MECHANICALLY PROPELLED VEHICLES DUTY

[*See* now ROAD TRAFFIC AND VEHICLES, p. 3750 below.]

MENTAL DEFICIENCY

[*See* also LUNACY AND MENTAL TREATMENT, E., p. 1775 above, and NATIONAL HEALTH SERVICE, E., p. 2071 below.]

1. *General.* | 2. *Summary Jurisdiction*, p. 1872.

1. GENERAL

The Mental Deficiency Regulations, 1948

1948 No. 1000

Made - - - - 10*th May*, 1948
Laid before Parliament 12*th May*, 1948
Coming into Operation 5*th July*, 1948

107975.

The Minister of Health, in exercise of his powers under sections 10, 16, 18, 20, 25, 30, 40, 41, 49, 50, 51 and 59 of the Mental Deficiency Act, 1913, and of all other powers enabling him in that behalf, and as regards regulations 8 and 107 with the concurrence of the Lord Chancellor, hereby makes the following regulations:— 3 & 4 Geo. 5. c. 28.

PART I
GENERAL

1. These regulations may be cited as the Mental Deficiency Regulations, 1948, and shall come into operation on the fifth day of July, 1948. Short title and commencement.

2. These regulations are divided into thirteen parts, namely:— Division of regulations into parts.

Part I.—General.
Part II.—Duties of Local Health Authority.
Part III.—Procedure on Petitions.
Part IV.—The Grant, Renewal, Revocation and Surrender of Certificates for Institutions and Houses for Defectives and of Approvals of Homes for Defectives.
Part V.—General Provisions as to Management of Institutions and Certified Houses.
Part VI.—Special Provisions as to Management of Certified Institutions.
Part VII.—Special Provisions as to Management of Certified Houses.
Part VIII.—Inspection of Institutions and Certified Houses and visitation of Patients therein.
Part IX.—Guardianship.
Part X.—Transfer of Patients from one Institution to another.
Part XI.—Transfer of Patient under Guardianship to an Institution or Certified House or to another Guardian or from an Institution or Certified House to Guardianship.
Part XII.—Absence of Patients from Institutions and Certified Houses.
Part XIII.—Miscellaneous.

Interpretation.

3.—(1) In these regulations, unless the context otherwise requires, the following expressions have the respective meanings hereby assigned to them:—

3 & 4 Geo. 5. c. 28.
17 & 18 Geo. 5. c. 33.
1 & 2 Geo. 6. c. 43.
9 & 10 Geo. 6. c. 81.

"the Act" means the Mental Deficiency Act, 1913, as amended by the National Health Service Act, 1946.

"the Acts" means the Mental Deficiency Acts, 1913 to 1938, as amended by the National Health Service Act, 1946.

"the Minister" means the Minister of Health;

"the Board" means the Board of Control;

"Commissioner" includes a Senior Commissioner and a Commissioner other than a Senior Commissioner;

"Inspector" means an Inspector of the Board;

"Visitors" means visitors of institutions for defectives;

"institution" and "certified institution" have the meanings assigned to them by subsection (1) of section 71 of the Act;

"state institution" means an institution vested in the Minister and designated by him for the reception of defectives of violent or dangerous propensities;

"committee of management" means:—

(*a*) in relation to an institution vested in the Minister, the hospital management committee appointed under section 11 of the National Health Service Act, 1946, and includes any sub-committee of such a hospital management committee to which any of the functions required by these regulations to be performed by a committee of management may have been delegated;

(*b*) in relation to a certified institution, the committee of management appointed in accordance with Regulation 50 of these regulations to manage the institution;

"private patient" means a patient maintained wholly or partly at the expense of some person other than the Minister or a local health authority;

"health service patient" means a patient other than a private patient;

"superintendent" in relation to a certified house or an approved home means the owner or other person residing in the house or home and having charge of the patients therein;

"medical practitioner" means a registered medical practitioner;

"responsible local health authority" means the local health authority, as defined in section 19 of the National Health Service Act, 1946, responsible for carrying out, in relation to defectives resident in their area, the duties imposed upon local health authorities by the Acts;

52 & 53 Vict. c. 63.

(2) The Interpretation Act, 1889 applies to the interpretation of these regulations as it applies to the interpretation of an Act of Parliament.

Penalties.

4. Except as otherwise provided in these regulations the maximum penalty to which a person who is guilty of a breach of any provision of these regulations shall be liable shall be a fine of £5.

Consents and licences.

5. Where under these regulations a consent or licence is required to be given in relation to any patient by the petitioner or person who placed the patient in an institution or under guardianship or the parent or guardian of the patient, then if the petitioner or other person is dead, or abroad, or cannot be found or is incapable of validly giving the consent or licence, the consent or licence may be given by the person who made the last payment on account of the patient's maintenance.

Records and notices.

6. Where under any provision of these regulations the duty of making entries in records or of sending notices is imposed on the superintendent, such duty may be performed by some other person duly authorised by him in that behalf.

Forms.

7. The forms set out in the Schedule to these regulations or forms substantially to the like effect shall be used in all cases to which those forms are applicable.

Revocation of existing regulations.

8. The following regulations are hereby revoked, the Mental Deficiency Regulations, 1935(**a**), the Mental Deficiency (Amendment) Regulations, 1940(**b**), the Mental Deficiency (Amendment) Regulations, 1944(**c**), and the National Health Service (Mental Deficiency) Amendment Regulations, 1947(**d**).

Part II

DUTIES OF LOCAL HEALTH AUTHORITY

Ascertainment of defectives.

9. For the purpose of ascertaining whether a person is a defective subject to be dealt with under the Acts, otherwise than under paragraph (a) of subsection (1) of section 2 of the Act, the local health authority shall have regard to his mental condition, behaviour and circumstances.

Agencies for carrying out ascertainment and supervision.

10.—(1) The local health authority shall perform their duties under paragraphs (a), (b) and (cc) of section 30 of the Act by means of either:—

(*a*) officers specially trained for the purpose; or

(*b*) members or officers of such societies for assisting or supervising defectives as are approved by the local health authority for the purpose; or

(*c*) such other trained persons as are approved by the local health authority for the purpose.

The power of approving societies or persons under this paragraph shall be subject to the provisions of any proposals approved by the Minister under section 20 of the National Health Service Act, 1946, and to such conditions, if any, as the Minister may prescribe.

(2) Every officer or other person employed by or acting on behalf of the local health authority in connection with any of the above-mentioned duties shall be furnished by the local health authority with evidence of his authority to act and shall, when required, produce that evidence.

(**a**) S.R. & O. 1935 (No. 524) p. 1015.
(**b**) S.R. & O. 1940 Noted, I, p. 530.
(**c**) S.R. & O. 1944 (No. 395) I, p. 456.
(**d**) S.R. & O. 1947 (No. 1359) I, p. 1371.

Conveyance to institution and provision of attendants.

11.—(1) Where a defective is ordered to be sent to an institution the local health authority for the area in which he resided shall provide for his conveyance to the institution and for his care and protection during removal.

(2) In the case of the removal of a female defective at least one attendant shall be a woman.

Reports.

12. The local health authority shall, not later than the thirtieth day of June in every year, make a report to the Minister for the year ending on the thirty-first day of December preceding, on the performance of their duties under the Acts.

PART III

PROCEDURE ON PETITIONS

Presentation of petition.

13. No person shall present a petition, unless he is at least 21 years of age and has, within 28 days before the presentation of the petition, personally seen the alleged defective.

Recommendation of person as guardian.

14. The local health authority shall not, without the consent of the Board, recommend to a judicial authority as a person suitable to undertake the duties of guardianship any person who already has charge of three defectives or of a person received under the Lunacy and Mental Treatment Acts, 1890 to 1930(a).

Dismissal of petition.

15.—(1) If a petition is dismissed, the judicial authority shall deliver to the petitioner a statement in writing of his reasons for dismissing the petition.

(2) If the petition was presented on behalf of a local health authority, they shall send a copy of such statement to the Board, but in all other cases a copy of the statement shall be sent to the Board by the judicial authority.

Presentation of further petition.

16. If, after a petition has been dismissed, another petition is presented with respect to the same person, the petitioner shall, if he has knowledge of the previous petition, obtain from the Board, and present with his petition, a copy of the statement referred to in the last preceding Regulation.

Information to be furnished by judicial authority.

17. Any judicial authority making or refusing to make an order, shall give to the Board such information, if any, as they may require in regard to the circumstances in which the order was made or refused.

Medical certificates and statutory declarations.

18.—(1) Every medical certificate accompanying a petition shall state the facts upon which the signatory has formed his opinion that the alleged defective is a defective within the meaning of section 1 of the Act, distinguishing facts observed by himself from facts communicated by others, and an order shall not be made upon a certificate which is not founded wholly or in part upon facts observed by the signatory.

(2) An order shall not be made unless each medical practitioner who signs a certificate has personally examined the alleged defective not more than 21 clear days before the date of the presentation of the petition.

(a) *See* 20 & 21 Geo. 5. c. 23. s. 22(1).

(3) Neither of the persons signing a certificate shall be the petitioner, or the husband or wife, father or father-in-law, mother or mother-in-law, son or son-in-law, daughter or daughter-in-law, brother or brother-in-law, sister or sister-in-law, partner, or assistant of the petitioner or the other signatory.

(4) An order shall not be made sending any defective to an institution or certified house or placing him under guardianship in any case in which a certificate or statutory declaration accompanying the petition was signed by any of the following persons:—

(*a*) the managers of any certified institution or the owner of any certified house, as the case may be, to which it is proposed to send the defective, or the person proposed to be appointed guardian;

(*b*) any person interested in payments on account of the defective's maintenance;

(*c*) the superintendent or any medical officer of any certified institution or certified house to which it is proposed to send the defective;

(*d*) the husband or wife, father or father-in-law, mother or mother-in-law, son or son-in-law, daughter or daughter-in-law, brother or brother-in-law, sister or sister-in-law, partner, or assistant of the foregoing persons.

(5) Where the person who joins with the petitioner in making the statutory declaration is not one of the persons who gave a medical certificate he or she shall not be the husband or wife, father or father-in-law, mother or mother-in-law, son or son-in-law, daughter or daughter-in-law, brother or brother-in-law, sister or sister-in-law, partner or assistant of the petitioner or of either of the persons who gave the medical certificates.

Authority for reception of patient.

19. The documents upon which an order is founded shall be attached to the order, and the order and documents shall be delivered or sent by post to the petitioner and shall be delivered by him or his agent to the superintendent of the institution or certified house into which the defective is to be received or to the person appointed to be his guardian.

Amendment of orders and other documents.

20.—(1) When a patient has been received under an order into an institution or certified house or under guardianship:—

(*a*) if the order or any document upon which the order was made is found to be in any respect incorrect or imperfect, it may, with the consent of the Board, be amended by the person who signed it within 28 days after the reception of the patient;

(*b*) if the Board deem the order or any document upon which the order was founded to be incorrect or imperfect they may require the order or document to be amended by the person who signed it and if the order or document is not amended to the satisfaction of the Board within 28 days after the reception of the patient the Board may, if they think fit, make an order for the patient's discharge.

(2) Every order and document so amended shall take effect as if the amendment had been contained therein when it was signed.

Hearing of petition.

21. No proceedings on a petition shall be conducted in a police court or other court or room normally used for the hearing of criminal charges.

PART IV

THE GRANT, RENEWAL, REVOCATION AND SURRENDER OF CERTIFICATES FOR INSTITUTIONS AND HOUSES FOR DEFECTIVES AND OF APPROVALS OF HOMES FOR DEFECTIVES

Application for certificate or approval. Forms A1, C1 and C4.

22. An application for the grant of a certificate in respect of an institution or house or of approval of premises as an approved home shall be made on the appropriate form and sent to the Minister accompanied by the following documents:—

(*a*) a general description of the property, together with a plan showing the site of the buildings and of the land occupied in connection therewith, distinguishing the parts of the buildings which are appropriated for the use of patients;

(*b*) a detailed description of the buildings and plans thereof drawn to a scale of 16 feet to 1 inch or to such other scale as the Minister may approve, showing the area, height, and proposed use of the rooms (distinguishing those to be occupied by the patients from those of the officers and servants), and the workshops, external offices and conveniences, and the baths, fire escapes, and the heating, lighting, ventilation and sanitary arrangements;

(*c*) a plan of the drains drawn to such a scale as the Minister may require, and a statement as to the mode of disposal of the sewage and as to the water supply;

(*d*) a statement of the number, ages and types of patients whom it is proposed to receive, and if of both sexes a statement of the number of either sex, and the arrangements for keeping the sexes apart;

(*e*) if the patients are to be limited to any particular type or class or age of defective or to defectives sent from any particular locality or belonging to any particular religious persuasion, information as to the limitations proposed;

(*f*) a statement of the name of the superintendent, of the grades of staff whom it is proposed to employ and the number in each grade and of the arrangements proposed for the medical care of the patients;

(*g*) a statement respecting the work upon which the patients are to be employed and the arrangements for affording them simple education, industrial training and recreation.

Revocation of certificate or approval.

23.—(1) The Minister, if dissatisfied with the condition or management of any certified institution, certified house or approved home may give notice to the managers or owner thereof that he proposes to consider the question of revoking the certificate or approval or of modifying the conditions upon which it was granted, and before arriving at a decision the Minister shall take into consideration any statement which the managers or owner may submit to him not later than 28 days after the date of the said notice.

(2) The Minister shall, as soon as may be, inform the managers or owner of his decision, and if he decides to revoke a certificate or approval or to modify any of its conditions the revocation or modification shall

take effect at such date, not being less than two months from the date on which the managers or owner are notified of the decision, as the Minister may determine.

(3) The Minister shall publish in the London Gazette notice of the revocation of any certificate or approval.

Surrender of certificate or approval.

24. The managers or owner may at any time surrender a certificate or approval as from such date as the Minister may approve.

Death of sole or surviving manager or owner.

25. If the sole or surviving manager or owner of any institution, house or home to whom a certificate or approval has been granted in respect of that institution, house or home dies, the Minister may permit his personal representatives for a period not exceeding three months to conduct the premises as a certified institution, certified house or approved home, as the case may be, on the terms and conditions of the certificate or approval applicable thereto, subject to such modifications, if any, as the Minister may think fit.

Application for renewal. Forms A.3, C3, and C6.

26. An application for the renewal of a certificate or approval shall be made on the appropriate form at least six weeks before the expiration of the certificate or approval and shall in the case of a certified house or approved home be accompanied by a statement signed by or on behalf of the applicant of the number of patients of either sex on the books at the time of application.

Alterations in premises or user thereof not to be made without consent of the Minister.

27.—(1) Before any alteration or addition is made in or to any certified institution, certified house or approved home, the managers or owner shall give to the Minister notice in writing, accompanied by a detailed description of the proposed alteration or addition, and shall not carry out the proposal without the previous consent of the Minister.

(2) If the Minister so requests, he shall be furnished with plans of the proposed alteration or addition drawn to a scale of 16 feet to 1 inch or to such other scale as he may approve.

(3) The use of any part of the premises for a purpose different from that authorised by the certificate or approval shall be deemed to be an alteration within the meaning of this Regulation.

Powers to continue after expiration or revocation of certificate or approval.

28. The powers of the Board and of the Visitors with reference to any certified institution or certified house and the patients therein and the powers of the Board with reference to any approved home and the patients therein and all powers and provisions of the Acts and any regulations made thereunder relating to the discharge, removal and transfer of patients, shall, notwithstanding the expiration or revocation of a certificate or approval, continue in force so long as any patients remain in the premises.

Patients not to be received beyond number authorised.

29.—(1) The managers or owner of a certified institution, certified house or approved home shall not, without the previous consent of the Minister, receive into the institution, house or home any patient beyond the number specified in the certificate or approval.

(2) The maximum penalty for a breach of this Regulation shall be a fine of £50.

Fees.

30. The fee payable to the Minister by the managers or owner of a certified house or approved home upon the grant, whether in the first instance or by way of renewal, of a certificate or approval shall be the sum of £5, with an additional sum of 10s. for every patient beyond the number of ten for whom accommodation is or is proposed to be provided:

Provided that:

(i) The Minister may remit the whole or any part of the fee in respect of the approval of a home, if in any particular case he thinks fit so to do; and

(ii) if the period for which the certificate or approval is granted is less than twelve months, the Minister may reduce the amount of the fee.

PART V

GENERAL PROVISIONS AS TO MANAGEMENT OF INSTITUTIONS AND CERTIFIED HOUSES

Classification of patients.

31. The patients in an institution or certified house shall be classified generally according to their age, sex, capabilities, habits and behaviour.

Males not to be employed in personal custody of females.

32.—(1) No male person in an institution or certified house shall be employed in the personal custody or restraint of any female patient: Provided that nothing in this Regulation contained shall be deemed to prohibit the employment of male persons on such occasions of urgency as may in the judgment of the superintendent render such employment necessary, but the superintendent shall in each such case report the employment to the Commissioner, Inspector or Visitor next visiting the premises.

(2) The maximum penalty for a breach of this Regulation shall be a fine of £20.

Mechanical means of restraint.

33.—(1) Mechanical means of bodily restraint shall not be applied to any patient in an institution or certified house, unless the restraint is necessary for the purposes of surgical or medical treatment, or to prevent the patient from injuring himself or others.

(2) In every case where such restraint is applied a medical certificate shall be obtained, as soon as may be, describing the mechanical means used, and stating the grounds upon which the restraint was employed.

(3) The certificate shall be signed by the superintendent of the institution or certified house if he is a medical practitioner, and if he is not by the medical officer thereof.

(4) A full record of every case of restraint by mechanical means shall be kept from day to day in the register of mechanical restraint and seclusion kept under Regulation 36 of these regulations and the superintendent shall, at the end of each quarter, send to the Board copies of all entries relating to mechanical restraint made during the quarter in the said register.

Form R.9.

(5) In this Regulation " mechanical means " means such instruments and appliances as are specified in the regulations made by the Board on

the 7th day of January, 1925(a), under section 40 of the Lunacy Act, 1890 or in such other regulations under that section as may from time to time be in force.

(6) Any person who wilfully acts in contravention of this Regulation shall be guilty of a misdemeanour.

Seclusion.

34.—(1) The total number of hours during which a patient is kept in seclusion shall be recorded every week in the register of mechanical restraint and seclusion.

(2) For the purposes of this Regulation a patient shall be deemed to be kept in seclusion, if at any time between the period commencing at 8 a.m. and ending at 7 p.m. he is isolated in a room the door of which is fastened or held so that he is unable to leave the room at will, but not if he is isolated in a room in which the lower half of the door is so fastened or held but the upper half is left open.

Corporal punishment.

35. In no case shall corporal punishment be administered to any patient.

Records.

36.—(1) There shall be kept in every institution and certified house:—

Form R.8.

(*a*) a general register;

(*b*) an alphabetical register (which may, if desired, be kept by means of a card index);

(*c*) a patient's record in book or loose leaf form;

(*d*) a visitors' book and a patients' book in which minutes by members of the committee of management and by the Visitors and other persons visiting patients shall be entered, minutes mentioning patients by name being entered only in the patients' book;

Form R.9.

(*e*) a register of mechanical restraint and seclusion;

(*f*) if the Board so direct, a casualty book and caution cards.

(2) There shall be kept in every institution and certified house in which a medical officer is not resident a diary in which the visiting medical officer shall at each routine visit enter a minute of the welfare of the patients as a whole and of any exceptional circumstances with regard to any of them.

Entries in general register.

37. The superintendent of an institution or certified house shall, immediately on the reception of a patient, make the appropriate entries with respect to the patient in the general register, and the medical officer shall within 7 days after the reception of the patient make the entries as to mental condition.

Entries on patient's record.

38.—(1) Immediately after a patient has been examined upon admission to an institution or certified house there shall be entered on his record the following particulars:—

(*a*) name, date of admission, age, sex, occupation, civil state, whether subject to epilepsy, whether of the private or health service class, and of what religious persuasion;

(*b*) a record of a complete examination of the patient, special note being made of the presence or absence of bruises or other injuries, his height and weight and the colour of hair and eyes, and any distinguishing marks or scars;

(*c*) a statement of the mental condition of the patient.

(a) S.R. & O. 1925 (No. 76) p. 1036.

(2) The following additional particulars shall be obtained as soon as possible and entered on the record:—

(*a*) the family history of the patient, special attention being directed to the presence or absence of mental or nervous disorder in the relatives;

(*b*) the personal history of the patient.

(3) Subsequent entries describing the progress of the patient and recording the medical and other treatment given shall be made on the record at least twice a year and one of these entries shall contain the result of a physical examination.

All special circumstances affecting a patient, including any special form of treatment given, and the results of bacteriological or other investigations made, shall be recorded in the patient's record.

(4) Entries which are of a purely medical character shall be made by a member of the medical staff but other entries may be made by the superintendent.

Form R.7. (5) In the event of the death of any patient, a copy of the death notice and statement shall be attached to, or entered on, the patient's record.

Entry of transfer, discharge or death.

39. The superintendent of an institution or certified house shall within 2 days after the transfer, discharge or death or the transfer of any patient from the private to the health service class, or vice versa, make an entry of the fact in the general register.

Notices and copies of reports.

40.—(1) The superintendent of an institution or certified house shall send to the Board the following written notices and copies of reports:—

(*a*) within 7 days thereafter, notice of the appointment, resignation or death of any medical officer;

(*b*) within 2 days thereafter, notice of the dismissal or resignation to escape dismissal for misconduct in connection with a patient of any officer or servant and such notice shall state the circumstances giving rise to the dismissal or resignation;

Form R.1. (*c*) within 7 days thereafter, notice of the admission of a patient, accompanied by a medical statement to be made and signed by the medical officer, copies of the order under which the patient was received and of the documents on which the order was founded, or, if the patient was received without order, copies of the authority of and the statement by his parent or guardian and of the relative certificates;

Forms P.3, P.5. and P.10.

(*d*) within 48 hours thereafter, notice of the admission of any persons not dealt with under the Acts;

(*e*) immediate notice of any patient's mental condition becoming such that he ought to be transferred to an institution for persons of unsound mind;

Forms R.3, R4, R.5 and R.6.

(*f*) within 2 days thereafter, notice of the transfer, discharge, escape or recapture of a patient;

(*g*) within 2 days after entry, copies of every entry made in the visitors' book, or the patients' book by any Commissioner, Inspector or Visitor;

(*h*) if required by the Board, copies of all the entries, or of any particular entry, in any official book relative to a patient who is, or has been, resident;

(*i*) not more than 2 months nor less than 14 days before the expiration of the order or authority under which a patient is detained, the special reports and certificates required under sections 11 and 12 of the Act for the continuance of the order or authority and any report that may have been made under either of those sections by a medical practitioner at the request of the patient or the parent or guardian or any relative or friend of the patient.

(2) The superintendent of an institution or certified house shall, where weekly returns are not required by the Minister, send to him immediate notice of any infectious disease and its nature and, where weekly returns are required by the Minister, immediate notice of any outbreak of any infectious disease of exceptional severity or unusual character.

(3) The superintendent of an institution or certified house shall, if so required by the Minister, furnish him with copies of all entries or of any particular entry in any official book relative to a patient who is, or has been, resident.

(4) The committee of management of an institution and the owner of a certified house shall send to the Minister notice of the appointment, resignation or death of the superintendent within 7 days thereafter.

Notice of death.

Form R.7.

41.—(1) The superintendent of an institution or certified house shall before the expiration of the second day after the day of the death of a patient send on the appropriate form notice thereof and a statement of particulars relating thereto which statement shall be signed by the medical officer or other medical practitioner who attended the patient:—

(*a*) to the coroner of the district;

(*b*) to the Board;

(*c*) to the registrar of deaths for the district;

(*d*) in the case of a health service patient, to the local health authority from whose area the patient was admitted and, in the case of such a patient received into a certified institution in pursuance of a contract with a Regional Hospital Board, to that Board;

(*e*) in the case of a private patient, to the person who made the last payment on account of the patient;

(*f*) in the case of a patient in a certified house, to the clerk to the Visitors.

(2) The superintendent shall also notify the occurrence of the death and send written intimation that a certificate has been signed, to the relative or one of the relatives named in the statement of particulars accompanying the order or authority for detention of the patient or, if none is so named, to the person named for the purpose in such statement.

(3) The notice required under paragraph (1) to be sent to the Board shall be accompanied by a copy of any letter written or a written summary of any verbal report made by the superintendent to the coroner concerning the death.

(4) In any case in which mechanical restraint was applied within 7 days before the death of the patient particulars of its character and duration shall be given in the statement of particulars relating to the death.

Notice of transfer, discharge, etc.

42. Immediately upon the transfer, discharge, escape or recapture of any patient the superintendent of an institution or certified house shall send notice thereof to such of the authorities and persons specified in sub-paragraphs (*d*) to (*f*) of paragraph (1) and in paragraph (2) of the last preceding Regulation as may be appropriate to the circumstances of the case.

Quarterly returns to Visitors.

43.—(1) The superintendent of an institution or certified house shall at the beginning of each quarter send to the Visitors:—

(*a*) a list of the names and particulars of the patients on the books of the institution or house who will attain the age of 21 years during that quarter; and

(*b*) a list of the names and particulars of the patients on the books of the institution or house whose cases will during the quarter require consideration under section 11 or 12 of the Act otherwise than by reason of their attaining the age of 21 years.

(2) The superintendent shall also send notice to the Visitors immediately after the admission of any patient who is admitted after the quarterly notice and in regard to whom the Visitors will have statutory duties to perform during the current quarter.

(3) A notice to the Visitors under paragraph (1) shall contain the names and addresses of the persons to whom, under Regulation 101 of these regulations, the Visitors are required to give notice of their intention to reconsider the case.

Correspondence.

44.—(1) The superintendent of an institution or certified house shall forward unopened all letters written by any patient and addressed:—

(*a*) to the Lord Chancellor or to any Judge in Lunacy;

(*b*) to the Minister;

(*c*) to the Board or any Commissioner;

(*d*) to the person who placed him in the institution or certified house or on whose petition an order for his admission was made;

(*e*) to the Chancery Visitors or to any Chancery Visitor or to the Visitors or any Visitor; or

(*f*) in the case of an institution to the committee of management or to any member of such committee.

(2) The superintendent may also at his discretion forward to its address any other letter written by a patient.

(3) The maximum penalty for a breach of this Regulation shall be a fine of £20.

Power of superintendent to limit correspondence.

45.—(1) Patients shall be allowed to write letters at reasonable intervals, but, except as hereinbefore provided, every letter to or from a patient may be read by the superintendent, and if the contents are objectionable or if the superintendent considers it undesirable that intercourse should be maintained between the patient and the person to whom the letter is addressed or from whom it is received, it shall not be forwarded or delivered.

(2) No patient shall be permitted to sign any legal document without the knowledge of the superintendent.

Notices to be exhibited.

46.—(1) Wherever the Board so direct, there shall be posted up in every institution and certified house printed notices setting forth:—

(*a*) the conditions prescribed by Regulations 44 and 45 (1) in regard to the forwarding and delivery of the letters of patients;

(*b*) the right of every patient to request a personal and private interview with a Commissioner, Inspector or Visitor at any visit he may make to the institution or certified house.

(2) The notices shall be posted in such a position that every patient is able to see them, and the visiting Commissioners or Inspectors may give directions as to the places in which such notices are to be posted.

(3) If any superintendent makes default in posting such notices or does not within ten days carry out any directions given as aforesaid, he shall for each offence be liable to a fine not exceeding £20.

Visits

47.—(1) Subject to the provisions of section 18 of the Act, visits to a patient may be paid at such times as the superintendent may direct, but the interval between any two visits by the nearest adult relative or guardian of a patient shall not be fixed at more than one month, and the special consent of the superintendent shall be obtained before any patient is visited by any person in connection with business transactions.

(2) If there is reasonable ground for suspecting that any person visiting a patient is exercising a bad influence on him or encouraging him to break the rules or any special directions given by the superintendent, he may be removed from the premises.

(3) The superintendent may report the circumstances of any such removal to the Board, and if the Board on any such report consider that further visits by the person so removed would be contrary to the interests of the patient, they may suspend the person's right to visit the patient.

Power for Board to permit visits.

48.—(1) The Board may at any time grant permission in writing for the admission of any person to visit a patient either on a single occasion or for a limited number of times or generally at all reasonable times and with or without restriction as to the presence of an attendant or otherwise.

(2) If the superintendent refuses, prevents or obstructs the admission of any person duly authorised by the Board to visit a patient he shall for every offence be liable to a fine not exceeding £20.

Visitation by members of Committee.

49.—(1) Not less than 2 members of the committee of management of an institution shall regularly visit and inspect the institution and see each patient therein, giving him, as far as possible, an opportunity of speaking to them.

(2) They shall have submitted to them the documents authorising the detention of every patient admitted since the last visitation as well as the general books kept in the institution.

(3) They shall enter in the visitors' book or other book kept for that purpose any remarks that they think proper with regard to the condition and management of the institution and in the patients' book any similar remarks with regard to the patients, and shall sign both books upon every visit.

PART VI

SPECIAL PROVISIONS AS TO MANAGEMENT OF CERTIFIED INSTITUTIONS

Committee of Management.

50. The managers shall manage the certified institution through a committee of management appointed by them consisting of such number of members being not less than seven, as the Minister may approve.

Superintendent and medical officer.

51.—(1) The managers shall appoint a person to be superintendent of the certified institution, and it shall be a term of his appointment that he shall reside in or in the immediate vicinity thereof.

(2) If the superintendent is not a medical practitioner, the managers shall appoint a medical officer but the Minister may at any time direct that from such date as he may fix, a medical practitioner shall be appointed as superintendent.

(3) It shall be a term of the appointment of any medical officer who is not resident in or in the immediate vicinity of the institution that he shall visit the institution at least once in each week or at such intervals as the Minister may direct.

(4) The superintendent shall be the chief officer of the institution, and he shall be responsible for the general management thereof in accordance with any directions which may be given by the committee of management. The superintendent may for reasons which appear to him sufficient suspend any member of the staff and shall forthwith report such suspension, together with the cause thereof, to the committee of management.

Rules.

52.—(1) The committee of management of a certified institution shall within six months after the certification of the institution prepare and submit to the Minister rules for the government of the institution, and such rules, when approved by the Minister, shall be printed and observed.

(2) The rules may from time to time be altered with the approval of the Minister.

(3) The superintendent of the certified institution shall give such information as the Minister, the Board or any Commissioner or Inspector may at any time require as to the manner in which the rules are carried out, and shall furnish to the Minister or the Board, at such times and in such form as he or they may from time to time direct, such annual and other returns and information relating to the certified institution, or the patients therein, as the Minister or the Board may require.

Religious services and instruction.

53. The committee of management of every certified institution shall make such arrangements as may be approved by the Minister for the holding of religious services and for securing as far as practicable that religious services shall be held for, and religious instruction given to, the patients according to their religious persuasions.

Accounts.

54.—(1) The accounts of every certified institution shall be audited once a year by an auditor to be approved by the Minister.

(2) The Minister may, if he thinks fit, direct the form in which the accounts shall be kept, and the day of the year to which they are to be made up.

(3) The committee of management shall, within one month after the accounts have been audited, send to the Minister an abstract of the accounts in such form as he may direct.

Part VII

SPECIAL PROVISIONS AS TO MANAGEMENT OF CERTIFIED HOUSES

Visits by medical practitioner.

55.—(1) In every house which is certified for the accommodation of one hundred patients or more, the superintendent, if the Minister so direct, shall be a medical practitioner.

(2) Every house which is certified for the accommodation of more than fifty patients not having a resident medical officer shall be visited by a medical practitioner daily or at such longer intervals as the Minister may direct.

(3) Every house which is certified for the accommodation of fifty or less than fifty patients not having a resident medical officer shall be visited by a medical practitioner twice a week or at such longer intervals as the Minister may direct.

(4) The Minister may direct that any certified house shall be visited by a medical practitioner at any time.

Records.

56. In addition to the records required by Part V of these regulations to be kept in a certified house, there shall be kept by the superintendent in every certified house lists of the patients for the time being on the books of the house, with the rates of payment made for their maintenance, care and treatment, and such lists shall be at all times accessible to the Commissioners, Inspectors and Visitors visiting the house.

Rules.

57.—(1) The superintendent of a certified house shall within six months after the certification of the house prepare and submit to the Minister rules for the government of the house, and such rules, when approved by the Minister, shall be printed and observed.

(2) The rules may from time to time be altered with the approval of the Minister.

(3) The superintendent of the certified house shall give such information as the Minister, the Board or any Commissioner or Inspector may at any time require as to the manner in which the rules are carried out, and shall furnish to the Minister or the Board, at such times and in such form as he or they may from time to time direct, such annual and other returns and information relating to the house, or the patients therein, as the Minister or the Board may require.

Religious services and instruction.

58. The superintendent of every certified house shall make such arrangements as may be approved by the Minister for the holding of religious services and for securing so far as is practicable that religious services shall be held for, and religious instruction given to, the patients according to their religious persuasions.

Plan to be exhibited.

59. In every certified house a copy of the plan showing the allocation of the accommodation approved by the Minister shall at all times be exhibited in some prominent position.

Part VIII

INSPECTION OF INSTITUTIONS AND CERTIFIED HOUSES AND VISITATION OF PATIENTS THEREIN

Visitation by Commissioners, etc.

60.—(1) Every institution and certified house may at any time, by day or night, be visited by any one or more of the Commissioners or Inspectors.

(2) The visits of the Commissioners and Inspectors shall, unless there is reason to the contrary, be made without previous notice.

Duty of Visitors to visit.

61. The Visitors shall visit an institution as often as may be necessary for the due performance of their duties under sections 11 and 12 (2) of the Act, and shall record, by entries in the visitors' and patients' books, the duties which they perform.

Visitors' right of inspection, etc.

62.—(1) Any one or more of the Visitors may visit a certified house at any time, by day or night, as he or they think necessary.

(2) Every certified house in respect of which the Board so direct, shall be visited six times a year, of which visits not less than four shall be paid by at least two of the Visitors, of whom one shall be a medical practitioner.

(3) The Visitors or Visitor shall, at every visit to a certified house which they or he are required under the last preceding paragraph to make, and may, at any other visit, do all or any of the following things:—

(*a*) inspect every part of the buildings and grounds which constitute the certified house;

(*b*) see every patient, and inquire whether he is under restraint and, if so why;

(*c*) consider the observations made in the visitors' book and the patients' book;

(*d*) enter in the visitors' book a minute of the condition of the house, of the patients therein, and the number of patients who have been restrained or secluded, with the reasons for such restraint or seclusion;

(*e*) inquire:—

(i) when divine service is held, and what average number of patients attend;

(ii) what occupations and recreations are provided for the patients;

(iii) how the patients are classified, trained, educated and employed;

(iv) as to the diet and clothing of the patients;

(v) as to the moneys paid to the managers on account of any patient under their care;

(vi) as to such other matters as may in their or his opinion require investigation.

Right of members of Regional Hospital Board to visit.

63. During the continuance of a contract made by a Regional Hospital Board with the managers of any certified institution for the reception therein of patients, members of the Regional Hospital Board or one or more of their officers may visit the institution and see and examine the patients received under the contract.

Entries in patients' book.

64. Any visitor may at any visit enter in the patients' book observations as to the state of mind or body of any patient, and any other observations that he may desire to make.

Information to be supplied to visiting Commissioners, etc.

65. The superintendent of a certified house shall lay before every visiting Commissioner, Inspector or Visitor, at each visit:—

(*a*) a list of all the patients on the books of the house (distinguishing males from females);

(*b*) the several books required by these regulations to be kept;

(*c*) the certificate then in force for the house;

(*d*) such other orders, certificates, documents, and papers relating to any of the patients at any time received into the house as the visiting Commissioner, Inspector or Visitor may require;

(*e*) such other information as the visiting Commissioner, Inspector or Visitor may require.

PART IX

GUARDIANSHIP

Powers and duties of guardians.

66.—(1) A person appointed to be a guardian shall, in exercising any powers conferred on him by the Act or these regulations, be subject to the direction of the Board.

Form R.10.

(2) The guardian shall keep in the house a Guardianship Book.

(3) Except in the case of a patient who has been placed under the guardianship of an officer of the local health authority or in such other cases as the Board may permit, the patient shall reside with the guardian.

Residence of patient.

(4) The guardian may change his residence and remove the patient with him to any new residence in England or Wales, but before any such removal is effected the guardian shall give seven days' previous notice in writing of his intention and of the new address:—

(*a*) to the Board;

(*b*) in the case of a patient (other than a private patient), admitted under order, to the responsible local health authority and to the relative or one of the relatives named in the statement of particulars accompanying the order;

(*c*) in the case of a patient placed under guardianship under section 3 of the Act towards whose expenses of guardianship a local health authority are contributing, to that local health authority and to the parent or guardian;

(*d*) in the case of a private patient admitted under order, to the person who made the last payment on account of the patient;

(*e*) in the case of a patient placed under guardianship under section 3 of the Act towards whose expenses of guardianship a local health authority are not contributing, to the parent or guardian.

Corporal punishment.

67. In no case shall corporal punishment be administered to a patient under guardianship.

Mechanical means of restraint.

68.—(1) Mechanical means of bodily restraint shall not be applied to any patient, unless the restraint is necessary for the purposes of surgical or medical treatment, or to prevent the patient from injuring himself or others.

(2) In every case where such restraint is applied the guardian shall enter in the appropriate column in the Guardianship Book the date and form of the application of restraint and shall obtain, as soon as possible, from a medical officer of the local health authority for the area in which the guardian is resident, a report describing the mechanical means used and stating the grounds upon which the restraint was employed. Such report shall be entered by the said medical officer in the Guardianship Book in the column headed "Medical and Progress Reports". In the case of a private patient the report shall be obtained from the medical attendant of the patient and entered in like manner by him.

Form R.10.

(3) The guardian shall, at the end of each quarter, send to the Board copies of all entries of mechanical restraint made during the quarter in the Guardianship Book.

(4) In this Regulation " mechanical means " means such instruments and appliances as are specified in the regulations made by the Board on the 7th day of January, 1925(a), under section 40 of the Lunacy Act, 1890, or in such other regulation under that section as may from time to time be in force. The local health authority shall, in the case of a patient for whose guardianship they are responsible for making provision, furnish the guardian with a copy of any such regulation for the time being in force.

(5) The maximum penalty for a breach of this Regulation shall be a fine of £50.

Care of patient.

69. The guardian shall provide, according to the means available, for the education, training, occupation and recreation of the patient and shall ensure that in these respects everything practicable is done for the improvement of his mental and physical condition.

Leave of absence to patient.

70.—(1) The guardian may, with the previous licence in writing of the responsible local health authority, if any, and of the petitioner, not being an officer of the local health authority, or, if the patient was placed under guardianship without order, of the person who placed him under guardianship, take or send the patient under proper control to such place or places and for such period as may be specified in the licence or may grant leave of absence for a period not exceeding 14 days.

(2) Immediate notice of any such change of residence shall be given to the Board by the guardian.

Notice of reception and medical statement. Form R.1.

71. The guardian shall within 7 days after the reception of a patient into his guardianship send to the Board notice thereof together with a medical statement to be made and signed, when the patient has been received under an order, by the medical officer of the responsible local health authority or by a medical practitioner appointed by them, and when received without order, by a medical practitioner, together with copies of the order and documents or of the statement and certificates on which the patient was received:

Provided that if one of the certificates was given by the medical officer of the responsible local health authority, the notice need not be accompanied by a medical statement but the guardian shall send to the Board within three months after the patient's reception a statement showing the result of a complete physical and mental examination of the patient by the medical officer of the responsible local health authority or by a medical practitioner appointed by them.

Transfer, discharge, etc. of patients.

72. The guardian shall within 24 hours after the transfer, discharge, escape, or recapture of a patient give written notice thereof to the Board and to such of the authorities and persons specified in sub-paragraphs (*b*) to (*e*) of paragraph (4) of Regulation 66, as may be appropriate to the circumstances of the case.

Notice of death. Form R.7.

73.—(1) The guardian shall before the expiration of the second day after the day of the death of any patient send on the appropriate form notice thereof and a statement of particulars relating thereto (which statement shall be signed by the patient's medical attendant):—

(*a*) to the coroner of the district;

(*b*) to the Board;

(*c*) to the registrar of deaths for the district;

(a) S.R. & O. 1925 (No. 76) p. 1036.

(*d*) to such of the authorities and persons specified in sub-paragraphs (*b*) to (*e*) of paragraph (4) of Regulation 66 as may be appropriate to the circumstances of the case and to the person named in the statement of particulars accompanying the order or authority for the patient's detention as the person to whom notice of death is to be sent.

(2) The notice required under paragraph (1) to be sent to the Board shall be accompanied by a copy of any letter written or a written summary of any verbal report made to the coroner concerning the death.

(3) In any case in which mechanical restraint was applied within 7 days before the death of the patient particulars of its character and duration shall be given in the statement of particulars relating to the death.

Reports.

74. The guardian shall make such reports and give such information to the Minister or the Board in reference to the patient as he or they may from time to time require.

Medical and dental services.

75. The local health authority in the case of a patient for whom they are responsible and in any other case the guardian shall make arrangements for securing the provision of personal medical and dental services for the patient whether under Part IV of the National Health Service Act, 1946, or otherwise.

Visitation on behalf of responsible Local Health Authority. Form R.10.

76. The local health authority shall cause every patient for whom they are responsible to be visited in the following manner:—

(1) At least once in each year by a medical practitioner with experience in mental deficiency who shall at each visit enter in the Guardianship Book particulars of the mental and physical condition of the patient and any other observations that he may think necessary.

(2) At such intervals as the authority may decide but in any case at intervals of not more than six months by their officers or other approved persons (other than the medical practitioner referred to in the preceding paragraph) who shall enter in the Guardianship Book particulars as to the patient's progress, circumstances and care.

(3) At every visit the medical practitioner, officer or person visiting under this Regulation shall sign and date his entry.

(4) Where the patient is resident in the area of a local health authority other than the responsible local health authority the obligations of the responsible local health authority under this and the preceding Regulation may, by arrangement between the two local health authorities, be discharged by the other local health authority.

Resignation of guardian.

77. A guardian who wishes to resign his appointment shall give previous notice in writing of his intention to the Board and to the responsible local health authority, if any, and to the petitioner, not being an officer of the local health authority, or, in the case of a patient placed under guardianship without order, to the parent or guardian who placed the patient or to the person who made the last payment on account of the patient's maintenance.

Patient unsuitable for guardianship.

78. If the patient is or becomes unsuitable for guardianship, the guardian shall give immediate notice of the circumstances in writing to the Board and to the responsible local health authority, if any, and to the petitioner, not being an officer of the local health authority, or,

in the case of a patient placed under guardianship without order, to the parent or guardian who placed the patient or to the person who made the last payment on account of the patient's maintenance.

Visitation of patients by Commissioners and Inspectors.

79.—(1) Every dwelling in which there is a patient under guardianship may at any time, by day or night, be visited by any one or more of the Commissioners or Inspectors.

(2) The visits of the Commissioners and Inspectors shall, unless there is reason to the contrary, be made without previous notice.

80. The guardian shall lay before the visiting Commissioners or Inspectors at each visit:—

(*a*) the Guardianship Book;

(*b*) all documents relating to the patient;

(*c*) all unforwarded letters written by and all undelivered letters written to the patient.

Duty of Visitors to visit.

81.—(1) The Visitors shall visit the patient as often as may be necessary for the due performance of their duties under sections 11 and 12 (2) of the Act, and shall sign the Guardianship Book at each visit.

(2) Any one or more of the Visitors shall, upon the request in writing of the Board, visit any patient.

Correspondence.

82.—(1) The guardian shall forward or cause to be forwarded unopened all letters written by the patient and addressed:—

(*a*) to the Lord Chancellor or to any Judge in Lunacy;

(*b*) to the Minister;

(*c*) to the Board or any Commissioner;

(*d*) to the person who placed him under guardianship, or on whose petition an order for his reception was made;

(*e*) to the Chancery Visitors or to any Chancery Visitor or to the Visitors or any Visitor; or

(*f*) to the responsible local health authority, if any, or to any member of that authority.

(2) The guardian may also at his discretion forward to its address any other letter written by the patient.

Power of guardian to limit correspondence.

83.—(1) Patients shall be allowed to write letters at reasonable intervals, but, except as hereinbefore provided, every letter to or from a patient may be read by his guardian, and if the contents are objectionable or if the guardian considers it undesirable that intercourse should be maintained between the patient and the person to whom the letter is addressed or from whom it is received it shall not be forwarded or delivered but shall be retained for a period of twelve months and produced at any time during that period on request to any Commissioner, Inspector or Visitor.

(2) No patient shall be permitted to sign any legal document without the knowledge of the guardian.

Visits.

84.—(1) Subject to the provisions of section 18 of the Act, visits to a patient may be paid at such intervals as the person in whose guardianship the patient is placed may direct but the interval between any two visits by the nearest adult relative or guardian of the patient shall not be fixed at more than one month, and the special consent of the

person in whose guardianship the patient is placed shall be obtained before the patient is visited by any person in connection with business transactions.

(2) If there is reasonable ground for suspecting that any person visiting a patient is exercising a bad influence on him, his right to visit may be suspended by the Board on the application of the guardian.

Power for Board to permit visits.

85.—(1) The Board may at any time grant permission in writing for the admission of any person to visit a patient either on a single occasion or for a limited number of times or generally at all reasonable times and with or without restriction as to the presence of an attendant or otherwise.

(2) If the person in whose guardianship the patient is placed or in whose care he is residing refuses, prevents or obstructs the admission of any person duly authorised by the Board to visit the patient, he shall for every offence be liable to a fine not exceeding £20.

Part X

TRANSFER OF PATIENTS FROM ONE INSTITUTION TO ANOTHER

Transfer by Board of Control.

86. The Board may by order direct the transfer of a patient who has been sent by order to an institution or a certified house to any other institution or certified house.

87. The Board may by order direct the transfer of a patient who has been placed in an institution or certified house without order to any other institution or certified house.

Transfer Regional Hospital Board.

88. A Regional Hospital Board may by order transfer any patient detained in an institution for defectives administered by them, whether by order or not, to any other such institution under their administration:

Provided that if the patient was placed in the institution without order, the transfer shall not be effected except on the application of the person who placed him in the institution or, in the absence of such application, unless the parent or guardian has been given an opportunity of making representations as to the proposed transfer.

Transfer to state institution.

89. The Board, if satisfied that a patient detained in an institution or certified house is of dangerous or violent propensities, may by order transfer him to a state institution.

Procedure.

90. The superintendent of the institution or house from which a patient is transferred shall:

(1) Provide a proper escort for the patient.

(2) Send forthwith to the superintendent of the institution or house to which the patient is thereupon admitted the order, certificates and other documents on which the patient was received.

Form R.1.

91. The notice of admission sent to the Board in the case of any such transfer shall be accompanied by a copy of the order of transfer (if not made by the Board) and by a statement with respect to the mental and physical condition of the patient.

PART XI

TRANSFER OF PATIENT UNDER GUARDIANSHIP TO AN INSTITUTION OR CERTIFIED HOUSE OR TO ANOTHER GUARDIAN OR FROM AN INSTITUTION OR CERTIFIED HOUSE TO GUARDIANSHIP

Transfer to institution or certified house.

92. When a patient who has been placed under guardianship by order is or becomes unsuitable for guardianship, the responsible local health authority, in default of application by the guardian, shall, unless the Board otherwise direct, apply to a judicial authority for an order that the patient be sent to an institution or certified house.

Change of guardian.

93. The responsible local health authority, in default of application by any other person shall, unless the Board otherwise direct, apply to a judicial authority for an order—

(*a*) for the removal of any guardian whose removal they consider expedient; and

(*b*) for the appointment of a suitable person in the place of a guardian who has been removed, has died or resigned or is about to resign his office.

94. When a patient who has been sent to an institution by order is or becomes suitable for guardianship, the committee of management of the institution shall notify the Board and the responsible local health authority to that effect.

PART XII

ABSENCE OF PATIENTS FROM INSTITUTIONS AND CERTIFIED HOUSES

Procedure on grant of licence to be absent.

95.—(1) (*a*) The superintendent of an institution (other than a state institution), with the concurrence of two members of the committee of management of the institution; or

(*b*) The superintendent of a certified house, with the concurrence of two of the Visitors; or

(*c*) The Board in the case of a state institution;

Form L.

may grant to a patient detained therein a licence to be absent from the institution or house for such period and subject to such conditions as to residence or otherwise as may be therein specified:

Provided that, in the case of a private patient, a licence shall not be granted without the consent of the person who made the last payment on account of the patient's maintenance unless, in the case of such a patient in a state institution, the Board, and in any other case the superintendent and the persons who concur with him in granting the licence are of opinion that there is adequate reason for dispensing with such consent.

(2) A patient who is on licence shall reside with the person named for that purpose in the licence, unless the person or body granting and the persons (if any) concurring in the grant of the licence otherwise permit.

(3) A licence granted under this regulation may at any time be revoked, in the case of a licence granted by the superintendent of an institution or certified house by the Board or by the superintendent who granted it, or by the Board in the case of a licence granted by the Board, and may be renewed by, and with the concurrence and consent of, the like persons as are authorised to grant a licence or are required to concur in and consent to the grant thereof.

Leave of absence without licence.

96. The superintendent of any institution or certified house may on his own authority and without issuing a licence grant permission in writing to a patient to be absent on leave for a period not exceeding 14 days subject to such conditions as may be specified in the permission, if he is satisfied as to the suitability of the place to which the patient will be taken and as to the means of care and control which will be available.

Powers on expiration of revocation of licence or permission.

97. On the expiry or revocation of any licence or permission granted or renewed under either of the last two preceding Regulations the patient may be brought back to the institution or house by the superintendent or any officer or other person authorised by him in writing.

98. No licence or leave of absence without licence shall, except with the consent of the Secretary of State, be granted to a patient who has been transferred under an order made by the Secretary of State under section nine of the Act from a prison or other institution to which the Prison Acts, 1865 to 1898, apply or from an approved school or criminal lunatic asylum in which he was detained to an institution for defectives so long as the term for which he was committed to the prison or other institution from which he was transferred remains unexpired.

Part XIII

MISCELLANEOUS

Procedure on consideration or reconsideration of cases of patients by Visitors.

99.—(1) The Visitors for the county or borough within which any patient is detained in an institution or certified house or under guardianship shall be informed by the superintendent or the responsible local health authority, as the case may require, of the date when the order or authority for detention will expire or the date at which the patient will attain the age of 21 years and shall arrange for the consideration or reconsideration of his case by not less than two of their number.

(2) Before making any decision, they shall consider a report as to the circumstances of the home of the patient and all matters relating to his previous history, present circumstances and present mental condition which it shall be the duty of the superintendent in the case of a patient in an institution or certified house, and of the responsible local health authority, in the case of a patient under guardianship, to supply.

100. If a patient is absent on leave or licence at the date when the order or authority for detention will expire or when he attains the age of 21 years he may be recalled for the purpose of the consideration or reconsideration of his case, or arrangements may be made for that purpose by the Visitors appointed for the county or borough within which he is temporarily residing.

Procedure on reconsideration of cases of patients attaining the age of 21 years.

101. The Visitors, before reconsidering the case of a patient on his attaining the age of 21 years, shall give not less than 14 days' notice of their intention so to do—

(*a*) in the case of a patient detained under order in an institution, to the responsible local health authority, to the petitioner, not being an officer of such local health authority, and to the parent or guardian;

(*b*) in the case of a patient detained under order in a certified house to the petitioner, to the parent or guardian and to the person who made the last payment on account of the patient;

(*c*) in the case of a patient detained under a guardianship order, to the responsible local health authority and to the petitioner, not being an officer of such local health authority, and to the parent or guardian;

(*d*) in the case of a patient detained in an institution, a certified house or under guardianship without order, to the parent or guardian and to the person, if any, who made the last payment on account of the patient;

and shall afford any such authority or person an opportunity of being heard or of making representations in writing with reference to the case.

Visitors to inform Board, etc. of their decision.

102. The Visitors shall communicate their decision on the case to the Board, and also to the superintendent or guardian, who shall thereupon give notice of the decision to the persons to whom notice of the reconsideration of the case is required to be sent and to the patient and, in the event of the Visitors deciding not to order the patient's discharge, the notices to the patient and his parent or guardian shall be accompanied by an intimation that an appeal may be made to the Board within 14 days of the receipt of such notice.

Time of examination for purpose of special reports and certificate.

103. The examination of the patient by the medical officer of an institution or certified house or by a medical practitioner and by the Visitors for the purposes of the special reports and certificate mentioned in subsection (4) of section 11 of the Act shall be made not more than two months before the date when the order or authority for detention will expire.

Procedure in cases of defectives charged with offences.

104. The forms G1 to G6 in the Schedule hereto or forms substantially to the like effect may be used for the purposes of section 8 of the Act.

Medical certificate and statement of particulars.

105. Where under section 3 of the Act a patient is placed in an institution or under guardianship by his parent or guardian, a statement in the form set out in form P10 in the Schedule hereto shall be signed by the parent or guardian, and the statement of particulars and medical certificates required by that section shall be in the forms P3 and P5 in the Schedule hereto or in forms substantially to the like effect.

Notice of the reception of a defective into private care. Form N.

106. Where a person undertakes the care and control of any person who is a defective, or who is placed under care as being a defective elsewhere than in an institution, a certified house or an approved home, the notice of reception to be sent to the local health authority and to the Board pursuant to section 51 (2) of the Act shall be in the form N in the Schedule hereto or in a form substantially to the like effect.

Powers and duties of local health authorities with respect to defectives who are dealt with under the Lunacy and Mental Treatment Acts, 1890–1930

107.—(1) The powers conferred and the obligations imposed upon local health authorities by section 30 of the Act shall apply to a defective detained in an institution for persons of unsound mind if the Board certify to the local health authority that, having regard to the needs of the defective in the matter of care, training and employment, it is expedient that he shall be dealt with under the Acts.

(2) Any defective so certified shall, on being sent to an institution for defectives or placed under guardianship pursuant to an order under the Acts, cease to be a patient dealt with under the Lunacy and Mental Treatment Acts, 1890-1930.

THE SCHEDULE

Form A1

APPLICATION FOR THE APPROVAL OF PREMISES AS AN APPROVED HOME

To the MINISTER OF HEALTH.

We [or I], being the managers [or owner] of the premises named below and intended for the reception, control, care, and treatment of defectives, hereby apply for the approval of the premises as an approved home under the Mental Deficiency Acts, 1913 to 1938.

Particulars

1. Address of the premises.
2. Whether (*a*) supported wholly or partly by voluntary contributions or by applying the excess of payments of some patients for or towards the support of other patients; or
   (*b*) conducted for private profit.
3. Names of the managers or owner.
4. Number of patients proposed to be received:—
   Males ... ...
   Females ... ...
5. Name of the superintendent and particulars of the proposed staff.

Dated the day of , 19 .

Signed .

N.B.—This form when filled up must be accompanied by the plans and other particulars specified in the regulations.

Form A2

APPROVAL OF PREMISES AS AN APPROVED HOME

Upon application made to him by , being the managers [or owner] of the premises known as at , in the of for approval of the said premises as an approved home, the Minister of Health, being satisfied of the fitness of the premises and of the applicant(s) hereby approves the said premises.

This approval shall have effect for months [or years] from this date, unless previously revoked, and is given subject to the provisions of any regulations made under the Mental Deficiency Act, 1913, and for the time being in force [and subject also to the following special conditions]—

Given under the official seal of the Minister of Health this day of , 19 .

(L.S.) Assistant Secretary, Ministry of Health.

	£	s.	d.
Fee paid			

Form A3

Application for Renewal of Approval of Premises as an Approved Home

To the Minister of Health.

We [or I], being the managers [or owner] of the approved home known as , hereby apply for the renewal of the approval of the said home.*

Dated the day of , 19 .

Signed .

Form C1

Application for Certificate in Respect of an Institution

To the Minister of Health.

We, being the managers of the premises named below and intended for the reception, control, care, and treatment of defectives, hereby apply for the grant to us of a certificate to receive defectives therein.

Particulars

1. Address of the premises.
2. Names of the managers.
3. Number of patients proposed to be received:—

   Males ... ...
   Females ... ...

4. Class or classes intended to be received:—

   Idiots;
   Imbeciles;
   Feeble minded;
   Moral defectives.

5. Limits of age.
6. To membership of what religious persuasion (if any) are patients to be limited?
7. Name of the superintendent and particulars of the proposed staff.

Dated the day of , 19 .

Signed .

N.B.—This form when filled up must be accompanied by the plans and other particulars specified in the regulations.

* If any variation in the terms of the approval is desired, add the words "with the following variations" and give particulars of the variations applied for.

Form C2

CERTIFICATE IN RESPECT OF AN INSTITUTION

Upon application made to him by , being the managers of the premises known as at in the of , for a certificate to receive defectives therein, the Minister of Health, being satisfied of the fitness of the premises and of the applicants, hereby grants a certificate to the applicants to receive in the said premises defectives, of whom not more than shall be males and not more than shall be females.

The class or classes of defectives authorised to be received are as follows:—

This certificate shall have effect for years from this date, unless previously revoked, and is given subject to the provisions of any regulations made under the Mental Deficiency Act, 1913, and for the time being in force [and subject also to the following special conditions—]

Given under the official seal of the Minister of Health this day of , 19 .

(L.S.)

Assistant Secretary,
Ministry of Health.

Form C3

APPLICATION FOR RENEWAL OF CERTIFICATE IN RESPECT OF INSTITUTION

To the MINISTER OF HEALTH.

We, being the managers of the certified institution known as hereby apply for the renewal of the certificate granted in respect of the said institution.*

Dated the day of , 19 .

Signed

Form C4

APPLICATION FOR A CERTIFICATE IN RESPECT OF A HOUSE

To the MINISTER OF HEALTH.

I [*or* We], being the owner(s) of the house named below, and being desirous of receiving defectives therein for private profit, hereby apply that a certificate may be granted to me [*or* us] to receive defectives therein.

Particulars

1. Address of the house.
2. Name(s) of the owner(s).

* If any variation in the terms of the certificate is desired add the words "with the following variations" and give particulars of the variations applied for.

3. Number of patients proposed to be received:—

Male

Female

4. Class or classes of defectives intended to be received:—

Idiots;

Imbeciles;

Feeble minded,

Moral defectives.

5. Limits of age.

6. To membership of what religious persuasion (if any) are patients to be limited?

7. Name of the superintendent and particulars of the proposed staff.

Dated the day of , 19 .

Signed .

N.B.—This form when filled up must be accompanied by the plans and other particulars specified in the regulations.

Form C5

CERTIFICATE IN RESPECT OF A HOUSE

Upon application made to him by the owner(s) of the house known as at in the of , for a certificate in respect of the said house, the Minister of Health, being satisfied of the fitness of the house and of the applicant(s), hereby grants a certificate to the applicant(s) to receive in the said house defectives, of whom not more than shall be males and not more than shall be females.

The class or classes of defectives authorised to be received in the said house are as follows:—

This certificate shall have effect for years from this date, unless previously revoked, and is given subject to the provisions of any regulations made under the Mental Deficiency Act, 1913, and for the time being in force [and subject also to the following special conditions—]

Given under the official seal of the Minister of Health this day of , 19 .

(L.S.)

Assistant Secretary, Ministry of Health.

£ s. d.

Fee paid ... ...

Form C6

APPLICATION FOR RENEWAL OF CERTIFICATE IN RESPECT OF A HOUSE

To the MINISTER OF HEALTH.

I [*or* We], being the owner(s) of the certified house known as , hereby apply for the renewal of the certificate granted in respect of the said house, and I [*or* we] attach a statement of the number of patients on the books at this date.

Dated the day of , 19 .

Signed .

Form D1

SPECIAL REPORT BY VISITORS UNDER SECTION 11 OF THE MENTAL DEFICIENCY ACT, 1913

Name of institution [*or* certified house *or* dwelling where the patient is residing under guardianship.]

No.*

Name of patient.

Date of birth.

Date of reception.

Date of order or authority for detention.

We [have this day] *or* [on the day of] examined the above-named patient, and hereby report that, having read the definitions on this form we have satisfied ourselves that he [*or* she] is a mental defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being(1)
that the means of care and supervision which would be available if he [*or* she] were discharged are
and that in our opinion he [*or* she] is still [*or* is not now](2) a proper person to be detained in his [*or* her] own interest in an institution [*or* a certified house *or* under guardianship.](3).

Dated the day of , 19 .

Signed .

Visitors of Institutions for Defectives under the Mental Deficiency Acts, 1913 to 1938, for the County [Borough] of

To the Board of Control.

[*Here set out S.1 of the Mental Deficiency Act*, 1913.]

* For use of Board of Control only.

(1)State whether an idiot, an imbecile, a feeble minded person *or* a moral defective [*see* definitions]

(2)To enable the Board to determine whether or not the Order or Authority for detention should be continued it is essential that these words should be adhered to.

(3)Delete inapplicable terms.

Form D2

SPECIAL REPORT AND CERTIFICATE BY MEDICAL OFFICER OR MEDICAL PRACTITIONER UNDER SECTION 11 OF THE MENTAL DEFICIENCY ACT, 1913

Name of institution [*or* certified house *or* dwelling where the patient is residing under guardianship.]

No.*

* For use of Board of Control only.

Name of patient.

Date of birth.

Date of reception.

Date of order or authority for detention.

I have this day examined the above-named patient and hereby report that, having read the definitions on this form I have satisfied myself that he [*or* she] is a mental defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being(1)

and that his [*or* her] bodily condition is as follows

and I hereby certify that he [*or* she] is still [*or* is not now](2) a proper person to be detained in his [*or* her] own interest in an institution [*or* a certified house *or* under guardianship.](3).

(1)State whether an idiot, an imbecile, a feeble minded person or a moral defective [*see* definitions] and also state facts observed at date of examination in support of classification.

(2)To enable the Board to determine whether or not the Order or Authority for detention should be continued it is essential that these words should be adhered to.

(3)Delete inapplicable terms.

Dated the day of , 19 .

Signed .

Medical Officer (or a medical practitioner).

To the Board of Control.

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

Form D3

ORDER BY BOARD OF CONTROL CONTINUING ORDER OR AUTHORITY FOR DETENTION

Name of institution [*or* certified house *or* dwelling where the patient is residing under guardianship.]

No.

Name of patient.

Date of reception.

Date of order or authority for detention.

The Board of Control, having considered the requisite reports and certificate with regard to the above-named patient, and the means of care and supervision which would be available for him [*or* her] if he [*or* she] were discharged, and being satisfied that the continuance of the above-mentioned order [*or* authority for detention] is required in his [*or* her] interest hereby order the same to be continued for one year [*or* five years] from the day of , 19 .

The Common Seal of the Board of Control was hereunto affixed this day of , 19 in the presence of—

Secretary.

Form G1

DETENTION ORDER IN CASE OF OFFENCE TRIABLE SUMMARILY

In the [*County of* *Petty Sessional Division of*].

Before the Court of Summary Jurisdiction sitting at the day of , 19 .

A.B., hereinafter called the defendant, is this day charged for that he, on the day of , 19 , at , within the aforesaid, did contrary to the Statute, &c.;

And the Court finds that the charge is proved;

And the Court, being satisfied on medical evidence that the defendant is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (an idiot) (an imbecile) (a feeble minded person) (a moral defective) hereby orders that the defendant (whose place of residence is at in the county (borough) of , and whose religious persuasion appears to be) be (sent to the { Institution / Certified House } at) (placed under the guardianship of).

J.P. (L.S.)
Justice of the Peace for the (County) aforesaid.
J.P. (L.S.)
Justice of the Peace for the (County) aforesaid.

N.B.—Where a local health authority will by virtue of the Mental Deficiency Acts, 1913 to 1938, become responsible for the expenses of a defective ordered to be placed under guardianship, the order must recite that that local health authority has been given an opportunity of being heard, and must find that the defective resides within the area of the local health authority.

Form G2

DETENTION ORDER IN CASE OF INDICTABLE OFFENCE

In the [*County of* *Petty Sessional Division of*].

Before the Court of Summary Jurisdiction sitting at the day of , 19 .

A.B., hereinafter called the defendant, is this day charged for that he, on the day of , 19 , at , within the aforesaid, did contrary to the Statute, &c.;

And the defendant having (consented to be dealt with summarily) (pleaded guilty to the said charge) the Court finds that the charge is proved;

And the Court, being satisfied on medical evidence that the defendant is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (an idiot) (an imbecile) (a feeble minded person) (a moral defective) hereby orders that the defendant (whose place of residence is at in the county (borough) of , and whose religious persuasion appears to be)

be (sent to the {Institution / Certified House} at)

(placed under the guardianship of

).

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

NOTE.—Where a local health authority will by virtue of the Mental Deficiency Acts, 1913 to 1938, become responsible for the expenses of a defective ordered to be placed under guardianship, the order must recite that that local health authority has been given an opportunity of being heard, and must find that the defective resides within the area of the local health authority.

Form G3

DETENTION ORDER IN CASE OF CHILD LIABLE TO BE SENT TO AN APPROVED SCHOOL

In the [*County of* *Petty Sessional Division of*

].

Before the Court of Summary Jurisdiction sitting at , the day of , 19 .

[Whereas (here insert the circumstances in which the child is subject to be dealt with under the Children and Young Persons Act, 1933)]:

The Court finds that the said child is liable to be sent to an approved school;

And the Court, being satisfied on medical evidence that the said child is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (an idiot) (an imbecile) (a feeble minded person) (a moral defective), hereby orders that the said child (whose place of residence is at in the county (borough) of , and whose religious persuasion appears to be)

be (sent to the {Institution / Certified House} at)

(placed under the guardianship of

).

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

NOTE.—Where a local health authority will by virtue of the Mental Deficiency Acts, 1913 to 1938, become responsible for the expenses of a defective ordered to be placed under guardianship, the order must recite that that local health authority has been given an opportunity of being heard, and must find that the defective resides within the area of the local health authority.

Form G4

Detention Order pending Presentation of Petition in case of Offence Triable Summarily

In the [*County of* *Petty Sessional Division of*].

Before the Court of Summary Jurisdiction sitting at , the day of , 19 .

A.B., hereinafter called the defendant, is this day charged for that he, on the day of , at , within the aforesaid, did contrary to the Statute, etc.;

And the Court (finds that the charge is proved) (convicts the defendant of the said offence);

And the Court, being satisfied on medical evidence that the defendant is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, (without proceeding to a conviction) (postpones passing sentence, and) directs that a petition be presented to a Judicial Authority under the said Act, with a view to obtaining an order that the defendant be sent to an institution or placed under guardianship;

And the Court orders the defendant to be detained in the Institution at or the Place of Safety at for such time not exceeding as is required for the presentation of the petition and the adjudication thereof.

J.P. (L.S.)
Justice of the Peace for the (County) aforesaid.

J.P. (L.S.)
Justice of the Peace for the (County) aforesaid.

Form G5

Detention Order pending Presentation of Petition in case of Indictable Offence

In the [*County of* *Petty Sessional Division of*].

Before the Court of Summary Jurisdiction sitting at , the day of , 19 .

A.B., hereinafter called the defendant, is this day charged for that he, on the day of , 19 , at , within the aforesaid, did contrary to the Statute, etc.;

And the defendant having (consented to be dealt with summarily) (pleaded guilty to the said charge) the Court (finds that the charge is proved) (convicts the defendant of the said offence);

And the Court, being satisfied on medical evidence that the defendant is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, (without proceeding to a conviction) (postpones passing sentence, and) directs that a petition be presented to a Judicial Authority under the said Act, with a view to obtaining an order that the defendant be sent to an institution or placed under guardianship.

And the Court orders the defendant to be detained in the Institution at or the Place of Safety at for such time not exceeding as is required for the presentation of the petition and the adjudication thereof.

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

Form G6

DETENTION ORDER PENDING PRESENTATION OF PETITION IN CASE OF CHILD LIABLE TO BE SENT TO AN APPROVED SCHOOL

In the [*County of* *Petty Sessional Division of*].

Before the Court of Summary Jurisdiction sitting at , the day of , 19 .

[Whereas (here insert the circumstances in which the child is subject to be dealt with under the Children and Young Persons Act, 1933)]:

The Court finds that the said child is liable to be sent to an approved school;

And the Court, being satisfied on medical evidence that the said child is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, postpones making an order for committal to an approved school, and directs that a petition be presented to a Judicial Authority under the said Act with a view to obtaining an order that the said child be sent to an institution or placed under guardianship;

And the Court orders the said child to be detained in the Institution at or the Place of Safety at for such time not exceeding as is required for the presentation of the petition and the adjudication thereof.

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

J.P. (L.S.)

Justice of the Peace for the (County) aforesaid.

Form L

LICENCE FOR A PATIENT TO BE ABSENT FROM AN INSTITUTION OR CERTIFIED HOUSE

Name of Institution [*or* Certified House].

Name of patient.

To

I, having received the necessary consents, hereby, license the above-named patient to be absent from the above-named institution [or certified house] for a period of on the following conditions:—

(1) The patient shall be under your personal care and control and shall not, except with the necessary consents, reside elsewhere than with you.

(2) The patient shall be returned to the said institution [or certified house] on the day of , 19 , or at an earlier date upon my written request.

(3) The patient shall at all times receive adequate care and supervision, special precautions being taken to prevent the formation of attachments with members of the opposite sex and any sign of this must be reported at once to me.

(4) An authorised officer of the Board of Control or of the institution [*or* certified house] or of the local health authority shall at all times be permitted to see the patient and to enquire as to his (*or* her) care and progress.

Dated this day of , 19 .

Signed .

Superintendent.

Form N

NOTICE OF RECEPTION

To be forwarded to the Board of Control and to the Local Health Authority within 48 hours after the patient's reception.

Notice is hereby given that , formerly residing at , was received into my care and control as a defective in this house on the day of , 19 .

The following particulars relate to the said defective:—

(i) age;

(ii) sex;

(iii) name and address of parent or guardian, or relative or other person at whose request the defective was received;

(iv) whether previously detained under the Lunacy and Mental Treatment Acts, 1890 to 1930, or the Mental Deficiency Acts, 1913 to 1938, or placed in an approved home, or under guardianship, or under care as a defective, or educated in a special school or class;

(v) if so, between what dates and where;

(vi) apparent (*a*) nature and degree of mental defect;

(vii) bodily condition.

(*a*) The terms in S.1 of the Mental Deficiency Act, 1913, should be used. [*See* definitions.]

Dated the day of , 19 .

The person having the care of the said defective at (*b*)

(*b*) Name of house (if any) and address.

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

Form P1

PETITION FOR AN ORDER SENDING A DEFECTIVE TO AN INSTITUTION OR CERTIFIED HOUSE OR PLACING HIM UNDER GUARDIANSHIP, PRESENTED BY A RELATIVE OR FRIEND

In the matter of A.B., of , in the county (borough) of , an alleged defective.

To S.T., a judicial authority[1] under the Mental Deficiency Act, 1913.

The petition of C.D., of , in the county (borough) of , sheweth as follows:—

1. The petitioner is 21 years of age or over.

2. The petitioner is [2] of the said A.B.

[*or* 2. The petitioner is a friend but not a relative of the said A.B.

The reasons why this petition is not presented by a relative are as follows:—

The petitioner's connection with the said A.B. is that:—
and he [*or* she] presents the petition in the following circumstances:—
][3]

3. The petitioner last saw the said A.B. at on the day of , 19 .[4]

4. The said A.B. to the best of the petitioner's knowledge and belief is a defective within the meaning of the said Act, being [5] and is subject to be dealt with thereunder

5. The petitioner undertakes to visit, personally or by someone specially appointed by him [*or* her], once at least in every six months, the said A.B. while detained [*or* kept under guardianship] under the Order made on this petition.

6. A statement of particulars concerning the said A.B. accompanies this petition.

The petitioner therefore prays that an Order may be made for sending the said A.B. to [6] [*or* for placing the said A.B. under the guardianship of [6]].

Dated the day of 19 .

Signed

Date of presentation

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

(1) *i.e.* a judge of county courts, a police or stipendiary magistrate or a justice specially appointed under the Lunacy Act, 1890.

(2) If a relative, state the relationship, *see* footnote.*

(3) Delete the bracketed part if the petitioner is a relative.

(4) The petitioner must have seen the alleged defective within 28 days before presenting the petition.

(5) State whether an idiot, an imbecile, a feeble minded person or a moral defective. (*See* definitions.)

(6) The name of the institution, certified house, or guardian proposed may be inserted at any time before an order is made.

* Relative, for the purposes of the Acts, means—husband or wife, or a lineal ancestor or lineal descendant, or lineal descendant of an ancestor, not more remote than great-grandfather or great-grandmother.

Form P2

PETITION FOR AN ORDER SENDING A DEFECTIVE TO AN INSTITUTION OR CERTIFIED HOUSE OR PLACING HIM UNDER GUARDIANSHIP, PRESENTED BY AN OFFICER OF THE LOCAL HEALTH AUTHORITY

In the matter of A.B., of , in the county (borough) of , an alleged defective.

To S.T., a judicial authority(1) under the Mental Deficiency Act, 1913.

The petition of E.F., of , in the county (borough) of , sheweth as follows:—

1. The petitioner is 21 years of age or over and is an officer of the local health authority of the county (borough)(2) of , authorized to present petitions under section 5 of the Mental Deficiency Act, 1913.

2. The petitioner last saw the said A.B. at on the day of , 19 (2).

3. The said A.B. to the best of the petitioner's knowledge and belief is a defective within the meaning of the said Act, being (3) and is subject to be dealt with under the said Act.

4. A statement of particulars concerning the said A.B. accompanies this petition.

The petitioner therefore prays that an Order may be made for sending the said A.B. to ,(4) [or for placing the said A.B. under the guardianship of (4)].

Dated the day of , 19 .

Signed

Date of presentation

[*Here set out S.1 of the Mental Deficiency Act*, 1913.]

(1) *i.e.*, a judge of county courts, a police or stipendiary magistrate or a justice specially appointed under the Lunacy Act, 1890.

(2) The petitioner must have seen the alleged defective within 28 days before presenting the petition.

(3) State whether an idiot, an imbecile, a feeble minded person or a moral defective. (*See* definitions.)

(4) The name of the institution, certified house, or guardian proposed may be inserted at any time before an order is made.

Form P3

STATEMENT OF PARTICULARS TO ACCOMPANY PETITION OR CONCERNING A DEFECTIVE PLACED BY PARENT OR GUARDIAN IN AN INSTITUTION OR CERTIFIED HOUSE OR UNDER GUARDIANSHIP

Names of defective in full.

Sex and age and date of birth if known.

Married, single or widowed.

Age when mental defectiveness first observed.

In case of a female, married or widowed, maiden name and name under any previous marriage.

Rank, profession or previous occupation (if any).

Religious persuasion.

Residence.

Whether previously detained under the Lunacy and Mental Treatment Acts, 1890 to 1930, or the Mental Deficiency Acts, 1913 to 1938, or placed in an approved home, or under guardianship, or under care as a defective.

If so, between what dates and where.

Whether subject to epilepsy.

Whether blind or partially blind.

Whether deaf or partially deaf.

Whether suicidal.

Whether of violent or dangerous propensities, and in what way these are shown.

Whether any near relative has been insane or mentally defective.

Names and addresses in full of one or more relatives of the defectives.

Names and addresses in full (if not already given) of the persons to whom notice of death is to be sent.

Dated the day of , 19 .

Signed .

N.B.—*Where the defective is a child, those particulars which are inapplicable to children need not be filled in.*

Form P4

MEDICAL CERTIFICATE

[To be used in all cases to be dealt with by Petition.]

In the matter of A.B., of , in the county (borough) of , an alleged defective.

I, the undersigned, K.L., hereby certify as follows:—

1. I am a person registered under the Medical Acts [and approved(1) by the local health authority for the county (borough) of or by the Minister of Health, for the purpose of giving medical certificates under the Mental Deficiency Acts, 1913 to 1938].

2. On the day of (2), at , in the county (borough) of , I personally examined the said A.B., and having read the definitions on this form I have satisfied myself that he is a mental defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (3) .

3. I have formed this conclusion on the following grounds, viz.:—

(*a*) facts observed by myself:—

(i) at the time of examination;
(ii) prior to examination;(4)

(*b*) facts communicated by others.

4. The said A.B. appeared to me to be (or not to be) in a fit condition of bodily health to be removed.

Dated the day of , 19 .

Signed

Address.

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

(1)No certificate may be given by a medical officer of any certified institution or house to which defective is proposed to be sent. If the person signing the certificate has not been so approved the bracketed words must be deleted.

(2)The examination must have taken place not more than 21 clear days before the date of the presentation of the petition.

(3)State whether an idiot, an imbecile, a feeble minded person or a moral defective. (*See* definitions.)

(4)Give date when observed.

Form P5

MEDICAL CERTIFICATE

[To be used in all cases dealt with under Section 3 of the Mental Deficiency Act, 1913.]

In the matter of A.B., of , in the county (borough) of , an alleged defective.

I, the undersigned, K.L., hereby certify as follows:—

1. I am a person registered under the Medical Acts [and approved(1) by the local health authority for the county (borough) of or by the Minister of Health, for the purpose of giving medical certificates under the Mental Deficiency Acts, 1913 to 1938].

2. On the day of ,(2) at in the county (borough) of I, personally examined the said A.B., and having read the definitions on this form I have satisfied myself that he is a mental defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (3) .

3. I have formed this conclusion on the following grounds, viz.:—

(*a*) facts observed by myself:—

(i) at the time of examination;

(ii) prior to examination;(4)

(*b*) facts communicated by others.

Dated the day of , 19 .

Signed

Address.

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

(1)No certificates may be given by a medical officer of any certified institution or house to which defective is proposed to be sent. If the person signing the certificate has not been so approved the bracketed words must be deleted.

(2)The examination must have taken place not more than two months before the patient is placed in the institution or certified house.

(3)State whether an idiot, an imbecile, a feeble minded person or a moral defective. (*See* definitions.)

(4)Give date when observed.

Form P6

CERTIFICATE AS TO THE IMPRACTICABILITY OF A MEDICAL EXAMINATION

In the matter of A.B., of , in the county (borough) of , an alleged defective.

I, the undersigned, O.P., of , in the county (borough) of , hereby certify that a medical examination of the above-named A.B. is impracticable.

Dated the day of , 19 .

Signed

Form P7

STATUTORY DECLARATION TO ACCOMPANY PETITION

In the matter of A.B., of , in the county (borough) of , an alleged defective.

We, the undersigned, C.D., of , in the county (borough) of , and I.J., of , in the county (borough) of , solemnly and sincerely declare as follows:—

1. The said C.D. is the person who presents the accompanying petition.

2. A.B., named in the accompanying petition, is to the best of our knowledge and belief a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (1).

3. The said A.B., is subject to be dealt with under the said Act by reason of the following circumstances—(2).

4. A petition under the said Acts [*or* a petition for a reception order under the Lunacy and Mental Treatment Acts, 1890 to 1930] was presented on the day of , with the following result—(3).

[4. No petition under the said Acts or for a reception order under the Lunacy and Mental Treatment Acts, 1890 to 1930, has been presented in respect of the said A.B.]

5. A medical examination of the said A.B. is impracticable by reason of the following circumstances—(4).

And we make this solemn declaration, conscientiously believing the same to be true, and by virtue of the provisions of the Statutory Declarations Act, 1835.

Declared by the said C.D.	Signed C.D.
.....	.....
and	
I.J.	
.....	
at	
.....	Signed I.J.
.....	.....
on the day of	
.....	
Before me	
Signed	
.....	
Justice of the Peace, Commissioner of Oaths.	

N.B.—*This form must be signed by the two declarants in the presence of the Justice of the Peace, or Commissioner of Oaths.*

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

(1) State whether an idiot, an imbecile, a feeble minded person or a moral defective. (*See* definitions.)

(2) Insert here such of the circumstances on this form as are applicable to this case.

(3) If the previous petition was dismissed a copy of the statement of reasons for the dismissal must be obtained from the Board of Control and appended hereto.

(4) Delete this paragraph if there has been a medical examination.

Circumstances which render a person, being a defective, liable to be dealt with, upon Petition, under the Mental Deficiency Acts, 1913 to 1938.

He is found { (*a*) neglected; (*b*) abandoned; (*c*) without visible means of support; (*d*) cruelly treated.

He is a person (*e*) with respect to whom a representation has been made to the local health authority by his parent or guardian that he is in need of care or training which cannot be provided in his home.

He is { (*f*) found guilty of any criminal offence; (*g*) ordered / (*h*) found liable to be ordered } to be sent to an approved school under the Children and Young Persons Act, 1933; (*i*) undergoing imprisonment (except imprisonment under civil process); (*j*) undergoing penal servitude; (*k*) undergoing detention in a place of detention by order of a Court; (*l*) undergoing detention in an approved school; (*m*) undergoing detention in an inebriate reformatory, (*n*) undergoing detention in an institution for persons of unsound mind; (*o*) undergoing detention in a Criminal Lunatic Asylum; (*p*) an habitual drunkard within the meaning of the Inebriates Acts, 1879 to 1900. (*q*) a person with respect to whom a report has been issued under the enactments relating to education that he has been found incapable of receiving education at school, or that by reason of a disability of mind he may require supervision after leaving school.

Form P8

ORDER SENDING A DEFECTIVE TO AN INSTITUTION OR CERTIFIED HOUSE OR PLACING HIM UNDER GUARDIANSHIP

I, the undersigned, S.T., being a Justice for , specially appointed under the Lunacy Act, 1890,(1) having considered the documents hereto annexed, namely—

The petition of C.D. in the matter of A.B.;

The medical certificates of K.L. and M.N.,

[or the certificate of O.P. that a medical examination of the said A.B. is impracticable;]

The statutory declaration made by the said C.D. and by I.J.;

[The consent in writing of Q.R., the (2) of the said A.B.(3);]

[The undertaking of the said C.D. to visit the said A.B. personally or by someone specially appointed by the said C.D. once at least in every six months while the said A.B. is detained [*or* kept under guardianship] under this Order(4);]

(1) Or the judge of the County Court of , *or* the Stipendiary Magistrate for , *or* a Metropolitan Police Magistrate.

(2) Father, mother, guardian, or person who undertakes or performs the duty of a parent or guardian.

(3) This paragraph only to be filled up if the petition is not presented by the parent or guardian.

(4) Delete this paragraph if the petition is presented by an officer of the local health authority.

Having personally seen the said A.B. [and having caused him to be medically examined by U.V. of](5);

Hereby find—

That the said A.B. is a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being (6)

Is subject to be dealt with under the said Act by reason of the following circumstances—

[That the consent of Q.R. the (3) of the said A.B. has been unreasonably withheld:

or That no parent or guardian of, or person who undertakes or performs the duty of a parent or guardian towards, the said A.B. can be found or that by reason of the parent or guardian being abroad any attempt to obtain his consent would result in undue delay in dealing with the petition](3):

And I hereby order the said A.B. who is a (7) to be sent to (8) to be detained there or in any other institution to which he may be transferred in accordance with the regulations for the time being in force under the Mental Deficiency Act, 1913, [*or* And I hereby appoint (8) of to be the guardian of the said A.B.]

Dated the day of , 19 . Signed

N.B.—Where a local health authority will by virtue of the Mental Deficiency Acts, 1913 to 1938, be responsible for the expenses of a defective ordered to be placed under guardianship, the order must recite that that local health authority has been given an opportunity of being heard, and must find that the defective resides within the area of the local health authority.

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

(5) Delete words in brackets if the petition is accompanied by medical certificates.

(6) State whether an idiot, an imbecile, a feeble minded person *or* a moral defective. [*See* definitions.]

(3) Father, mother, guardian, or person who undertakes or performs the duty of a parent or guardian.

(3) This paragraph only to be filled up if the petition is not presented by the parent or guardian.

(7) State religious persuasion, if any.

(8) Insert name of the institution, certified house or guardian.

Form P9

CERTIFICATE BY A JUDICIAL AUTHORITY IN THE CASE OF A FEEBLE MINDED PERSON OR A MORAL DEFECTIVE UNDER THE AGE OF 21 PLACED BY HIS PARENT IN AN INSTITUTION OR CERTIFIED HOUSE OR UNDER GUARDIANSHIP

(*To be appended to each Medical Certificate.*)

I, the undersigned S.T., being a Justice for specially appointed under the Lunacy Act, 1890,(1) do hereby certify that, having enquired into the case of A.B., of , in the county (borough) of , I am satisfied that the said A.B. is a (2) within the meaning of section 1 of the Mental Deficiency Act, 1913.

Dated the day of , 19 . Signed

[*Here set out S.1 of the Mental Deficiency Act,* 1913.]

(1) *Or* the judge of the County Court of

, *or* the Stipendiary Magistrate for

, *or* a Metropolitan Police Magistrate.

(2) State whether a feeble minded person or a moral defective.

Form P10

FORM TO BE USED IN CONNECTION WITH THE PLACING OF A DEFECTIVE IN AN INSTITUTION OR CERTIFIED HOUSE OR UNDER GUARDIANSHIP IN ACCORDANCE WITH SECTION 3 OF THE MENTAL DEFICIENCY ACT, 1913

I, (1) of , in the county (borough) of , being the person having power under section 3 of the Mental Deficiency Act, 1913, to place (2), the defective named in the attached statement of particulars and medical certificates, hereby place him in (3) [*or* under the guardianship of (4)] at

Dated the day of , 19 .(5) Signed

To(6)

(1)Name of "parent" or "parent or guardian".
(2)Name of defective.
(3)Institution or certified house.
(4)Name and address of guardian.
(5)This date must not be prior to the dates of the medical certificates and statement of particulars.
(6)Superintendent of institution or certified house or guardian.

Form R1

[Name of institution, certified house, *or* of dwelling where a patient is residing under guardianship.]

NOTICE OF ADMISSION

Date of reception order.

Notice is hereby given that was admitted into this institution [or certified house *or* dwelling] as a private [health service] patient on the day of , and I hereby transmit a copy of the order and other documents (if any) on which he was received.

Subjoined is a statement with respect to the mental and bodily condition of the patient.

Signed

Superintendent, Clerk *or* person having charge of the patient.

Dated the day of , 19 .

To the Board of Control.

Medical Statement

I have this day [*some day not earlier than the third day nor later than the seventh day after the day of admission*] examined the above-named patient, and hereby certify that the mental condition of the patient is as follows.*

and his bodily health and condition are as follows:—

Dated the day , 19 .

Signed .

Medical Officer *or* Medical Attendant.

* State with supporting facts whether an idiot, an imbecile, a feeble minded person or a moral defective.

Form R2

[Name of institution, certified house, *or* of dwelling where a patient is residing under guardianship.]

NOTICE OF TRANSFER FROM PRIVATE TO HEALTH SERVICE CLASS OR VICE VERSA

Notice is hereby given that , admitted into this institution [*or* certified house *or* dwelling] as a private [health service] patient on the day of , was on the day of transferred to the health service [private] class.

Dated the day of , 19 .

Signed .

Superintendent, Clerk *or* person having charge of the patient.

Form R3

[Name of institution, certified house, *or* of dwelling where a patient is residing under guardianship.]

NOTICE OF TRANSFER

Date of reception order.

Notice is hereby given that , a private [health service] patient received into this institution [*or* certified house *or* dwelling] on the day of , was, on the day of , transferred to by the authority of

Dated the day of , 19 .

Signed .

Superintendent, Clerk *or* person having charge of the patient.

Form R4

[Name of institution, certified house, *or* of dwelling where a patient is residing under guardianship.]

NOTICE OF DISCHARGE

Date of reception order.

Notice is hereby given that , a private [health service] patient, received into this institution [*or* certified house *or* dwelling] on the day of , was discharged therefrom on the day of , by the authority of

Dated the day of , 19 .

Signed .

Superintendent, Clerk *or* person having charge of the patient.

Form R5

[Name of institution *or* certified house.]

NOTICE OF ESCAPE

Notice is hereby given that , a private [health service] patient, received into this institution [*or* certified house] on the day of , escaped therefrom on the day of .

The circumstances and manner of the escape were as follows:—

Dated the day of , 19 .

Signed

Superintendent *or* Clerk.

Form R6

[Name of institution *or* certified house.]

NOTICE OF RECAPTURE

Notice is hereby given that , a private [health service] patient who was received into this institution [*or* certified house] on the day of and escaped therefrom on the day of , was on the day of recaptured under the following circumstances:—

Dated the day of , 19 .

Signed

Superintendent *or* Clerk.

Form R7

[Name of institution, certified house, *or* of dwelling where a patient is residing under guardianship.]

NOTICE OF DEATH

Date of reception order.

Notice is hereby given that , a private [health service] patient received in this institution [*or* certified house *or* dwelling] on the day of , died therein on the day of .

Dated the day of , 19 .

Signed

Superintendent or Guardian.

STATEMENT RESPECTING THE ABOVE-NAMED PATIENT

Name.

Sex and Age. Married, single *or* widowed.

Profession or Occupation (if any).
Usual residence (postal address) before admission. [If the patient has been transferred from any public or charitable institution or from a dwelling other than his usual residence, the residence before admission to such place should be given.]

Cause of Death

I.

Immediate cause.* *a*.....
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). *b*.....
c.....

II.

Other morbid conditions (if important) contributing to death, but not related to immediate cause. .....
.....

Whether or not ascertained by post mortem examination.

Time of and any unusual circumstances attending the death; also a description of any injuries known to exist at time of death or found subsequently on body of deceased, or a statement that there were none.

Names and description of persons present at the death.

I hereby certify that the particulars contained in the above statement are true to the best of my knowledge and belief.

Dated the day of , 19 .

Signed .

Medical Officer *or*
Medical Attendant of patient.

* This means the disease, injury or complication which caused death—*not* the mode of dying, as, *e.g.*, heart failure, asphyxia, asthenia, &c.

Form R.8

General Register

Date of Admission	Date of Order or Authority for Detention	Reference Number	Full Names	Sex		Age on Admission	Classification		Mode of Admission (indicate whether Section 3, 6, 8, or 9)			Statutory Class				Discharged or Transferred		Date of Death	Observations
				M.	F.		Private	Health Service	Direct	Indirect		Idiot	Imbecile	Feebleminded	Moral Defective	To	Date		
										By Statutory re-admission after previous irregular Order or lapsing of Order	By transfer from								

NOTE.—In case of death the Cause of Death should be stated in the Observations column.

Form R9

REGISTER OF MECHANICAL RESTRAINT AND SECLUSION

Duration of Seclusion in Hours	Reasons for Seclusion	Date	Names of Patients		Means of Restraint Employed	Duration of Restraint in Hours	Certificate of Medical Officer stating grounds upon which restraint was employed
			Males	Females			
							I certify that restraint was employed in this case on the following grounds :—
							Signed *Medical Officer or practitioner.*

Note.—At the beginning of this register a printed copy of any regulation or rule made by the Board and for the time being in force which relates to mechanical restraint or defines seclusion must be inserted.

Form R10

GUARDIANSHIP BOOK

For Patients under Guardianship and under Private Care

Date	Medical and Progress Reports	Dates and form of application of mechanical restraint* or dates and duration of seclusion	Signature and status of visitor

* In respect of each period of mechanical restraint a report must be obtained as soon as possible from a medical officer of the local health authority describing the means used and stating the grounds upon which restraint was employed.

In the case of a patient under private care the report should be obtained from the patient's medical attendant.

See Regulation 68 as to entry of above mentioned report.

Form V1

ORDER MADE UNDER SECTION 7 (1) OF THE MENTAL DEFICIENCY ACT, 1913, VARYING A PREVIOUS ORDER AND SENDING A DEFECTIVE TO AN INSTITUTION

Whereas on the an Order was made by appointing of to be the guardian of , a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being(1) ;

And Whereas the said has become unsuitable for guardianship;

And Whereas parent or guardian of the said have been given an opportunity of being heard:

Now, Therefore, I, , upon application made to me by hereby order that the said , who is a (2) be removed to .

Dated the day of , 19 .

Signed

A Justice for specially appointed under the Lunacy Act, 1890, *or* the Judge of the County Court of *or* the Stipendiary Magistrate for , *or* a Metropolitan Police Magistrate.

(1) State whether an idiot, an imbecile, a feeble minded person or a moral defective.

(2) State religious persuasion if any.

Form V2

ORDER MADE UNDER THE MENTAL DEFICIENCY (AMENDMENT) ACT, 1925, VARYING A PREVIOUS ORDER AND PLACING A DEFECTIVE UNDER GUARDIANSHIP

Whereas on the day of an Order was made by sending of in the county (borough) of , a defective within the meaning of section 1 of the Mental Deficiency Act, 1913, being(1) , to the in the county (borough) of ;

[And Whereas on the day of the said defective was duly transferred to the in the [said] county (borough) of ;]

(1)State whether an idiot, an imbecile, a feeble minded person or a moral defective.

And Whereas the said defective has now become suitable for guardianship;

And Whereas the responsible local health authority of and the parent or guardian of the said defective have been given an opportunity of being heard:

Now, Therefore, I, , upon application made to me by , hereby appoint of , to be the guardian of the said defective.

Dated the day of , 19 .

Signed .

A Justice for specially appointed under the Lunacy Act, 1890, *or* the Judge of the County Court of , *or* the Stipendiary Magistrate for , *or* a Metropolitan Police Magistrate.

Given under the official seal of the Minister of Health this tenth day of May, nineteen hundred and forty-eight.

(L.S.)

Aneurin Bevan,
Minister of Health.

I concur in Regulation 8 and 107 of the foregoing Regulations.

Jowitt, C.,
Lord Chancellor.

EXPLANATORY NOTE

(This Note is not part of the Regulations, but is intended to indicate their general purport.)

The amendments to the Mental Deficiency Acts, 1913 to 1938, effected by Part V of the National Health Service Act, 1946, and the Ninth Schedule to that Act, have necessitated corresponding amendments in the Mental Deficiency Regulations. These amendments are so numerous and extensive that rewriting of the whole of the Regulations has been found to be the only practical course.

The new Regulations follow the lines of the existing Regulations and all the major alterations are consequential on the amendments to the Mental Deficiency Acts referred to in the first paragraph of this Note.

The Mental Deficiency (Amendment) Regulations, 1948

1948 No. 2553

Made - - - -	*24th November,* 1948
Laid before Parliament	*25th November,* 1948
Coming into Operation	*27th December,* 1948

M.H. 10861o.

The Minister of Health, in exercise of his powers under sections 41 and 49 of the Mental Deficiency Act, 1913(**a**), and of all other powers enabling him in that behalf, hereby makes the following regulations:—

1. These regulations may be cited as the Mental Deficiency (Amendment) Regulations, 1948, and shall come into operation on the 27th day of December, 1948.

2. The Interpretation Act, 1889(**b**), applies to the interpretation of these regulations as it applies to the interpretation of an Act of Parliament.

3. After paragraph (1) of regulation 29 of the Mental Deficiency Regulations, 1948 (**c**), the following paragraph shall be inserted:—

(1) (*a*) Any person received in a certified institution or certified house in accordance with the provisions of section 26 of the Criminal Justice Act, 1948(**d**), for the purpose of medical examination and report, shall for the purposes of the certificate specifying the number of patients who may be received into such certified institution or house be reckoned as a patient.

Given under the official seal of the Minister of Health this twenty-fourth day of November nineteen hundred and forty-eight.

(L.S.)

Aneurin Bevan,
Minister of Health.

(**a**) 3 & 4 Geo. 5. c. 28.
(**b**) 52 & 53 Vict. c. 63.
(**c**) S.I. 1948 No. 1000, p. 1821 above.
(**d**) 11 & 12 Geo. 6. c. 58.