be made by the husband or wife, or by a relative of the person to whom it relates, or, on the request of the husband or wife or of a relative, by a Constable of the parish in which the said person then is, and if the application is not so made, it shall contain a statement of the reason why it is not so made, of the connection of the applicant with the person to whom it relates and of the circumstances in which he makes the application.

(3) The application shall be accompanied by a recommendation 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.

(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.

(14) Any consent granted by the Board under paragraph (1) of this Article may be granted subject to such conditions as the Board thinks proper and may be revoked at any time.

FORM 11

Recommendation of two Medical Practitioners for Temporary Treatment of a Patient

N.B.—Before completing their declarations in this Form, the declarants should read the extracts from the Mental Treatment Law (Guernsey), 1939, printed on the back hereof.

Recommendation for the temporary treatment of
of

(1) Full name
and (2) ad-
dress of one
medical
practitioner.
(3) Strike out
the inapplic-
able expres-
sion.

I, (1) of (2)
hereby declare that:—

1. I am a person authorised to practise the profession of medicine in the Island of Guernsey and am actually engaged in the practice thereof. I am ~~am~~ not (3) the usual medical attendant of the above named .

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

*3. I have formed the conclusions stated below on the following grounds, viz:—

I, (4) of (5) hereby declare that:— (4) Full name and (5) address of the other medical practitioner.

1. I am a person authorised to practise the profession of medicine in the Island of Guernsey and am actually engaged in the practice thereof. I am not (6) the usual medical attendant of the above named (6) Strike out the inapplicable expression.

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

*3. I have formed the conclusions stated below on the following grounds, viz:—

And WE, the said and further declare that:—

1. The said

- (i) is suffering from mental illness;
(ii) is likely to benefit by temporary treatment;
(iii) is for the time being incapable of expressing a desire or willingness to receive treatment as a voluntary patient.

2. It is expedient with a view to the said 's recovery that he should be received into for a period not exceeding six months.

Signed

Medical Qualifications

Dated this day of 19...

Signed

Medical Qualifications

Dated this day of 19...

*A person in specifying the grounds on which his conclusions are based, must carefully distinguish between statements of fact which are based upon his own observations and statements of fact which are based upon communications made to him by others.

Back of Form 11

**THE MENTAL TREATMENT LAW
(GUERNSEY), 1939**

*Extracts of paragraphs from
Article 34.—Admission of Temporary Patients
and requirements regarding them*

(3) The application shall be accompanied by a recommendation 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 grounds 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.

FORM 12

Transfer Order

In 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
in Guernsey.

Dated this _____ day of _____, 19...

FORM 13

Annex to Forms 5, 6, 7, 9, and 10.

*Particulars to be supplied when a Voluntary
or Temporary Patient is received*

Full Name

Maiden Name (in the case of a married woman).....

Age Date of Birth

Whether Married or Single

Occupation

Religion

Address from which received

Date of Reception

Name and address of responsible relative:—

Duration of existing illness

Has the Patient previously been in
a Mental Hospital or otherwise
under care for mental illness?.....

If so, when and where

.....

THE THIRD SCHEDULE (Regulation No. 25)

Authorised Staff of States' Mental Health Services

1.— *In charge of the States' Mental Health Services:*

A Medical Superintendent

2.— *At Le Vauquiédor Hospital and Psychiatric Clinic:*

A.— *Whole-time Staff*

A Matron
A Chief Male Nurse
16 Female Nurses
10 Male Nurses
A Hospital Porter
A Cook
An Assistant Cook
4 Housemaids
3 Kitchenmaids
A Vanman and Gardener
A Boilerman

Whole-time or Part-time, as required

A Clerk of the Hospital
A Seamstress

C.— *Visiting and other Part-time Staff*

A Chaplain
A Dental Surgeon
An Occupational Therapist
3 Charwomen

THE FOURTH SCHEDULE (Regulation No. 16,
section (6), and Part IV. of the Regulations)

Specified Mechanical Means of Bodily Restraint

- (1) A jacket or dress, made of strong linen or some other strong material (a) laced or buttoned down the back, having long outside sleeves fastened to the dress only at the shoulders, with closed ends to which tapes may be attached for tying behind the back when the arms have been folded across the chest; or (b) of some other pattern approved by the Board;
- (2) Gloves without fingers, so fastened at the wrists that they cannot be removed by the wearer, and made of linen, leather (chamois or other), or some strong material, padded or otherwise;
- (3) Sheets or towels, when tied or fastened to the sides or ends of a bed or to other objects;
- (4) If, in the opinion of the Medical Superintendent or other medical practitioner who gives the certificate required by Article 36 of the Mental Treatment Law (Guernsey), 1939, some other mechanical means of bodily restraint is necessary in a particular case where the circumstances are exceptional, such means may be used with the previous sanction of the President of the Board for such period as he authorises.

APPENDIX

Article 36 of the Mental Treatment Law (Guernsey), 1939

ARTICLE 36.—MECHANICAL RESTRAINT

(1) Mechanical means of bodily restraint shall not be applied to any patient unless the restraint is necessary for purposes of surgical or medical treatment, or to prevent the patient from injuring himself or others.

(2) In every case where such restraint is applied a medical certificate shall, as soon as it can be obtained, be signed, describing the mechanical means used, and the reasons for the application of the same.

(3) The certificate shall be signed, in the case of a patient in a mental hospital, by the medical officer thereof, and in the case of a patient detained elsewhere, by his medical attendant.

(4) A full record of every case of restraint by mechanical means shall be kept from day to day by the master or matron of a mental hospital or by the person in charge of a patient in any other place.