## The Mental Health (Care and Treatment) (Scotland) Act 2003

#### Section 193 Order

CORO2 Part A
Application / Reference

Instructions	v7.0.1
This box is for the use of the Mental Health Tribunal for Scotland only	

#### The following form is to be used:

where

- 1) a reference to the Mental Health Tribunal of Scotland is to be made by the Scottish Ministers under section 185(1), 187(2) or 189(2); OR
- 2) an application to the Mental Health Tribunal of Scotland is to be made by the Scottish Ministers under section 191; OR
- 3) to record an application made under section 192 of the Act or an appeal made under section 201 or 204 of the Act.

There is no statutory requirement that you use this form but you are strongly recommended to do so. This form draws attention to some procedural requirements under the Mental Health (Care and Treatment) (Scotland) Act 2003. Failure to observe procedural requirements may invalidate the record.

Where not completing this form electronically, to ensure accuracy of information, please observe the following conventions:

Write clearly within the boxes in	For	ex	amı	ole					Shade circles like this ->		ر
BLOCK CAPITALS and in BLACK or BLUE ink									Not like this ->	$\bowtie$	

Where a text box has a reference number to the left, you can extend your response on plain paper where there is insufficient space in the box. Extension sheet(s) should be clearly labelled with Patient's name and CHI number, and each extended response should be labelled with the appropriate text box reference number.

Patient Details																							
CHI Number											]												
Surname																							
First Name (s)																					T		
Other / Known As																							
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DoB dd / mm / yyyy			]/			/							      -		. – –		○ <b>F</b>	em	ale	     			
Patient's home address																							
address																							
Postcode																							
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Correspondence addres	s foi	r the	pa	tien	t is:																		
O Home address noted a	abov	e																					
O Detention hospital/war	d (e	nter	in t	ext	box	)																	
Other address (enter i	n tex	ct bo	ox)																				



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CORO Details																									
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he patient is detain	ed in:																								
Hospital																									
Ward													Ī												
Named Person																									
○ The patient doe	s not hav	ve a	a na	med	d pe	rso	n																		
○ The patient doe	s have a	ı na	med	d pe	rso	n - c	deta	ils I	belo	w															
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Primary Carer, Ad	vocacy	vvo	rkei	r, VI	eit.	are	AII	orn	iey,	we	eitar	e G	uar	aiai	n										
Full name and address	of the pati	ient	's pr	imar	v ca	rer (	if an	v)			Full name and address of the patient's advocacy worker when applicable (including contact telephone number and email address where known)														
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Full name and address appicable (see notes)	ot tne pati	ent	s we	ıtare	atto	orne	y wn	iere			Full name and address of the patient's welfare guardian when applicable (see notes)														
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tes "Welfare attorney" r welfare power of at	torney grai	nted	l und	er se	ction	า 16	of th	е			"G th	iuard ie Ad	lian" Jults	mea with	ns a Inca	per pac	son a ty (S	appo cotla	inted and) /	as a Act 2	ι gua :000	ardiar (asp	unc 4) w	ler ⁄ho	
welfare power of at Adults with Incapac registered under se	ity (Scotlar	nd) A	Act 2	000 (	asp	4) aı	nd	е			ha	s po	wer	by vi	rtue	of se	ectio	n 64	and) / (1)(a) f a pe	or (	b) of	(asp that	4) w Act i	no n	



# To be completed by the Scottish Ministers or the Mental Health Tribunal for Scotland Record Of Contact Details Of Others Relevant to the Application Please provide the names and addresses of others who may be relevant to this application, where not available elsewhere on this form or the Mental Health Reports, and whom the Mental Health Tribunal for Scotland may wish to hear evidence from, for example: the patient's GP. Also record any others who should be invited to the hearing. **Curator Ad Litem** If, in your view, the patient requires a Curator Ad Litem, please indicate this here and give your reasons. Suspension of detention Where relevant to the reference/application: Date on which the total period of suspension of detention within 12 months will reach 200 days.

Note that the tribunal will schedule the hearing prior to the date of maximal suspension of detention if possible, but this cannot be guaranteed.



#### To be completed by the Scottish Ministers or the Mental Health Tribunal for Scotland

#### Advance Statement

#### Shade A or B as appropriate

▲ ○ As far as I am

A S far as I am aware, the patient has made and not withdrawn an advance statement made under the terms of section 275 of the Act.

#### OR

B O As far as I am aware the patient has not made an advance statement under the terms of section 275 of the Act.

If the patient has an Advance Statement, could Scottish Ministers please ensure that it is enclosed with the application or reference.

#### Completing the appropriate part of the form

#### Please complete -

#### **Scottish Ministers:**

Part 1, where a reference to the Mental Health Tribunal of Scotland is to be made by the Scottish Ministers:

following a report form the patient's RMO under section 185(1); following notice from the Mental Welfare Commission under section 187(2); or under section 189(2)

Part 2, where an application to the Mental Health Tribunal of Scotland is to be made by the Scottish Ministers under section 191.

#### **Mental Health Tribunal for Scotland**

**Part 3**, where an application has been made by the patient, patient's named person or a listed person under section 192 of the Act

**Part 4**, where an appeal has been made by the patient, patient's named person or a listed person under section 201 or 204 of the Act



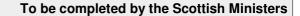
### To be completed by the Scottish Ministers

# PART 1: REFERENCE TO THE MENTAL HEALTH TRIBUNAL OF SCOTLAND BY THE SCOTTISH MINISTERS UNDER SECTION 185(2), 187(2) OR 189(2)

Reference Type									
This is a reference under: Section 185(1) Section 187(2) Section 189(2)  Note: Section 189(2) reference is made because no reference under section 185(1) or 187(2), or application under section 191 or 192(2) has been determined by the Mental Health Tribunal for Scotland during the previous two years in respect to the orders to which this patient is subject.									
Reasons For Reference - to be completed for section 187 references only									
The reason(s) given by the Mental Welfare Commission in the notice under 186(2) of the Act requiring the Scottish Ministers to make this reference is/are:									
1									
Notification									
Scottish Ministers shall as	s soon as is practicable give notice that a reference is to be, or as the case may be has been								
made to the following:									
<ul><li>the patient;</li><li>the patient's named per</li></ul>	rson (if any):								
<ul><li>any guardian of the pat</li></ul>									
<ul><li>any welfare attorney of</li></ul>									
○ the patient's RMO									
○ the MHO, and									
O the Mental Welfare Cor	nmission								
Signature / Date									
Name									
Job Title									
Signed on behalf of the Scottish Ministers									
Date									

For reference under section 185(1), a copy of the relevant CORO1 and accompanying RMO's report should be sent with this form to the Mental Health Tribunal





# PART 2: APPLICATION TO THE MENTAL HEALTH TRIBUNAL OF SCOTLAND BY THE SCOTTISH MINISTERS UNDER SECTION 191

Appl	lication Type											
	s an application made under section 191 of the Act to the Mental Health Tribunal for Scotland in respect of the s to which the patient is subject. It is seeking the following order(s):											
0	the revocation of the compulsion order											
0	the revocation of the restriction order											
0	the variation of the measures specified in the compulsion order (complete section below) (Note: this may apply only where the application is also seeking the revocation of the restriction order)											
0	the conditional discharge of the patient											
Varia	ation to Compulsion Order											
l prop	pose the following modifications to the measures specified within the compulsion order: -											
I	sures currently All measures proporised following var											
	(a) the patient's detention in a specified hospital	С										
	(b) giving the patient medical treatment in accordance with Part 16 of the Act	C										
	(c) requiring the patient to attend: on specified or directed dates; or at specified or directed intervals, specified or directed places with a view to receiving medical treatment	C										
	(d) requiring the patient to attend: on specified or directed dates; or at specified or directed intervals, specified or directed places with a view to receiving community care services, relevant services or any treatment care or service	C										
	(e) requiring the patient to reside at a specified place	C										
	(f) requiring the patient to allow any of the following parties to visit the patient in the place where the patient resides.  Those parties are;  > the patient's MHO,  > the patient's RMO,  > or any person responsible for providing medical treatment, community care services, relevant services or any treatment, care or services to the patient who is authorised for this purpose by the patient's RMO											
¦	(g) requiring the patient to obtain the approval of the MHO to any proposed change of address	 C										

**Note:** any changes proposed within the above measures should be detailed within an updated care plan that should accompany this document.

(h) requiring the patient to inform the MHO of any change of address before the change of address takes effect

Where it is proposed that the order should authorise measures other than the detention of the patient in hospital, please state the name of the hospital the managers of which should have responsibility for appointing the patient's RMO.



Hospital

	To be completed by the Scottish Ministers								
Variation to Compulsion Order (cont)									
The reason(s) for seeking modification(s) is(are):									
2	g iniounication(s) is(ale).								
Notification									
Scottish Ministers shall a made to the following:	s soon as is practicable give notice that a reference is to be, or as the case may be has been								
○ the patient;									
O the patient's named pe	rson (if any);								
O any guardian of the part	ient;								
$\bigcirc$ any welfare attorney of	the patient;								
$\bigcirc$ the patient's RMO									
$\bigcirc$ the MHO, and									
O the Mental Welfare Co	mmission								
Signature / Date									
Name									
Job Title									
Signed on behalf of the Scottish Ministers									
Date dd / mm / yyyy									



## To be completed by Mental Health Tribunal for Scotland

#### PART 3: RECORD OF APPLICATION MADE UNDER SECTION 192(2) OF THE ACT

Application Details

The a	application was made by:  the patient the patient's named person the patient's guardian the patient's primary carer the patient's welfare attorney the patient's nearest relative											
	is is a record of application made under section 192 of the Act to the Mental Health Tribunal for Scotland in respect of e orders to which the patient is subject. It is seeking the following order(s):  the revocation of the compulsion order											
0	the revocation of the restriction order											
0	the variation of the measures specified in the compulsion order (complete table below) (Note: this may apply only where the application is also seeking the revocation of the restriction order)											
Meas	he following variation is proposed to the measures specified within the compulsion order: -  Measures currently authorised  All measures proposed following variation											
	(a) the patient's detention in a specified hospital											
	(b) giving the patient medical treatment in accordance with Part 16 of the Act											
	(c) requiring the patient to attend: on specified or directed dates; or at specified or directed intervals, specified or directed places with a view to receiving medical treatment											
	(d) requiring the patient to attend: on specified or directed dates; or at specified or directed intervals, specified or directed places with a view to receiving community care services, relevant services or any treatment care or service											
	(e) requiring the patient to reside at a specified place											
	(g) requiring the patient to obtain the approval of the MHO to any proposed change of address	0										
	(h) requiring the patient to inform the MHO of any change of address before the change of address takes effect											
	Where it is proposed that the order should authorise measures other than the detention of the patient in hospital, please state the name of the hospital the managers of which should have responsibility for appointing the patient's RMO.											
Hosp	oital											
	Please provide details of any previous applications under section 192(2) of the Act, including length of time since any previous application under this section											
3												



To be completed by Mental Health Tribunal for Scotland

#### PART 4: RECORD OF APPEAL MADE UNDER SECTION 201 OR 204 OF THE ACT

Application Details										
The appeal was made by:  the patient  the patient's named person  the patient's guardian  the patient's primary carer  the patient's welfare attorney  the patient's nearest relative										
a section 201 appeal against variation of conditions imposed on conditional discharge (complete part 4a)										
○ a section 204 appeal against recall from conditional discharge (complete part 4b)										
The patient was conditionally authority of section 193 on:										
Part 4a: Section 201 appeal details										
The Scottish Ministers notified variation(s) to conditions implied discharge on:		Date	Appeal by the patient or named person must be within 28 days of this date							
The variation(s) made by the	Scottish Ministers that are	the subject of	of this appeal are:							
4										
Part 4b: Section 204 appe	eal details									
The patient was returned to	hospital on	Date	Appeal by the patient or named person must be within 28 days of this date							

following warrant from Scottish Ministers recalling the patient from conditional discharge

