Involuntary Psychiatric Treatment Act - Fact Sheet

<table>
<thead>
<tr>
<th>Background</th>
<th>Why did we need new legislation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>In October 2005, the Nova Scotia House of Assembly passed the Involuntary Psychiatric Treatment Act. The Act is about making sure that those who are unable to make treatment decisions, due to their severe mental illness, receive the appropriate treatment. Regulations have been developed and the Act will become law on July 3, 2007. This new legislation is the result of discussions with many mental health consumers, families, advocates and care providers.</td>
<td>The existing legislation dealing with involuntary psychiatric treatment was almost 30 years old. It was embedded in the Hospitals Act, and it pre-dated Canada’s Charter of Rights and Freedoms, so it didn’t always serve people with serious mental illness as well as it could have.</td>
</tr>
</tbody>
</table>

The **Involuntary Psychiatric Treatment Act takes effect on July 3, 2007.**

The new **Involuntary Psychiatric Treatment Act**:
- uses guiding principles
- amends the involuntary psychiatric admission criteria
- reduces the time period for extensions of involuntary admissions
- reduces the time allowed for Review Board hearings to take place
- enhances provisions regarding determinants of a patient’s capacity to make decisions including consent to treatment
- introduces independent rights advisors
- introduces Community Treatment Orders and Leave Certificates
- ensures due process in accordance with the Charter of Rights

**When does the Involuntary Psychiatric Treatment Act apply?**

The **Involuntary Psychiatric Treatment Act** is appropriate when someone with a mental disorder:
- is a danger to him/herself or others, or who is likely to deteriorate to the point that they are a danger, and
- needs inpatient care, and
- lacks capacity to make decisions about their care.

It is not for people who voluntarily admit themselves for treatment, or for people who are capable of making decisions about their treatment.

**How do I find out more about the Act?**

To find out how the Act applies to you, contact the Department of Health’s Mental Health branch at 424-7895. The complete Involuntary Psychiatric Treatment Act, regulations and other information can be found on-line at http://www.gov.ns.ca/mhs

The Involuntary Psychiatric Treatment Act is about making sure that those who are unable to make treatment decisions, due to their severe mental illness, receive the appropriate treatment.
As a chief executive officer (CEO) or designate, what are my responsibilities under the Involuntary Psychiatric Treatment Act?

The Involuntary Psychiatric Treatment Act identifies the chief executive officer as “...the person who is responsible for the administration and management of a district health authority that has a psychiatric facility or a person designated in writing by such responsible person or the Izaak Walton Killam Health Centre;” S53(e)

Patients must be informed of their rights, and patient rights advisors must be provided with necessary information.

- If a patient has been detained for 72 hours but hasn’t been admitted as an involuntary patient, the CEO or designate must ensure that the person is informed that they have right to leave the psychiatric facility, unless they are subject to any other legal detention. S12

- An attending psychiatrist can change the status of a patient from involuntary to voluntary by completing and filing a declaration of change of status with the CEO. When this happens, the CEO will ensure that the patient is promptly informed that they are a voluntary patient and have the right to leave the facility, unless they are subject to any other legal detention. S24(2) & (3)

- When a declaration of involuntary admission or declaration of renewal is filed, the CEO must inform the patient and substitute decision maker in writing that the patient: has been admitted or continued as an involuntary patient, or has his or her status changed to involuntary and the reason for the change; has the right to apply to the Review Board for a review of the patient’s status; and has the right to retain and instruct counsel. S26

- The CEO must ensure that the patient-advisor service is given notice of: a decision to admit a person as an involuntary patient; a change of status of a patient; the filing of a declaration of renewal; the issuance of a community treatment order or a certificate of leave; or an application to the Review Board. S62

- In addition to specific rights notifications outlined in the Act, psychiatric facilities continue to have general obligations for ensuring the patient and substitute decision makers have access to rights information both orally and in writing in the form approved by the CEO. S4

Declarations and other documents need to be filed with the CEO.

- The psychiatrist can admit an involuntary patient by completing and filing with the CEO a declaration of involuntary admission. S17(e)

- The psychiatrist may renew a patient’s involuntary status by completing and filing with the CEO a declaration of renewal. S21(1)

- When the CEO receives a declaration of involuntary admission or declaration of renewal, he or she must immediately examine the form to ensure that it is properly completed. If the CEO has any concerns with the completion of the form, he or she must ensure that the attending psychiatrist is informed. S23(1) & (2)

- A psychiatrist who issues a leave certificate must give a copy to the CEO, among others. S43(4)

- A psychiatrist issuing a community treatment order must provide a copy of it (along with notice of the right to a hearing before the Review Board) to the CEO, among others. S47(5)(b)
As a chief executive officer (CEO) or designate, what are my responsibilities under the Involuntary Psychiatric Treatment Act (continued)?

The CEO has a role in the Review Board Process.

- The review Board can make recommendations to the CEO regarding the treatment or care of a patient. *S68(2)* The CEO, among others, may request that the Review Board conduct a review. *S68(4)*
- The CEO is entitled to be a party in an application to the Review Board, along with the patient, the patient’s substitute decision maker and the attending psychiatrist. *S69(3)*
- The Review Board must send a written decision, setting out fully the conclusions of the Board, to the CEO and other parties within 10 days after each review. *S76(1)(e)*

The CEO can transfer a patient if it is considered in their best interest.

- A CEO can transfer the involuntary patient to another psychiatric facility upon agreement of the CEO of the receiving facility if he or she believes that it is in the best interests of the involuntary patient. *S29*
- If the patient requires hospital treatment that can’t be provided in the psychiatric facility the CEO can transfer the patient to a hospital for treatment and return the patient to the psychiatric facility at the end of the treatment. *S30*

Other changes included in the Act

- New forms are prescribed by regulation under both the Involuntary Psychiatric Treatment Act and the revised Hospitals Act (for capacity and competancy issues for hospitals generally).
- Provisions for substitute decision making under both the Involuntary Psychiatric Treatment Act and the Hospitals Act are enhanced.
- Voluntary patients may be detained for three hours for examination if they request discharge and staff believe they meet involuntary admission criteria. *S7*
- There is liability protection for performing duties in good faith under the Act. *S81*