

Clinical Report for Director of Area Mental Health Services

Clinical particulars to be of	completed by the Mental Hea	alth Practitioner /Responsible	Clinician
 (tick box as appropriate) Certificate of Preliminary assessment – Certificate of Further assessment – Certificate of Final assessment – Certificate of Clinical Review – 		section 10 (2)(b) section 12 (2)(b) section 14 (2)(b) section 76 (4)(b)	
Patient/Proposed Patier	nt Details:		
Name:			
Date of birth:			
Address:			
Date of Report:			
Method of review/ assessment:	☐ In person	☐ Audio-Visual Link (AV	L)
Rationale for AVL under section 6A:			
Clinical Findings			
		form or attach relevant materia f self-care and key finds from i	

Version issued 1 November 2021

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Mental Health	(Compulsory Assessment and	d Treatment) Act 1992

Sections 10, 12, 14, 76

History of Current Clinical Presentation: Please either complete form or attach relevant material includuration and contextual information relevant to current presentation	ıding
,	
Past Psychiatric History: Please either complete form or attach relevant material including duration o illness, previous admissions, previous compulsory treatment orders, past diagnoses and previous treatments	of
Relevant Medical, Drug and Alcohol, Personal and Social History: <i>Please either complete form or att</i> relevant material	tach

Mental Health (Compulsory Assessment and Treatment) Act 1992

Sections 10, 12, 14, 76

Application of Clinical Findings to Statutory Definition of Mental Disorder With reference to the statutory findings recorded in the accompanying section 10, 12, 14 or 76 certificate, please elaborate on your reasoning related to mental disorder. In my opinion, (proposed) patients name Either: does not manifest an abnormal state of mind manifests an abnormal state of mind characterised by: OR: disorder of perception \square delusions disorder of mood □ disorder of volition disorder of cognition □ I believe that the nature of the abnormal state of mind is: continuous OR intermittent Describe to justify opinion regarding abnormal state of mind I believe that the abnormal state of mind is to such a degree that it: Poses a serious danger to the health or safety of that person or of others Seriously diminishes the capacity of that person to take care of themself neither of above apply Describe to justify opinion regarding serious danger or seriously diminished capacity Accordingly, in my opinion, is mentally disordered (proposed) patients name is not mentally disordered Consultation with family or whānau I have consulted with the family or whānau of the (proposed) patient I have **not** consulted with the family or whānau of the (proposed) patient because It is not reasonably practicable; or Having consulted with the (proposed) patient it is not in their best interests Please give details

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Signature:

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Section 2 INTERPRETATION

"Mental disorder", in relation to any person, means an abnormal state of mind (whether of a continuous or an intermittent nature), characterised by delusions, or by disorders of mood or perception or volition or cognition, of such a degree that it—

- (a) Poses a serious danger to the health or safety of that person or of others; or
- (b) Seriously diminishes the capacity of that person to take care of himself or herself;

Section 4 GENERAL RULES RELATING TO LIABILITY TO ASSESSMENT OR TREATMENT

The procedures prescribed by Parts 1 and 2 of this Act shall not be invoked in respect of any person by reason only of—

- (a) That person's political, religious, or cultural beliefs; or
- (b) That person's sexual preferences; or
- (c) That person's criminal or delinquent behaviour; or
- (d) Substance abuse; or
- (e) Intellectual disability

Section 6A USE OF AUDIOVISUAL LINKS

- (1) This section applies if—
 - (a) a clinician, mental health practitioner, or psychiatrist (a practitioner) exercises a power under this Act that requires access to a person; or
 - (b) a Judge, any person directed by a Judge, or a member of a Review Tribunal is required to examine a person under this Act.
- (2) The practitioner may use an audiovisual link to access the person to exercise a power under this Act if the practitioner considers—
 - (a) that it is not practicable for the person to be physically present; and
 - (b) the use of an audiovisual link is appropriate in the circumstances.
- (2A) The practitioner must apply any relevant guidelines and standards of care and treatment issued by the Director-General of Health under section 130 when deciding whether—
 - (a) it is not practicable for the person to be physically present; and
 - the use of an audiovisual link is appropriate in the circumstances.
- (2B) If an audiovisual link is used to access the person under subsection (2), the practitioner must—
 - (a) record in writing the reason that—
 - (i) it was not practicable for the person to be physically present; and
 - (ii) the use of an audiovisual link was appropriate in the circumstances;

and
(b) provide the record to the relevant Director of Area Mental Health Services as soon as practicable after the use of the link.

- (3) If the Judge or member of the Review Tribunal considers that it is not practicable for the person to be physically present for an examination, the Judge, a person directed by a Judge, or a member of a Review Tribunal may use an audiovisual link to examine the person under this Act.
- (4) In this section, audiovisual link, in relation to the exercise of a power in respect of a person under this Act, means facilities that enable both audio and visual communication with the person.
- (5) To avoid doubt, an examination may not be carried out under this section by audio link.

Section 7A PRACTITIONER OR RESPONSIBLE CLINICIAN TO CONSULT

- (1) In this section, "practitioner" means—
 - (a) A mental health practitioner conducting an assessment examination of a proposed patient under section 9; and
 - (b) A responsible clinician providing an assessment of, or treatment to, a patient
- (2) A practitioner must consult the family or whanau of the proposed patient or patient. This subsection is subject to subsection (3).
- (3) Subsection (2) does not apply if the practitioner has reasonable grounds for deciding that consultation—
 - (a) Is not reasonably practicable; or
 - (b) Is not in the best interests of the proposed patient or patient.
- (4) In deciding whether or not consultation with the family or whanau is in the best interests of a proposed patient or patient the practitioner must consult the proposed patient or patient.