

Leave of Absence

(Section 39)

- (1) The responsible clinician may permit the patient to be absent from a treatment centre for any period, and on the conditions, that the responsible clinician thinks fit.
- (2) Permission may be given on any grounds the responsible clinician thinks fit, including, for example, compassionate grounds or that the patient requires medical treatment.
- (3) The responsible clinician must not permit the absence unless the responsible clinician is satisfied that, as far as is practicable, adequate measures have been taken to prevent the patient from causing harm to himself or herself.

To patient:

Name and contact details of person to whom this leave of absence relates

Last name

First name

Date of birth

NHI

Phone number

Address (address at time of CTO)

Postcode

Details of leave of absence

You are granted leave of absence from _____ Treatment Centre for a period of _____ days _____ hrs.

Your leave starts on ____ am/pm __/__/__ and ends on ____ am/pm __/__/__.

You must return to _____ Treatment Centre on ____ am/pm __/__/__.

Your leave is subject to the following terms and conditions:

If you remain absent from _____ Treatment Centre when your leave expires, I can ask an authorised officer to take all reasonable steps to return you.

Contact details and signature of the responsible clinician

Last name

First name

Address

Postcode

Email address

Contact phone number

Signature of responsible clinician

Date