# Police Report - Removal To Place Of Safety

Instructions	v7.0
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## The following form is to be used:

To provide a record of having removed a person suspected of having a mental disorder from a public place to a place of safety.

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 report.

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To be compi	eted by Police
Place Of Safety - First or Only	
If the person was removed to a single place of safety, record it here. If the person was removed to more that safety, record the first place here then subsequent places in the following section	n one place of
The aforementioned person was removed to (full address and postcode) -	Place 1
	(0.4 by alast)
Date Moved Time Moved .	(24 hr clock)
Is the above place of safety a police station?	
If yes, please state reasons why a police station was used.	
Note: A police station should only be used as a place of safety as the last resort.	
Place Of Safety - Subsequent	
The aforementioned person was subsequently removed to (full address and postcode) -	Place 2
Date Moved / / / Time Moved	(24 hr clock)
Date Moved       /	(24 III Clock)
Is the above place of safety a police station?	
If yes, please state reasons why a police station was used.	
Note: A police station should only be used as a place of safety as the last resort.	
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		To be completed by Police
Place Of Safety - S	Subsequent (cont)	
Γhe aforementioned μ	person was subsequently removed to (full address and post	code) - Place 3
Date Moved	Time Mo	ved : (24 hr clock)
Is the above place of	f safety a police station?	
	easons why a police station was used.	
Note: A police station sh	nould only be used as a place of safety as the last resort.	
The aforementioned	person was subsequently removed to (full address and pos	tendo)
The alorementioned	person was subsequently removed to (full address and pos	rcode) - Place 4
Date Moved	Time Mo	oved (24 hr clock
Is the above place o	f safety a police station? O Yes O No	
	easons why a police station was used.	
	hould only be used as a place of safety as the last resort.	



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	To be completed by Police
Record Of Informing Certain Parties (cont)	
This page will only need to be completed if the nearest relative has not been informed, or does not live with the aforementioned person.	has been informed, but

# Further Information 1

Complete A or B as appropriate	Complete	Α	or	В	as	ap	pro	priat	tε
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Α	○ the following person	on, v	vho	res	ides	wit	th th	ne a	fore	eme	ntio	nec	l pei	rsor	ı, ha	as b	een	info	orm	ed			
 	Surname																						
	First Name																						
OR																					 	 	 

2	a nerson	who	provides a	care	service	other	than
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(i) by virtue of a contract of employment, or other contract, with any person, or

To be completed as soon as is reasonably practicable after the removal to the place of safety.

(ii) as a volunteer for a voluntary organisation,

for the aforementioned person who was removed to the place of safety, has been informed. Their name and address are detailed below

2																				
Surname																				
First Name																				
Address																				
Postcode																				

# Further Information 2

If it was not reasonably practicable to inform the aforementioned person's nearest relative, please provide reasons why this was the case

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	То	be	com	pleted	bν	Police
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## Notification To Mental Welfare Commission

The Mental Welfare Commission must be sent a copy of this form before the expiry of 14 days beginning with the day on which the aforementioned person was removed to the place of safety.

## The form should be sent to:

The Mental Welfare Commission for Scotland Thistle House 91 Haymarket Terrace EDINBURGH EH12 5HE

Officer Dealing				
Surname				
First Name				
Rank				
Police Station				
Town / City if different from Police Station above				
Telephone				
Completed By				
Name				
(If different to above)				
Rank / Role (If different to above)				
Division				
Date				

# Notes

The Director of Social Work in the relevant local authority should be informed of the relevant matters

The relevant matters are those requested in this form



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